

tance. She showed that thirty years ago our general hospitals afforded training in the nursing of most diseases. Of recent years a much more rigid classification of cases had, quite rightly, been introduced, and the infectious cases eliminated. This left serious gaps in the clinical material necessary for the training of pupils in general hospitals, and we were thus brought face to face with the need for co-ordination of training, and for reciprocity between the general and special hospitals. In London the authorities of the great fever hospitals—the Metropolitan Asylums Board—have shown themselves not only willing, but desirous, to enter into an arrangement with the general hospitals for reciprocal training, and this policy had had the support of the late Miss Isla Stewart, Matron of St. Bartholomew's Hospital, who had shown herself, as ever, a broad-minded educationalist, and recommended her committee to co-operate with the M.A.B., with the result that a scheme of reciprocal training had been adopted by the Committee of the hospital and the Board. She also quoted the opinion of Miss Mary C. Wheeler, R.N., in her Presidential Address to the American Society of Superintendents of Training Schools for Nurses last year that in the reconstruction of nursing education affiliation will play an important part.

POST GRADUATE TEACHING FOR NURSES.

Miss E. M. Musson, Matron of the General Hospital, Birmingham, spoke on the subject of Post Graduate Teaching, from which she excluded fever nursing, special work (such as midwifery, massage, electrical work, house-keeping, and training in Matrons' duties), limiting it to courses of instruction for nurses already qualified desiring to refresh their knowledge of medical and surgical treatment, and to bring their nursing practice up to the requirements of the day. She pointed out that a nurse who was working away from the centres of progress must feel the necessity of "rubbing up," if she was to extend her working days as long as possible. The usual method at present was to obtain some months' holiday work in a hospital, which was not altogether satisfactory from the point of view of the hospital or the nurse. A post graduate course framed especially for such nurses, would enable them to learn new methods in a much shorter time, to vary their experience, and to see the most interesting cases and the most modern treatment in the whole of the institution, instead of remaining for some time in one ward or department. The nurses admitted to the course should be fully trained. It should not be a means whereby semi-trained women might add to their half-digested knowledge at small expense to themselves.

Miss Musson estimated the expense of the course at £12 12s. for a six weeks' course for resident pupils; and £9 for non-resident pupils. The difficulties were (1) the limited means of nurses; (2) the difficulty of getting free time to take the course; and (3) indifference. Again referring to the returns which a nurse might

expect for her outlay, Miss Musson said the greatest would be that of knowing that the services given to the sick were as efficient as possible and that no skill in nursing would be wanting when life and death each strove for the mastery.

DISCUSSION.

The Chairman said that the three papers were of a very high quality. They had the great privilege of having amongst them Mrs. Strong, who was Matron for many years of that splendid institution, the Royal Infirmary, Glasgow. She was the *doyenne* of nursing, and she interested herself in the higher education of nurses when many London hospitals were in the dark ages.

Mrs. Strong, President of the Scottish Nurses' Association, said that it was a great pleasure to know that the work inaugurated in 1893 was bearing such good results. The papers read had given her great gratification. She thought that three years' general training should be sufficient, and special work should be taken up afterwards. It seemed to her that there was too much money asked for midwifery training. The nurses' services were valuable, and the maternity hospitals should not be kept up largely at their expense.

Miss Cunningham, Matron of the Stillorgan Convalescent Home, said that a course such as Miss Musson had proposed would be an incalculable boon to most, but she was afraid the fees would be almost prohibitive, though she hesitated to plead for a shorter course, as only tending to encourage superficial work.

Miss Cunningham answered the first question of Miss Cutler, "Is reciprocal training desirable and feasible," with an emphatic affirmative. She had shown the advantages of reciprocal training in the large schools; how much greater and more pressing the need in the smaller and special hospitals—in fact, reciprocal training was what they in Ireland must expect and prepare for when they obtained State Registration of Nurses. She pressed upon those present the claims of Mental Nursing, and urged that some experience in it should be included in the curriculum of training. She pointed out that frequently nervous symptoms complicated otherwise simple medical and surgical cases, so that unless a nurse was equipped to meet these difficulties she was in danger of becoming a nervous wreck.

In regard to preliminary training, the speaker reminded the audience that Miss Haughton laid great stress on the high character and type of women required as nurses, a type which, unfortunately, became harder and harder to find among potential nurses. This shortage of the right class of women (she used the word in its widest sense, not the social sense) presented one of the most difficult problems for the consideration of the Conference, and was so fundamental that it underlay them all.

In the abstract nursing ranked high, it had an appeal to all that was noble and womanly, and had high tradition behind it. But in the concrete it was different; the material side was anything

[previous page](#)

[next page](#)