

Letters to the Editor. NOTES, QUERIES, &c.

Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not IN ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.

FEVER NURSES AND STATE REGISTRATION.

To the Editor of the "British Journal of Nursing."

DEAR MADAM,—I have read with much interest Dr. Biernacki's pamphlet on the position of fever nurses under Registration, to which reference was made in your issue of June 8th, and I have much pleasure in acceding to your request to express the opinion I have formed on the merits of the case he has so ably represented.

With Dr. Biernacki's main contentions I am in complete agreement, and it would be difficult to believe that anyone conversant with the work performed by the nurses in a modern fever hospital, and at the same time possessing an interest in the professional welfare of this large and deserving section of the nursing profession, could be otherwise than in sympathy with the aims Dr. Biernacki has advanced on their behalf.

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As a result of 20 years' intimate association with the administration of several of the large Metropolitan fever hospitals, I can unhesitatingly support Dr. Biernacki's contention, that fever nursing has become a highly specialised branch of nursing work, and that in view of their numerical strength and of the highly technical character of the duties they are called upon to perform, it is only just that nurses who have satisfactorily undergone a period of fever-training should have the opportunity of gaining some distinction in recognition of their special qualification.

The want, as Dr. Biernacki suggests, could best be met by the institution of a certificate or diploma by a central organisation, representative of fever nursing, who, in addition to holding the examination, would formulate the conditions under which such certificate would be granted, most important of which, being, of course, the period of fever training to be insisted on, and the size and status of isolation hospitals, in which such training could be recognised.

Practically, all fever hospitals now give their nurses on leaving some sort of a certificate on which is recorded the period of their service, and the manner in which they have discharged their duties, but the value of the certificates issued by different hospitals varies in relation to the opportunities of gaining experience, and the standard of knowledge insisted on by the authorities of the several hospitals.

If, however, the standard and requirements were settled by a properly constituted central authority representative of fever nursing, this objection would be at once removed.

For my own part I see no reason why the institution of a recognised certificate of fever training should have any connection with General Registration at all. However desirable it may be that every nurse should have acquired some practical knowledge of fever nursing before qualifying for General Registration, the realisation of the idea, as Dr. Biernacki points out, is quite impossible in practice, and the mere fact of a nurse being required to have passed through her general training before going up for a certificate of fever training, which would represent an "honours diploma" in a special branch of nursing work, would seem to imply that such certificate was outside the scope of General Registration.

Were facilities granted for obtaining this distinction, the adoption of State Registration would bring no injury to the fever nurse who had obtained her general training, but for the nurse whose sole experience of nursing has been gained within the walls of a fever hospital, the case is very different. In her case the outlook is by no means reassuring. Many of these nurses are entirely trustworthy; and some, in addition to being highly skilled in their own particular field, are quite able to hold their own in general medical nursing with their more fortunate sisters who have undergone general training.

To nurses who are so situated, Dr. Biernacki gives sound advice. The only road to salvation lies through general training. This, unfortunately, is not attainable by all. Some cannot afford it. To others, the necessary opening is not forthcoming.

A good many Matrons of general hospitals and Poor Law infirmaries are averse to taking as probationers nurses who have previously worked in a hospital; but, on the other hand, some Matrons recognise the usefulness of nurses who have gained some practical experience of nursing in a fever hospital of good repute, and in exceptional cases will credit the nurse with a portion of such work as part of her general training. The principle appears to me sound in that it accords recognition to work, the value of which as an item in general training is by no means adequately realised, and the practice is one which might with advantage be extended. On the other hand, I had an experience lasting over several years of an arrangement under which nurses were received from one of the general hospitals for periods of six months for fever training, such service being reckoned as a part of their general training; and the result was eminently satisfactory to both contracting parties.

The fact that fever training cannot be made a necessary item in the curriculum required for Registration is no reason why greater facilities for interchange of nurses between the general and fever hospitals should not be more widely adopted, and that it would be to the advantage of both I

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