was laid upon the lack of uniformity in methods in the various schools as shown by the State examination papers. As one illustration, the report cited the replies to a practical question as to the method of preparing normal salt solution, the time of sterilisation varying all the way from three minutes to three hours: The same variance was shown in regard to the sterilisation of instruments and rubber gloves. Such divergencies make evident a total lack of appreciation of fundamental principles.

Again, while I was writing this paper, a Superintendent of Nurses told me that the weakest examinations taken by the third year students were those in the practice of nursing, and that, mind you, after a three years' course of study and practice. In private duty, that great test of a nurse's practical knowledge, criticism is too often incurred for a lack of thoroughness in the practical part of This also is one of the chief the work. stumbling blocks in the affiliation movement. Nor is this lack of common methods and knowledge and practice peculiar to one country. It exists in all countries where modern nursing has been established. It is small wonder, then, that there is so much hesitancy among us in accepting on trust graduates from other schools and other countries, for how can we do otherwise when no reliable tangible proof of their efficiency or standing can be supplied, and yet a vital reason for a greater similarity in our practice of nursing lies in the constant and ever-increasing interchange of nurses from one country to another. They are now scattered over the face of the earth, doing all manner of nursing work, and not infrequently representatives of several countries are to be found working side by side, but not always hand in hand, the existence of a discordant note being mainly due to widely varying points of view and methods of work. I have heard nurses deplore these differences, fully understanding that they lead to a lack of harmony and misunderstandings; nor should the effect upon the patients be lost sight of. But results can never be otherwise so long as we work from a distinctly individual standpoint in our teaching and training, as we are doing to-day.

EDUCATIONAL PROBLEMS.

The lines upon which for the past few years nurses in different countries have been endeavouring to create a nursing standard are of such a character that the present phases could be very well, if not better, treated internationally to our mutual benefit, and perhaps to the quicker fulfilment of our aims. The most important educational problems that we have dealt with so far, that might be taken up by an International Educational Committee,

are familiar to all of us, and for the sake of convenience might be roughly grouped as follows:—

1. The Principal of the School, her qualifications as to Education, Training, Special Preparation and the holding of special certificates

as proofs of such preparation.

2. The Curriculum of Training, including such subjects as the Preliminary Course, Affiliation, Inspection of Schools, Nursing Literature, Central Schools or Colleges, Central Boards of Examiners.

3. The Candidate and Qualifications, including Education, Age Limit, Examinations, Re-

muneration.

4. The Problems of the Graduate Nurse, including those of Centralised Directories, Postgraduate Courses, Registration.

In this grouping the Principal and her qualifications stand first, for practically everything depends upon her ability, her knowledge, and her standards, and yet in the history of nursing up to the present time no definite educational standard has been required of this important teacher beyond the fact that she must be a trained nurse. To really reach a nursing standard, no time should be lost in providing for and in requiring of women who wish to qualify for positions as heads of training schools definite courses of study and work relating to such duties, followed by examinations and the giving of special certificates of qualification. These fundamentals being once established, all such appointments should be made for merit alone and not through influence, as is sometimes the case.

The curriculum which comes next in order offers many problems. Even after all these years the length of training is still unsettled, and is quite uncontrolled, except in a few States of America. It is absolutely necessary to settle upon a preliminary course of training and a uniform length of time for it; what subjects and how they shall be taught, together with the amount and kind of practical work to be done.

Next comes the question of affiliation of the different kinds of hospitals, in order to afford greater experience and variety in practical training. With this should go the inspection of schools for the sake of uniformity and maintaining the average. Then the proper control of nursing literature is important and essential. With the remarkable array of nursing books on the market at present the public has no means of knowing what we consider to be good or bad, while we ourselves calmly accept through the medium of their literature the teaching of amateurs and those who can be only superficially informed.

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