

to be overworked as they have been to date, and unnecessary breakdowns and disablement prevented.

We agree with the Committee that the scale of pensions offered to nurses who break down in military service is quite inadequate, and greater help is necessary so that those invalided out of the service should be cared for for the period of sickness. We approve of the suggestion for the establishment of an Advisory Committee to represent and co-ordinate the various authorities concerned with military nursing, a proposal made by us to the Secretary of State for War, in January, 1915.

We disagree with the proposal that V.A.D. hospitals should be subsidized more heavily than at present, the maintenance of these hospitals is usually costly, and their management frequently unsatisfactory because conducted by amateurs. If they cannot subsist on the present allowance, supplemented by local donations, they should be closed down, and the sick and wounded concentrated in larger hospitals where maintenance is less costly, and nursing conditions more efficient.

In regard to friction between trained and untrained nurses and V.A.D. members, we are of opinion that the Committee have made no recommendation to eradicate it. The fears of trained nurses will not be allayed by the alleged capacity of 5,000 War Probationers and V.A.D.'s to act as staff nurses, and the suggestion that the trained Matron shall have control of the nursing staff is impossible so long as the untrained Commandant is the senior officer and often the mistress in her own house.

The untrained Commandant must go.

It is certain that if the services of private nurses are to be obtained to any great extent, the War Office should be prepared to pay towards the preservation of their organisations, so that work will await them upon their return to civil life, and the insulting "Serf Clause" which the War Office at present requires the Army Reserve and Territorial Nurses to sign must be deleted from the Agreement.

We regret that the Committee had not the courage to tackle the untrained Commandant, the primary source of disorganisation and lack of discipline in V.A.D. hospitals, and that they did not recommend the deletion of the "serf clause" from the Agreement with the War Office. But as we said before, the composition of the Committee was too official to effect any really drastic reforms. One cannot be expected to pluck the beam out of one's own eye.

The King and Queen paid a visit to the American Women's Hospital for Officers, 98 and 99, Lancaster Gate, last week, and made a complete tour of the building. Their Majesties expressed much pleasure with all the arrangements for the comfort of the patients.

LOCAL GOVERNMENT BOARD (SCOTLAND).

EXAMINATION OF NURSES.

On May 1st and subsequent days the Local Government Board for Scotland held an examination for the certification of trained sick nurses and of trained fever nurses. The examination was held at Glasgow, Edinburgh, Dundee and Aberdeen. The examiners were Professor Glaister, the University, Glasgow; Dr. Chalmers, Medical Officer of Health, Glasgow; Dr. John Gordon, Aberdeen, and Dr. Richard, Medical Officer of Govan Poorhouse, who were assisted in the practical part of the examination by Miss Clark, Matron of King's Cross Hospital, Dundee, and by Miss Campbell, Matron of the Victoria Infirmary, Glasgow.

The subjects of examination were Elementary Anatomy and Physiology; Hygiene and Dietetics; Medical and Surgical Nursing; Midwifery (for Poor Law and General-trained Nurses); and Infectious Diseases (for Fever-trained nurses only). In all 500 candidates presented themselves for examination. Of these 260 were examined in Anatomy and Physiology; 177 in Hygiene and Dietetics; 32 in Medical and Surgical Nursing (for Poor Law and General-trained nurses); 119 in Medical and Surgical Nursing (for Fever-trained nurses); 52 in Midwifery; and 119 in Infectious Diseases.

In *Anatomy and Physiology* 13 nurses obtained distinction, 169 obtained a simple pass, and 78 failed.

In *Hygiene and Dietetics* 14 nurses obtained distinction, 149 obtained a simple pass, and 14 failed.

In *Medical and Surgical Nursing* (for Poor Law and General-trained nurses) 2 nurses obtained distinction and 30 obtained a simple pass. There were no failures.

In *Medical and Surgical Nursing* (for Fever-trained nurses) 11 nurses obtained distinction, 98 obtained a simple pass, and 10 failed.

In *Midwifery* 5 nurses obtained distinction, 46 obtained a simple pass, and one failed.

In *Infectious Diseases* 13 nurses obtained distinction, 103 obtained a simple pass, and 3 failed.

One hundred and thirty-nine candidates have completed the examination and are entitled to the certificate of efficiency granted by the Local Government Board. Certificate in General Training, 32; Certificate in Fever Training, 107.

The questions set cover a wide range, and the Local Government Board in Scotland are to be congratulated on their endeavour to systematise and approximate nursing standards in the institutions under their control.

The Local Government Board have authorized the City Corporation and the authorities of approved hospitals under the Public Health (Venereal Diseases) Regulation to purchase and distribute the drugs diarsenol and galyl as substitutes for salvarsan.

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