

## A CONFERENCE ON NURSING IN SYDNEY.

During the second week in January a conference was held in Sydney between the council of the Royal Victorian Trained Nurses' Association and the council of the Australasian Trained Nurses' Association, reinforced by delegates from the A.T.N.A. councils of Queensland, South Australia, Western Australia, and Tasmania. Although the A.T.N.A. and the R.V.T.N.A. work on the same general lines, there are a number of points of divergence in their rules, and it was with a view of obtaining, if possible, more uniformity, that the conference was held.

The chief points of difference between the two associations are in the qualifications required for obstetric nurses, the training of nurses in private hospitals, and the length of training in smaller general hospitals.

In Victoria, hitherto, only nurses who have completed their general training have been allowed to train in obstetric nursing. This, no doubt, makes the ideal obstetric nurse, but it seriously limits their number, and makes it impossible, as a rule, for the poorer people to obtain their services. In N.S.W. and most of the other States there are a number of midwifery training schools, which give a twelve-months' hospital training; and nurses so trained take midwifery work only. The number of nurses trained every year for this work in Sydney alone is considerable, and the consequence is that the employment of any but a trained nurse is the exception, even in poor homes. This is, therefore, a question of great importance to the community; and it is probable that in Victoria some alteration will be made in present methods so that the number of midwifery nurses will be increased.

The length of training for a general nurse in Victoria is three years, irrespective of the size of the hospital. In the other States the training is for three, four, or five years, according to the size of the hospital, it being considered impossible for a nurse to see in a small hospital a sufficient variety of cases in the shorter time. In Victoria also this fact is being recognised, but it is proposed that instead of lengthening the period in the small hospital the nurse shall supplement her training by six months in an infectious hospital and six months in a gynecological hospital, making four years in all. This would certainly be equal to a four years' continuous training in a small hospital; the question to be decided is whether it should be considered as equivalent also to a five years' training in a small hospital.

Hitherto nurses have not been allowed in Victoria to train in private hospitals, while in the other States private hospitals which have conformed in all respects to the regulations have been recognised. Those who support this custom maintain that a nurse trained in a private hospital is better fitted for private nursing than one trained in a general hospital; those who do

not approve consider that her training is apt to be one-sided and to lack experience in medical nursing, the majority of cases in private hospitals being surgical.

Another point of discussion was the terms on which a nurse trained outside Australia should be registered. The A.T.N.A. registers such nurses on exactly the same terms as Australian-trained nurses; that is, they must submit satisfactory hospital certificates, and, unless they have trained in a country where there is a uniform system of training and examination, either voluntary or State, must pass the membership examination. The R.V.T.N.A. has registered such nurses on their certificates only. A suggested alternative is that a certain number of well-known training schools should be exempted, and that nurses coming from these hospitals should be registered without examination; while those coming from provincial and less well-known hospitals should be required to sit for examination. Against this is the fact that no exceptions are made in Australia; and the nurse trained in a metropolitan hospital in Sydney or Melbourne is required to pass the same examination as her sister from Cairns or Bourke or Mildura.

The conference came to no definite decision on these matters, which must be referred to the local councils, but only good can come of the discussions that took place, and which enabled the members attending the conference to see more clearly the points of view of their colleagues.

## THE DOCTOR AND THE CHILD.

One of the best means of drawing attention to any subject is through the eye, and that this is recognised and widely made use of by advertisers every hoarding in town and country bears witness. One of the most striking posters now to be seen is that of "The Doctor and the Child," a reproduction by the Oxo Company, on which the artist, Mr. Joseph Simpson, is to be congratulated. The smiling child is looking up at the doctor, intimating "Quite well, doctor, thanks to you," and the doctor thus receives his reward for the work of many anxious days and nights.

## MELLIN'S FOOD.

The selection of an agent to supplement the natural food of an infant, or to modify cow's milk, is always an important matter. Mellin's Food can be used for purposes of modification with security, for it is a preparation perfectly free from unchanged starch; and its effect is to render cow's milk more digestible. Moreover, its sweetness is due to maltose, not to cane-sugar, which may ferment in the baby's stomach. Rightly prepared, in proportions suited to the age and individuality of the infant, Mellin's Food forms a medium for the modification of cow's milk for infants, invalids, and the aged, which has been used with advantage by thousands. It is supplied by Mellin's Food, Ltd., Peckham, London, S.E.

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