

way be placed under the Workhouse Master and Matron. They asked that the Master should hold the same position in the sick wards as the steward did in the separate institutions.

Miss Barton described the organisation of the Poor Law Infirmary Matrons Association, of which she is President, to which an Association of Superintendent Nurses, now being formed, proposes to affiliate.

In conclusion she deprecated the comparisons often made between hospital and infirmary-trained nurses, generally to the detriment of the latter. Nothing would help so much to raise their status as the State Registration of Trained Nurses, and this was why for years she had ardently desired and worked for it. It would be a great act of justice to Poor Law Nurses. If they were worthy they could become registered nurses and any invidious distinctions could be done away with. She felt that they *were* worthy, and would prove themselves most honoured members of the profession to which they were so proud to belong.

SCHOOL NURSING.

Miss H. L. Pearse, Superintendent of School Nurses under the London County Council, contributed a paper on School Nursing, which was read, in her unavoidable absence, by Miss Beatrice Kent.

Miss Pearse stated that the large number of women, constantly increasing, engaged in looking after the health of children in elementary schools made it necessary that the training best suited to the work should be clearly kept before nurses.

She considered that the best infirmary training made an excellent foundation, to which should be added special training in infectious diseases, knowledge of sanitary inspection, and health visitors' work, including district nursing in the homes of the poor.

Other types of school nursing, such as in private schools and secondary schools, were simple in contrast to nursing in elementary schools. In one case there was the head of the school responsible to the parents for the children's health, and in the other much more careful parents and better general health and physique in the children.

IN ELEMENTARY SCHOOLS.

In elementary schools the nurses' sphere was constantly widening; first she started to deal with cuts and bruises and such small accidents, then attention to uncleanliness was added, and schemes for dealing with verminous conditions devised and brought into play. Next came medical inspection, and thenceforth the school nurse shared with the doctor in medical inspection, and in the treatment growing out of it.

Miss Pearse then described a typical day spent in a school by the nurse. Starting at 9 a.m., when the school opened, she saw all children in attendance to about 300, gave out cards to be given to the parents in cases of extra uncleanliness, and sent lists of such children to the nurse who

visited from the cleansing stations and whose business it was to follow them up.

The school nurse was expected to note any child who was not well, or whose eyesight or ears required attention, to watch for cases of infectious disease, malnutrition, or neglect, and report them to the Medical Officer to be dealt with as "special" cases for medical inspection.

All cases of ringworm were seen by the nurse every month, either at school or at home, and a regular report made as to the condition; and, if cured, by what means the cure was effected. When the nurse was in doubt, she had to take stumps for microscopical examination by the doctor, on whose decision the child was either excluded or re-admitted to the school. The clerical work connected with these visits required considerable attention.

Uncleanliness and verminous conditions were dealt with by a series of notifications to the parents, and, if necessary, baths at the cleansing stations. Infectious diseases were watched for; and if suspected, immediately dealt with, and excluded from school when necessary. There was no doubt that a reduction had been made in the number of children suffering from scarlet fever, measles, chickenpox, &c.

As a result of medical inspection, minor ailments were put in touch with centres where nurses of local associations, notably of Queen Victoria's Jubilee Institute, cared for them under the supervision of a special doctor.

Children suffering from adenoids, enlarged tonsils, defects of vision and teeth, were given vouchers to attend at the various hospitals and treatment centres, where special arrangements had been made to receive and treat them.

It would thus be seen that the experience of a school nurse should be varied if she was to be equal to the many emergencies she would meet with. The valuable school nurse was the observant tactful woman of practical education—not very young, with a love of children, and keen sympathies for their much-tried mothers. Such a woman found great opportunities for good in this work, and became a most valuable worker for the good of the race.

Miss Pearse strongly urged that school work and maternity nursing should be kept quite distinct. She further stated that in the matter of school nursing we were behind America, and in advance of European countries, giving details in connection with each.

DISCUSSION.

Miss West, Superintendent of Nurses at the North Dublin Union Infirmary, in opening the discussion, said that it might not be generally known that when workhouses were first instituted they were intended for the reception of the healthy poor, and only such cases of illness as were likely to occur among these healthy inmates were supposed to be nursed by the other inmates under the supervision of the Master and Matron of the

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