

it would not have been possible to get together such a deputation, most of the members of which represented important Societies. Thus, Sir Victor Horsley and Mr. Smith Whitaker were there as the representatives of the British Medical Association, numbering 20,000 medical practitioners; Sir William Macewen travelled from Scotland to take part in it, and the National Union of Women Workers, numbering many thousands of women, the Women's Local Government Society, and the Women's Labour League all supported the nurses.

### III.

The next resolution, which was proposed by Miss G. B. Macvitie, was seconded by Miss Beatrice Kent, and was very warmly received:

"That hearty congratulations be sent to the Nurses in the six States in the American Union, the Legislatures of which have, during this session, passed Bills for the Registration of Nurses."

### IV.

Miss H. L. Pearse, Superintendent of School Nurses under the London County Council, proposed the next resolution, which was seconded by Miss Beatrice Cutler, Hon. Secretary, National Council of Trained Nurses:

"That this meeting approves of the proposal made by the Parliamentary advisers of the Society, that a Conference be held between representatives of Societies promoting and supporting the three Bills for the State Registration of Nurses."

### V.

The last resolution was moved by Mrs. Lancelot Andrews:—

"That the members of the Society for the State Registration of Trained Nurses, in annual meeting assembled, re-affirm their determination to oppose any Bill for the Registration of Nurses in Scotland providing for reciprocity of registration unless the standards of training and examination are equivalent to those enforced for England and Ireland.

"This Society is of opinion that there should be a single portal to the Nurses' Register—through an examination regulated by the General Council for the Registration of Nurses for the United Kingdom."

Mrs. Fenwick seconded the resolution in the interests of trained nurses in Scotland.

The Chairman said that we constantly heard that "English people don't understand Scottish nursing," but she could not see wherein Scottish nursing differed from that of any other nationality.

A hearty vote of thanks proposed by Miss Elma Smith, Matron, Central London Sick Asylum, Hendon, and seconded by Mrs. Shuter, to the President and Hon. Secretary for their work in the past year, and one proposed from the chair thanking the Registered Nurses' Society for the use of its offices, concluded the proceedings.

## Lady Dudley's Scheme.

The report of Lady Dudley's Scheme for the Establishment of District Nurses in the Poorest Parts of Ireland is always an extremely interesting publication, and that for the present year is fully up to the usual standard, both as regards production, illustrations, and subject matter. It is now six years since the first two nurses were established, and there are eighteen districts in which the nurses are at work.

The Committee report the following changes in the nursing staff:—"Of the older nurses, Nurse McWilliam has resigned her post at Keel, and has been replaced by Nurse Comerford, who has been stationed at Pulathomas; while Nurse Walshe has left Glengarriff to take up work under the Department of Agriculture and Technical Instruction.

"The committee cannot lose these nurses without feelings of regret as well as of gratitude for the splendid work which they have done, and the results of which they are leaving behind them. But experience has taught the organisers of the Scheme to rely with confidence on receiving from their nurses, whether old or new, untiring and enthusiastic work for the cause which both alike have so earnestly at heart."

The nurses' reports of their work, which are received each month, are most interesting, as the following typical cases will show:—

Called at 6 a.m. to attend a confinement case in Feenish Island. The morning was very wet and dark save for the flashes of lightning that at intervals "illumed" the sea. When midway across, a sudden squall arose, the waves rose very high, and dashed over all sides of our boat, completely drenching us. On landing in the island I received a message that the patient was very bad, so I hurried to the house and had to remain for six hours in my wet clothing, and feeling very miserable indeed. After seeing my patient safely through, I proceeded to the teacher's residence, where I borrowed some dry clothes. The weather continued so bad that I could not get off the island till 12.30 the following day.

Called at 3 p.m. to attend a case five miles distant. Found the patient (a woman) in a very weak condition, and with wretched surroundings. That morning she had been attacked by three of her neighbours (all women) and cruelly beaten with stones. The doctor was in attendance, and found she had sustained severe injuries—two ribs broken, a broken nose, and several wounds on the head and face.

Called at 2 p.m. to attend a case of pneumonia. I found the patient, a woman aged about 35, in bed in a very small room, which, besides lacking ventilation, was in a very dirty condition. After attending the patient I cleaned the room and succeeded in opening the window, which she informed me had never been opened before. I spoke to her on the subject of fresh air, and explained its beneficial effects. I was greatly pleased to find that every time I visited subsequently the window was open and the little room very clean and tidy.

Called to a case at 10 a.m. (by wire). I had no

[previous page](#)

[next page](#)