

# THE BRITISH JOURNAL OF NURSING

WITH WHICH IS INCORPORATED  
THE NURSING RECORD

EDITED BY MRS BEDFORD FENWICK

No. 1,189.

SATURDAY, JANUARY 14, 1911.

XLVI.

## Editorial.

### THE STANDARD FOR SCHOOL NURSES.

The school nurse has come to stay. Her value has been proved not only in the County of London, where, under the London County Council, the staff is being considerably increased, an increase which no doubt will continue, but also in country districts. In London there is no question as to the type of nurse to be employed. She must possess a recognised certificate of training, and when appointed, specialise in school nursing to which all her time is devoted, so that she is expert and efficient in this branch.

In rural districts the position is not so simple, the whole time of a nurse is not always required, and the question of how best school nursing may be combined with other similar duties arises. Some medical practitioners advocate the combination of school and district nursing, the local District Nursing Association being subsidised for the purpose. Others like Dr. Sidney Barwise, County Medical Officer for Derbyshire as quoted in *School Hygiene*, reports "The nature of a district nurse's work frequently interfered with her school duties, and in the recognition of ringworm they utterly failed. With few exceptions they did not show the same ability and method as the whole time nurses, all of whom are fully trained. By the present arrangement of seven whole time nurses and twenty three instead of seventy eight district nurses, a considerable financial saving has been effected, as district nurses cost about one third more."

Dr. Barwise suggests the combination of the office of school attendance officer with that of school nurse, and adds "The nurse could further act as health visitor or sanitary inspector. The necessary diminution in the size of the area thus served by any nurse, would lead to a greater concentration

of energy, and correspondingly better results would be obtained."

The point of most importance raised by Dr. Barwise, is that of training, as it must be inferred from his remarks, that the district nurses employed as school nurses in Derbyshire are not always fully trained.

No public authority would employ a medical practitioner who was not fully qualified, it would recognise that public funds should not be utilised to pay for unskilled work, and though unfortunately we have as yet no standard of education for nurses required by the State, yet the three years' standard of training is the one accepted throughout the country, and nothing less should be recognised in the case of nurses subsidised out of public funds.

School nursing is a new development now on its trial. If it is to be the force for good in the development of a higher standard of hygiene in the schools, and in the lives of the children, which it is confidently hoped it will be, then the nurses engaged in this important national work must be picked women, skilled, and experienced as nurses, tactful, and broad minded as women as all pioneers in a new branch of work must be if they are to break down prejudices, and overcome the obstacles, always met with in the path of progress. For this reason though thoroughly trained Queen's nurses may usefully combine school nursing with their other work, if time and circumstances allow, it should be understood, that women with a short experience of nursing and midwifery, have not the knowledge necessary for the important office of school nurse, and should not be employed, much less subsidised, by local authorities.

There are exceptional opportunities of usefulness before the school nurse, and the standard of national health may be raised through her agency. But she must be of the right type.

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