

OUR PRIZE COMPETITION.

WHAT DO YOU CONSIDER SHOULD BE THE QUALIFICATIONS FOR A HEALTH VISITOR? DESCRIBE A TYPICAL DAY'S WORK OF A HEALTH VISITOR.

We have pleasure in awarding the prize this week to Miss Marianne Burgess, Superintendent Health Visitor, Health Department, Burnley, Lancs.

PRIZE PAPER.

I consider the basis of a Health Visitor's training should be a three years' course in a General Hospital, for thereby she learns observation, self-reliance, and the value of discipline. This should be followed by taking the certificate of the Central Midwives Board, preferably in an institution having an ante-natal clinic and an infant consultation centre.

Further, it is desirable to hold the certificate for Health Visitors and School Nurses from the Royal Sanitary Institute.

I prefer this certificate to the Sanitary Inspectors' as being less technical, and of more use as regards vital statistics, &c., to the intending Health Visitor.

If a holiday on the continent can be afforded, much valuable information can be gathered from a visit to the clinic of Professor Budin in Paris, or the clinics in Belgium.

The Health Visitor should now take a post as an assistant under a very up-to-date municipality where every branch of Health work is undertaken, *i.e.*, infant-visiting, school work and tuberculosis, both home-visiting and clinic work. Whilst there she should study for the Sanitary Inspectors' certificate. This deals with the more technical part of the work, and the laws relating to the Public Health Acts. Studying for this certificate also encourages the Visitor to keep her eyes open as she goes her rounds. Mention should, too, be made of the necessity for the study of economics.

A typical day's work is as follows:—

The Visitors report at the office at 9 a.m. The Senior Health Visitor, or a clerk, distributes the notifications received by the morning's post to the staff, who each have a district. Usually 30 to 45 minutes will be necessary for clerical work and arranging of work into groups, otherwise much valuable time is lost wandering from street to street.

Actual visiting begins about 10 a.m. Mothers do not welcome one before that hour. The first visit to be paid is to a young mother with her first baby. She has had an up-to-date midwife and is anxious to learn, so the way is easy. The Visitor, in a chat, gets the information required by the M.O.H., gives an invitation to the nearest infant centre, and departs.

Mrs. B. is next to be revisited. She is one of the type who has had six and buried four "in fits." Although she solemnly declares baby has nothing but the breast, the Visitor privately notes a suspicious-looking cup and spoon on the oven top. A ricketty child of eighteen months playing on the floor gives the key to the cause of death of the other four. All this time mental notes must be made of damp walls, dirty back yard, &c.

The next visit is to Mr. C., a consumptive. This is a first visit. Great tact is needed, for an invitation into the bedroom must at all costs be secured. Advice will invariably be needed in the way of ventilation and sleeping arrangements, and on the best way of securing treatment.

The next visit is to the mother of some school children who have been medically inspected, maybe they are not too clean, possibly impetigo or decaying teeth. Very great tact is required here, for most mothers resent reflection, however well-deserved, on the neglected condition of their children.

The rest of the morning is filled up with work of a similar nature.

The afternoon is spent at a clinic, say an Infant Consultation Centre. The Visitor arrives about 2 o'clock. The mothers undress their babies and they are weighed. The condition of the child is noted, simple remedies being suggested for minor ailments, defects in clothing being pointed out, model clothes shown, &c., until the arrival of the doctor. The Visitor now assists with the consultations, fills in cards, and makes notes of those requiring home visits. About 4.30 p.m. she returns to the office, where she has to keep an account of all she has done during the day. Everything has to be filed and kept in perfect order, for it is on these records that the M.O.H. makes part of his annual report, and the statistics for the country are based.

HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss B. Bowen, Miss E. James, Miss M. Milton, Miss Lucy C. Cooper.

Miss Cooper writes: "A Health Visitor should know the life and habits of normal children. She should also have done district nursing, which gives her a clear insight into the life of the people, among whom she will be called upon to work. She should know the current price of all commodities and how to make the most of the sum at a working mother's disposal.

QUESTION FOR NEXT WEEK.

What is marasmus? What are the principal nursing points in caring for a case of this kind?

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