

to the children, which was not altogether satisfactory, and could only be done in a very perfunctory manner. Now the County Medical Officer had limited their work, and required them to look after the general condition of the scholars with special regard to cleanliness, and to cases of contagious skin diseases, such as ringworm, scabies, etc. This work was found to be so extensive that the number of nurses had to be increased twice until now there were 32, which was still insufficient. As to what is now being done, the school nurse attends a number of schools, varying from 24 to 48, too large a number to get good results, but it is hoped to considerably increase the number of nurses. With the help of the head of the school, the nurse goes through the children with the view of finding out how many are infected with vermin in hair or clothes, and if any have any form of skin disease. Such children are excluded from school, and if, after repeated warnings, they are still found unfit to associate with other children, the case is taken up by the Divisional Superintendent, and the parents are summoned at the Police Court to explain why the children are not at school. When the magistrate hears from the nurse that she was obliged to send the children out of school he usually imposes a fine.

In regard to cases of skin disease, considerable difficulty arises in connection with the want of agreement as to a cure. Certificates are given by medical men without microscopic examination, and therefore their verdict may not be the same as that of the Council's medical officer, who makes such an examination.

Another important branch of the work is that of urging the use of the cleansing stations where free baths are provided, and the clothes disinfected. Home visiting is also a valuable branch.

As regards the nurse employed, Miss Pearse held that she must be thoroughly trained, very conscientious, as she works a good deal alone, observant, kind hearted, sympathetic with the difficulties of parents, tactful in her dealings with the teachers, and enthusiastic.

In conclusion, Miss Pearse expressed the opinion that to spread the knowledge of hygiene and public health is quite as much the work of a nurse as nursing people back to health when they are really ill.

Discussion.

MISS WORTABET.

In opening the discussion, Miss Wortabet first spoke in English, giving a synopsis of the various subjects which had been discussed, viz., in connection with childbirth, infant mortality, the fight against tuberculosis, and the work of the nurse in public schools. She said all these questions had already been raised at the Nursing Conference which took place in London in November, 1906, that is, whether a monthly nurse ought to be a certificated midwife, and even so, whether she should not have her general training. With regard to the point on which Mlle.

Chaptal had insisted, viz., that every mother should be encouraged to nurse her own child, and that it was a greater charity to give the mother food to enable her to do so, than to provide her with sterilised milk for the infant, that also was a point which Miss Hughes had spoken about at the London Conference. The fight against tuberculosis amongst the poor, where the whole family frequently occupied not only the same room, but the same bed seemed an unsolvable problem. In looking around amongst the faces of the audience, she could see that the majority, if not English women, were of English speaking nations, or knew English well, and, therefore, for the sake of her French sisters and colleagues she would continue in French and explain to them what had been said during the course of the morning. This seemed to give the French nurses much pleasure. She told them that though she had organised training schools, and had nursed in Syria, in England, in Egypt, and in France, yet if she were asked which were the happiest years of her life, she would answer the years she spent in nursing the sick in their homes. She also explained to them that neither district nursing nor school nursing are known in France as they exist and are understood in England and America.

MISS L. L. DOCK.

Miss L. L. Dock said that she thought the tendency was to make the School Nurse too much of an inspector. She should not have too many schools to supervise. The most important part of her work was to handle the children. She should not be a perambulatory directing machine. In the schools she should attend and dress the children under the direction of the physician. In the home, if a child's head had to be treated, she should mix the solution herself the first time, and show the mother how to apply it, saying "Now, *you* must do it this way." In the same way she should dress ringworm. Then the nurse must watch that child and see that it comes back to school.

The chief part of the work of the medical man was to make thorough physical examinations at least once a year. The nurse should relieve him of detail, and her chief value lay in her doing as much nursing as possible. An interesting experience had been gained in a public school in New York in connection with 75 bad cases of adenoids, which had been operated on and afterwards sent to the country as test cases. The difference of the standing of these children in their studies before and after was most marked.

DR. LANDE.

Dr. Lande, in speaking about the duties and existence of school nurses, said that at the girls' school at Bordeaux, where they have 600 pupils, 100 of whom are boarders, a nurse had resided at the school, for the last three years, and the pupil nurses of the Tondu Hospital now take a month's training at the school in this branch.

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