June 13, 1914

anxious that Lord Wolmer's change of opinion shall have all the publicity he desires. This is just one of those regrettable incidents in politics, which proves to those working women who are striving for the betterment of their condition in the body politic, and who as skilled workers, have exceptional benefits to bestow upon the community, if directed aright, how imperative it is that they should possess the power of the parliamentary vote, so as to be in a position to influence directly all legislation concerning their own lives, and not to be dependent as they are at present, either upon the tolerance or the caprice of men.

DISTRICT NURSING.

PENSIONS SHOULD BE GIVEN.

The Report of the Council of Queen Victoria's Jubilee Institute for 1913 to its Patron, Queen Alexandra, after referring to the inspection of Queen's Nurses made by Her Majesty at the Garden Party in June last given by the President of the Institute (the Duke of Devonshire) states that a "good deal of discussion has taken place as to the qualifications of the nurses for district work. The plan adopted by the Queen's Institute has been to create a special body of nurses, having the best general training available, and, in addition, a special course of training to suit them for their particular branch of work. . . . To these Queen's Nurses is allocated the exclusive right to certain positions in connection with the Queen's Institute. These include all posts of responsibility, and all work in towns or places with more than 3,000 or 4,000 population. It is, in the opinion of the Council, not possible at the present time to establish them universally in country villages without seriously lowering the high standard to which Queen's Nurses have attained, and so a special class of nurse with different, but none the less definite qualifications, including that of a midwifery certificate, is recognised for work in such places. . . . There is very little demand among nurses who have had the full course of hospital training for work in country districts; and since it is found necessary in these places, as a rule, for a district nurse to combine the work of midwifery with that of general nursing, it is almost impossible to obtain the services of more than a comparatively small number of fully-trained nurses to undertake these posts, even although, under the regulations of the Queen's Institute, the minimum salary payable to a Queen's Nurse in a country district is the same as that in a town.'

The weak point is that these village workers are known and described as nurses. They are certified midwives, with the same qualification as that required of midwives in towns, and should be described as such, as though they may have a useful knowledge of simple nursing they c nnot be regarded as thoroughly trained nurses. But illnesses, whether in town or country, are the same, and the creation of a "special class" of nurse, just as much as a "special class" of midwife, is to be deprecated.

The dearth of nurses indicates not only the present shortage of nurses, but the need for a revision of the salaries (to which should be added a pension) of Queen's Nurses, which do not compare favourably with those in the Navy and Army Nursing Services, or under the Metropolitan Asylums Board, and with those given by many hospitals and infirmaries.

The Institute has inaugurated a long service badge as a recognition of the work of those nurses who have given it twenty-one years of good and loyal service.

The report further states that "in regard to the nursing of insured persons objection has been raised to the employment of village nurses owing to their lesser qualifications. . . Public authorities, however, have shown no reluctance to avail themselves of the services of village nurses. The Education Committees are very generally making use of their services in the nursing of school children, and the Insurance Committees themselves to whom, in all probability, will fall the duty of providing nursing for insured persons, are in very many country districts employing these nurses for the watching of, and attendance upon, tuberculosis cases."

HOW TO GET THERE.

How I passed the Royal Sanitary Institute Health Visitors examination may be of interest to other nurses. As a "Queen's" candidate in London I had the privilege of attending a splendid course of lectures on Hygiene given by Dr. MacLeod at the Queen's Institute. Unhappily at the end of this course of lectures I was immediately transferred to a country district far removed from any town, and before I had had an opportunity of sitting for the R.S.I. examination. I was determined to get the certificate $a \neg d$ so sent in my application to the nearest centre. With the permission of my kind secretary, the nurse on the adjoining district promised to do my work for the two examination days. Everything was arranged and I was to go off the night before by the 9 p.m. train in preparation for the eventful day.

Just as I was starting a note arrived from the nurse who was to do my necessary work, saying that she had been taken suddenly ill and could not help me. In an isolated country village it was useless to try to get other help at such short notice. After one minute's rapid thinking I jumped on my bicycle and rode off to the two surgical cases that could not be left unattended. Could they possibly be ready for me the next morning, I asked, at 5 a.m.? "Certainly, nurse; 3 a.m. if you like," was their willing reply. I had decided that I must stay the night on my district and get up at this early hour to enable me to catch the first train for Hereford.



