

THE SCOTTISH MEDICAL, NURSING AND HEALTH EXHIBITION AND CONFERENCE.

THE CONFERENCE.

MONDAY, FEBRUARY 9TH.

On Monday evening Lady Chisholm, who presided, said that the need for trained scientific nursing, in cases of accident or sickness, or even more particularly in the case of the wounded in time of war, was everywhere admitted, but there was no doubt that in many country districts, as well as in crowded portions of the towns, there was needless suffering and prolongation of disease because of the lack of proper nursing in the homes of the patients. The first paper presented was that by Dr. A. K. Chalmers, Medical Officer of Health for Glasgow, which we briefly reported in THE MIDWIFE Supplement of our last issue, and to which we refer at greater length this week.

We have also previously dealt with Miss Wright's paper on "Poor Law Nursing and Its Progress in Scotland."

The remaining paper of the evening was an extremely interesting one on "School Nursing," by Miss H. Garvie, School Nurse, Glasgow.

SCHOOL NURSING.

In introducing the subject of School Nursing, Miss Garvie said that had she been asked to deliver a paper on School Nursing within the first year or two of the commencement of the medical inspection of school children, she would have felt either that as a title for a paper it was a misnomer, or, that its scope was so small as to be unworthy of a separate paper at any Conference; but so rapid had been the development of this new branch of nursing that she had been constantly obliged to choose between supplying a mass of details, or delivering a paper on some aspects of the subject to the detriment of others of equal importance. She had therefore limited her paper to a short account of the history of school nursing in Glasgow, and to the work of the nurses engaged in it.

The basis of all school nursing was the medical inspection of school children. The work of the nurse in attendance on each medical officer at such inspection was to prepare each child for his examination, and in doing so to make a note of the condition of the child's clothing in regard to cleanliness, sufficiency, and state of repair. The condition as to cleanliness of the child's body was also noted, and the nurse was expected to observe any skin disease, or obvious bodily abnormality, and to draw the attention of the medical officer to it. After the examination she saw that the child was properly re-clothed. In this way eight to ten children were examined per hour.

Normal children were examined four times during their school life. If there was any abnormality the child was examined periodically

by nurses and doctor and a careful note made of its progress or otherwise.

At first parents were informed if medical attention was required by a child, and the only other duty of the school nurses, in addition to those above detailed was to visit the homes of the children and see that this advice was carried out.

Miss Garvie enlarged upon the opportunities thus afforded them of coming into intimate relationship with the home life of the poor of the city, and of teaching the mothers how to improve the condition of their children. For the most part this work was far from pleasant.

The duty was distinct from that of the district nurse. They were not expected nor had they the time, to treat the condition, and while most people, said the speaker, appreciate assistance, few are grateful for advice. It could be understood, therefore, that their visits were often resented, and they had often to contend with locked doors, which would only open to the friendly knock of a neighbour. Again, they were constantly losing trace of the children, and apart from that it required an unfailing amount of tact to persuade a mother who looked as if she had never seen water, far less soap, that while the nurse understood she had tried to keep her child in a cleanly condition, the child had to sit amongst others less fortunate in regard to parents, and that the nurse had called to help and advise her in her struggle towards cleanliness.

The School Board had power to prosecute, but this was only resorted to in cases of gross uncleanness. It was one of the most trying duties of school nurses to appear in Court against those parents. "Perhaps," said Miss Garvie, "you will forgive me for saying that, considering the conditions under which these people have to live, more than one of us have felt the hopelessness of expecting cleanliness. The sanitary arrangements of our slums may satisfy the requirements of the present laws; that I do not know. But of this we feel sure, that so long as those arrangements are tolerated, so long must uncleanness and avoidable disease remain part of the burden of the poor."

It was because the above methods yielded such small results that the school authorities had undertaken the treatment of many of the conditions which did not confine the children to bed, but which were most apt to be neglected by the parents. Thus the duties of the nurses had gradually become more varied. Diseases of the teeth, eye, ear, skin, and spinal curvature of non-tubercular origin, in the case of children whose parents were too poor to pay a private practitioner, were now dealt with at treatment centres, after the parents had signed consent cards, provided for the purpose, granting permission to the authorities to carry out any treatment considered necessary.

A department of school nursing in connection with the centres for physical defectives had also been established.

[previous page](#)

[next page](#)