

of this kind that must come within the scope of general nursing, and be as simple in character as possible, it has seemed to us inadvisable to arrange for short courses on each subject, preferring rather to introduce these subjects in their due proportion in the courses of lectures already set forth. The Special Hospitals will naturally lecture more fully on their own subjects; and such lectures would form an excellent post-graduate course to the trained nurse.

It is impossible for the Syllabus to deal at any length with such subjects as Public Health, Welfare Work, etc., but the training nurse should be informed of their nature, their general aim, their close relationship to her own field of activities, and be brought to realise her duty towards them as a responsible citizen.

Examinations.

The question of examinations has not yet been fully discussed and matured. It comprises so many subjects, and involves so much detail, that our work on it is necessarily slow.

The ruling has been that any future nurse desiring to be placed on the State Register must pass a one-portal examination at the end of the specified training in a recognised training school or group of training schools. At a date to be fixed in the near future, primary and intermediate examinations will be introduced.

It is proposed that the first State Examinations be held in July and October, 1923, and in January and April, 1924.

These examinations will be voluntary; but after April, 1924, all nurses who desire to register will be required to pass a State Examination, the first of these being held by the General Nursing Council in July, 1924.

It is also proposed that the following fourteen places be chosen as suitable centres for examinations, others to be added if necessity arises:—London, Birmingham, Bristol, Leeds, Liverpool, Manchester, Newcastle-on-Tyne, Cardiff, Carlisle, Norwich, Nottingham, Portsmouth, Exeter, Sheffield.

The examinations for the immediate future will, of necessity, be conducted on the simplest lines, and entirely based on the curriculum that will ultimately be issued by the Council.

I beg you will bear with me for yet a moment, while I read from the Explanatory Notes on page 3, and add some remarks for their further understanding.

This Miss Lloyd Still proceeded to do. She said further:—

Scientific Terms.

Scientific terms may sound pedantic, but they save space, and the nurse becomes familiar with their meaning.

Thus Pharmacology is a useful comprehensive word to designate the physiological action of drugs; and even though referred to most simply, briefly, and with special selection of common drugs only, the subject is still Pharmacology.

Exception has been taken to the omission from the Syllabus of the term *Materia Medica*, yet that term implies knowledge that, with the exception of dosage which can be included under the administration of drugs, is much less intimately associated with the Nurse's practical work.

In the second and third years' Syllabus, the terms Biology, Histology, Bacteriology have been objected to. Apart from the convenience of economising space, the nurse should understand what these words mean, and their bearing on the subject in hand; and in this way be brought to realise what a wide field is that of Medicine, and how little of it she herself touches or can know.

The occasionally arrogant attitude of the trained nurse is due to the exclusion rather than the inclusion of such knowledge, or perhaps that knowledge not wisely taught.

I fear by some the Syllabus has been unsympathetically read. Surely he is a captious critic who will interpret "Rectal and Vaginal Examination" in the Practical Nursing Section, to mean that the nurse is taught to make the examination, instead of taught to prepare for it; and so with similar items, *e.g.*, intravenous infusion, insertion of pessaries, and others.

Hospital Economy.—The real practical teaching must be found in the wards, and in the daily work of the wards.

Diseases of Infants and Children.—We must remember that we are dealing with Nurses in General Training, and with the General Register.

Public Health.—Do not let us cavil at the term just because the subject must necessarily be dealt with so briefly; but it is our duty as teachers to bring that subject under the notice of the training probationer, for by those means we can recruit for that branch of public work.

ASPECTS IN RELATION TO POOR LAW INFIRMARIES.

By Miss A. DOWBIGGIN, C.B.E., R.R.C.

Miss Dowbiggin pointed out that the Registration Act has conferred on all Training Schools the responsibility of a general standard of nursing education and she desired to put forward the special advantages to the Poor-Law Nursing Service, of which the first was the abolition of the old, unjustified distinction between training in a Voluntary Hospital and in a Poor-Law Infirmary. (Applause.)

Since nursing was a national service, whether the training was carried out in a Voluntary Hospital, Municipal Hospital, or Poor-Law Infirmary, it should be conducted on the same lines. The Syllabus before the Conference had been drawn up with a view to meeting the needs of "Schools of various resources and equipment."

The large Poor-Law Infirmarys (or hospitals as they were now called), were splendidly equipped institutions. They had a definite curriculum for the training of nurses in force at the present time and although supplementary teaching might be

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