

the "sweeping," to be effective, must spoil the polish, and it is then necessary to spend a great deal in wax and in labour to put the polish on again. Unpolished floors are not impervious, and are, therefore, insanitary. Linoleum, incidentally makes an excellent floor from the surgical point of view. I wish it were possible to impress the average probationer that her "menial" work of damp rubbing of floors and lockers is really surgical work. Once the dust has settled, it can easily be taken to another patient, and this is not rendered much more unlikely by the interposition of a glass screen, or even of a party wall in the same block.

Then it is undoubtedly wise to take some sort of precaution to protect the air in the neighbourhood of a patient who coughs much (as when he is suffering from whooping cough as well as scarlet fever), or who has a markedly septic attack. This can be done by an L-shaped glass screen between his bed and the next—this is a fixture—or by surrounding the bed with screens covered with sheets wrung out of some disinfectant solution. The latter method is, I believe, best, because the barrier is movable, and can be adapted at once to any patient requiring it, and also because the wet screens arrest and "fix" the infective matter at once. The disadvantage is that they are not transparent, and the patient is hidden from the instant view of the nurse. At Monsall both these methods are employed, but I think that I prefer the wet sheets, and I know that the nurses do. The glass screen requires a great deal of polishing.

Thirdly, while the heating of the wards by radiators placed round the walls is undoubtedly the best method as far as the temperature of the ward is concerned, yet these contrivances are veritable dust traps, and are, of necessity, placed in badly lighted situations. Usually they are very close to the head of the beds, and, in consequence, the patient's mouth and nose are in the direct path of the dust that rises from the hot surfaces. Consequently, exceptional care should be taken to remove all dust, not only from the radiator itself, but from around and underneath it, and the cloths employed should be quite wet.

(To be continued.)

QUEEN VICTORIA'S JUBILEE INSTITUTE

Transfers and Appointments.—Miss E. Burnett to Woolton, Miss E. Connell to Penzance, Miss J. Lloyd to Glossop, Miss G. A. Sears to Brighton, Miss E. E. Silverwood to Wallsend-on-Tyne, Miss G. Strange to Adlington, Miss E. Sykes to Watford, Miss E. L. Wells to Clitheroe, Miss F. A. Wright to Portsmouth

Progress of State Registration.

THE NATIONAL COUNCIL OF WOMEN AND REGISTRATION.

The following Resolution will be submitted to the Annual Meeting of the National Council of Women of Great Britain and Ireland at Aberdeen in October.

It will be proposed by the Lady Helen Munro-Ferguson, and seconded by Miss A. W. Gill, R.R.C., Superintendent of Nurses, Royal Infirmary, Edinburgh:—

RESOLUTION.

"That this National Council of Women considers it is desirable, both in the interests of the professional status of nurses and of the public who use their services, that provision should be made for their Registration by the State, such Registration to be under the supervision of a Central Board, upon which nurses shall have direct and adequate representation."

WELCOME HELP.

We acknowledge with thanks the following most welcome donations towards the Nurses' Registration Bill expenses:—

	£	s.	d.
Miss M. N. Cureton	1 1 0
Miss K. L. Burleigh	1 0 0
Miss C. C. du Sautoy	7 6
E. T., Member R.N.S.	2 6
Miss Ailie Smith	2 0

THE IRISH NURSES' ASSOCIATION AND REGISTRATION.

A special meeting of the Executive Committee took place on Thursday evening, July 30th, at the rooms of the Association, 86, Lower Leeson Street, Dublin. It was convened by the President, Miss Ramsden, Matron of the Rotunda Hospital, who took the chair. She said that this meeting was called for the purpose of condemning the action of those who had added a Clause to the Bill for the Registration of Nurses excluding Irish Nurses from its benefits, if it passed; and practically meaning "No registration" for them. The meeting, which was a large one, voiced its amazement and extreme indignation at such a measure, and were one and all determined to leave no stone unturned to secure the legitimate rights of Irish nurses to participation in this Bill, which was for the United Kingdom. A representative and important Sub-Committee were appointed to investigate and take steps in the matter, and the meeting ended.

This Committee met again on Monday last, and has already received promises of ardent support from several members of the Irish Party.

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