

pupil nurse and patient. It is true that we have not yet defined a standard for a trained nurse. But whether the term of training be two or three years, its course should be completed by the pupil without interruption, and we should deal honestly with a defenceless sick public, who would doubtless object to pay high fees for the services of undergraduates, if they knew that their nearest and dearest were placed at their mercy.

The training of private nurses is very important. I am inclined to think that the system of nurse training in England does not fit a woman to be a first class private nurse. In Canada and the States it is different, and I have been immensely impressed by the fact that the admittance of Pay Patients into all the best training schools provides a means of educating nurses for private practice in the best possible manner. In attending upon the pay patients in their single rooms nurses are trained in numerous details for which they would not have time in a general ward. Moreover, the training in the diet kitchens, where in some hospitals the cooking of food and the service for refined patients is taught, provides a system which, as yet, has not been attempted at home. Our nurses go straight out of the general hospital wards, where only the very poor are admitted, to nurse in private houses patients of very different habits. It is not surprising that many fail to succeed in private nursing.

So chaotic are private nursing affairs in England that well educated trained nurses are protecting themselves from the competition of the unfit by forming Co-operative Societies, each member paying 7½ per cent. of her fees to maintain the organization.

This includes a central office on the telephone, a Superintendent, and clerical workers, and other general expenses.

A standard of training and efficiency can thus be enforced, and also, if the Superintendent is a well qualified nurse, as she should be, good discipline can be kept up amongst the members. Fees are collected for the members, and the Committee, on which nurse members should have liberal representation, can carefully consider any complaint which may arise. I think the future of the private nurse is largely dependent upon commercial co-operation.

Miss MAUD BANFIELD (Polyclinic Hospital, Philadelphia): It may be interesting to you to know in looking over the hospital statistics in connection with Miss Peters' remarks I notice that the hospital board took between \$2,000 and \$3,000 for the services of the pupil nurses. This was turned into the general fund of the hospital.

Miss PETERS: I think that is for supporting the nursing school.

Miss BANFIELD: It is quite impossible to tell what it is for.

Mrs. ROBB: I should like to ask why the pupil nurses should support the schools if they do work enough to pay for their training? Why should they assist in supporting the schools?

Miss ISLA STEWART (St. Bartholomew's Hospital, London): In the hospital with which I have the honour to be connected, the term of training for nurses is three years, but we bind them to remain four years, that is, for one year after they have obtained their certificate. During the first three years they are twice examined, and if their practical and theoretical work has been found to be quite satisfactory they are

awarded a certificate of efficiency. In the fourth year they receive payment as fully qualified nurses. The fourth year is spent either in the hospital or on the private nursing staff. I attach great importance to this last year. The nurse has, up till then, had no real responsibility, but now much is expected of her. She gets some authority. She is more her own mistress, has more liberty, is less looked after, and learns to stand by herself, with some assistance from those who have already learned to walk. In fact, she has now time to arrange and estimate her knowledge and experience, and to deepen the channel of her life. The enormous benefit of that year to the nurse is the development of her character, which, in many instances, the acute observer can see in her expression. Its value to the hospital is also great, as it provides for the continual presence of a fully trained nurse in the wards, the care of the patients is therefore never left even for a few hours in the hands of half trained, unqualified women.

Mrs. ROBB: Do you keep them on the same basis during the fourth year as the third? What work do they do?

Miss ISLA STEWART: We have in every ward a Sister, who has been for some years in the service of the hospital. She is in full charge of the ward, and the certificated nurse is immediately under her authority. If the Sister is out, ill, or for any cause absent from the hospital, the certificated nurse takes her place. If the Assistant Matron, my secretary, or one of the night superintendents is off duty I take the most capable of these qualified nurses to fill her place, and there is always one nurse assisting in the house-keeping in the Nurses' Home. In this way they gain much experience, which is useful to them later.

Mrs. ROBB: And the compensation, is that the same?

Miss ISLA STEWART: They are paid \$12 (£2 10 0) a month during the fourth year, which is good pay for a hospital nurse in England. If a nurse remains longer than four years her salary is raised to about \$17 a month.

We have a staff of private nurses in connection with the Hospital, whose headquarters are in a house near the Hospital, but are quite apart from it. No nurse is sent out to do private nursing until she has obtained her certificate of three years' efficient service in the Hospital. When she is not at a case she can live in the home, and is therefore spared the expense of keeping an apartment. She is paid a salary of \$12 a month, and in addition she has 15 per cent. rising to 30 per cent. on her earnings.

Miss AMY HUGHES: As a representative of one of the large Hospitals and Training Schools, Guy's Hospital, I would like to say that the course of training there is on the same lines as St. Bartholomew's as described by Miss Stewart. The nurses are trained for three years, and receive their certificate at the end of that time. The private nursing Institution is attached to the Hospital, but has quite distinct premises and constitution. It maintains 42 pupil nurses in training at the hospital and only supplies the public with fully trained and graduate nurses who receive a fixed salary. The net profit earned in fees by the Institution is divided amongst the senior nurses to be applied in the provision of old age pensions.

(To be continued.)

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