

These are: first, the absence of preparatory work; second, lack of uniformity in entrance requirements; third, indefiniteness in the higher professional branches of supervisory and executive work, such as fit women to assume positions of authority. All these weaknesses are well recognised. The latter is receiving more attention than the first (only two, Johns Hopkins and Waltham, schools giving preparatory teaching). It will be more easily improved by hospital teachers than the first, for few hospitals could undertake the cost and burden of preparatory teaching.

#### IV. The Dissimilarities in the conduct of the Three Years' Course.

So far from being unfortunate, I believe the variations and dissimilarities found in the different schools to be wholesome and significant of vigour. They present, in toto, a set of practical experiments in working out a good three years' course, and afford means of critical comparison of methods which must certainly enable us to advance with more rapidity and intelligence than we could do were we all bound to a fixed method.

#### V. The Hours on Duty.

Less advance has been made in this direction, on the whole, than in any other. While several schools have established the eight-hour day, and while others have lightened the working hours in other ways, yet, as a rule, the long hours are left too nearly what they were before the addition of the third year.

#### VI. The Reappearance of Private Duty into the Curriculum.

What I personally regard as a serious danger is the tendency to reintroduce undergraduate private duty into the third year. As one looks over the whole field one is quite alarmed at this tendency.

I hold that undergraduate private duty means for the pupil interruption or entire loss of those opportunities which are peculiar to hospital work, and which she cannot always compensate for later, whereas she may have her whole life for private duty. It is a distinct injustice to the graduate nurse, who, dependent on herself alone, is obliged to compete with the undergraduate who is supplied with her living and who is then sent out to underbid the graduate by about ten dollars a week.

The injustice to the patient I do not feel to be serious, for the patient, her friends, and physicians know perfectly well that they are sending for a pupil nurse. They prefer her on account of the less cost.

The opinion that a certain amount of private duty is a valuable part of the education of the

pupil nurse is held in all sincerity by some superintendents.

The whole question, before it could be judged fairly on its merits as an educational factor, should be stripped of all its features of financial profit to the hospital. If nurses were sent without cost at all to the patient, solely on the ground of the advantage to the nurses' education, it could then be discussed as a part of the pupils' course of training. But so long as they bring in an income to the school, it is impossible to dissociate the commercial element from the educational plan.

#### VII. The Extension of Co-operation in the Three Years' Course.

Some encouraging advances are being made in this direction. Much more, however, remains to be done.

Some of our most vexing problems would be solved if each large school could make itself responsible for the nursing of one or two small and incompletely-equipped institutions, which are now compelled to conduct their own schools, or if several such institutions should agree upon maintaining, co-operatively, a central school which would provide the nursing for all, thus giving one set of pupils the advantages of a wide and full experience, instead of giving *several* sets a comparatively restricted education.

These are some of the difficulties we have before us.

### POST-GRADUATE WORK IN HOSPITALS.

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It is with satisfaction as well as interest I have noticed that the necessity for the development of post-graduate work is being recognised more and more each year. Most large hospitals now allow their own graduates to return to them for two or three months and work in their wards. This much has been done to brush up the old graduates. Far better, I consider, however, what can be done for those who have only had the advantages afforded them as graduates of small hospitals. In order to illustrate this, I will give a short outline of post-graduate work as it is conducted at the Woman's Hospital in New York. All the pupil nurses here must have diplomas, and they are, as a rule, graduates of small schools who have come here to avail themselves of the opportunities this hospital gives them.

The nurses are on duty from seven to seven, with two hours off duty daily, one afternoon a week, and half of Sunday. Classes and lectures are held each week. Class work consists of systematic instruction in practical nursing, in hygiene, materia medica, physiology and anatomy,

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