

With the help of the Municipal Council of Paris, and of the President of the Education Commission, M. Rebeillard, the trial was attempted. "Let us say, at once," said Mme. Jacques, "that it has given the best results. And yet *what scepticism, what discouraging advice for the promoters of the idea, what threats from all sides.*"

At a preparatory meeting "the doctors, the Inspector of Primary Schools, and many other officials were present to hear the programme, drawn up by M. André Mesureur, of this innovation, of the hopes it gave birth to, and of the difficulties they expected and were prepared to overcome." Only the two Directrices of the schools where the experiment was to be tried, Mme. Besnard, and Mme. Alombert shared the confidence of the pupils of the Salpêtrière School and of their Matron. A few weeks afterwards the "blue ribbons," as the pupils of the Salpêtrière School for Nursing are called, crossed the threshold of the two Schools. They were the first nurses who for the first time in Paris placed their devotion, their hospital science, their teachers' authority on hygiene by practice, at the service of the little school children. Their most faithful allies were the children themselves who gave the two "blue ribbons" the name of "*dames de propreté.*"

After describing the method of work of these School Nurses, including the visiting of the parents, and its value as a preventive agent, Mme. Jacques said "What have we not heard concerning this visiting? The doctors have openly accused us of competing with them. When the nurse, to control the illness of a child, or take home a suspicious case, will enter a family, the doctor will no longer be called in; she will take his place; she will prescribe, and the doctors will lose their patients. . . . You here present, who are all professional, know how ridiculous and false these accusations are; but bear in mind that this hatred of the hospital nurse is a drawback in France to the efforts of those who wish to raise the standard of nursing. They insist on believing that the hospital nurse wishes to be a semi-doctor, when she knows that her rôle is to be his helpmate. At the School of the Salpêtrière we have never been intimidated by those who feared that my pupils were learning too much."

MISS FLORENCE MELLY said that before the advent of the School Nurse children with little ailments were kept at home; now they went to school to be cured. Government grants went up because of increased attendance, and the rates were saved.

MISS AMY HUGHES described the work of the School Nurse under the Education Authority in Cumberland, where the nurse accompanies the Medical Officer of Health on his inspections, and also visits the parents. She emphasised the visiting of the children's homes and the education of the mothers as the crux of the question.

#### MESSAGE FROM A DELEGATE.

During this Session a letter was read from Mme. Hadji Mischef, Delegate to the Congress of the Bulgarian Red Cross Society, expressing her thanks for the opportunity of attending the Con-

gress and learning something of the admirable work done in England. She should advise the sending of a Red Cross Nurse from Bulgaria to be trained in England to learn the approved methods of work.

#### SECTION V.

Sir Dyce Duckworth presided at this Section, which dealt with training and inspection (a) on the official programme being "Different Standards Required."

LADY HELEN MUNRO FERGUSON, who presented the first paper, said that she preferred to alter the title to "A Standard Required," for we had not yet got the length of having one recognised standard in the nursing profession, and therefore it would be premature to discuss the merits of different standards. The Congress had for two days been discussing the beneficent work of the trained nurse, and yet no two people were quite agreed as to what constitutes a trained nurse, or what constitutes training. This general vagueness, and the fact that no authority exists which can lay down any ruling on the subject, had specially affected District Nursing, and that for three reasons: (1) Its management is in the hands of lay committees, who have not the knowledge and experience to enable them to distinguish between the qualifications of one nurse and another, or one certificate and another; (2) the central idea of many committees had been to provide an individual combining the dual offices of nurse and general servant; and (3) to aim at doing things as cheaply as possible, there being a general impression, not always justified, that the nurse with an indefinite amount of training is cheaper than her better qualified sister.

Lady Helen showed that at the head of the District Nurses are the Queen's Nurses, with their three years' hospital and six months' district training. Then came Village Nurses, Cottage Nurses, and Holt-Ockley Nurses, between whom there is no very clear line of demarcation, though their training varies from three months' district training in monthly nursing to a year or eighteen months in some kind of hospital or institution. In addition, "hospital failures," young women from nursing homes, and *bonâ-fide* midwives were all practically doing the same work. As there is no standard and no nursing authority, the decision as to the character and period of training is left entirely to each individual Committee, many of whom would be thankful to be relieved of this serious responsibility by receiving authoritative guidance on the subject. Lady Helen showed further that the salaries paid to nurses often bear no relation to the value of their services, and where patients subscribe, their payments are exactly the same whether they are to be attended by a trained, semi-trained, or wholly untrained nurse.

As illustrating the indefinite ideas as to training, one advertisement for a fully-trained nurse brought in applications from an applicant who had a certificate for monthly nursing; from others who had had no training, but had worked in districts; from a hospital failure; from a woman

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