

her to do anything for the members of the Royal British Nurses' Association. As to the Club it originated in the Highgate Hospital, and Mr. Paterson organised the splendid Mansion House Meeting in support of an R.B.N.A. Club. She concluded by thanking Mr. Paterson for taking the Chair so ably; nurses had many friends in the medical profession but none truer than their Chairman.

MR. PATERSON said it was always a pleasure to do anything for members of the Association.

MISS IMRIE, a member of the Nursing Staff of the Royal Infirmary, Glasgow, expressed her pleasure at meeting their future Matron, and wished her every possible success in her new work.

MISS ANDERSON, on behalf of the Nursing Staff of the London Temperance Hospital, said what a great loss Miss Donaldson's promotion was to its members. She hoped the Nurses' League founded during Miss Donaldson's tenure of office would flourish, and that they would get as many members as possible to join the Royal British Nurses' Association.

Those present then adjourned to the drawing-room where some of the nurses present sang very sweetly. Others availed themselves of a much prized opportunity for further social intercourse with the Guests of Honour.

Everyone realised what an asset it is to the Nursing Profession to have a Club whose officers can organise so effectively, at short notice, a dinner such as that arranged in Miss Donaldson's honour.

It is not done without a great deal of preliminary forethought and trouble, and warm thanks are due to Miss Macdonald and Miss Cutler for the perfection of the arrangements. We also congratulate the cook on the excellence of the dinner, and the domestic staff on the quietness and deftness of the service.

THE PROFESSIONAL UNION OF TRAINED NURSES.

A Members' Meeting of the Professional Union of Trained Nurses was held at the "Plane Tree" Restaurant, 106, Great Russell Street, W.C.1, on Monday, July 25th, at 5 p.m.

The Secretary reported:—

That the alliance with the Medico-Political Union (Doctors' Trade Union) had been completed, and a Committee formed (composed of two members and the Secretary of each Union) to discuss matters common to both.

That Delegates of the Union had formed part of different deputations which had attended at the Ministry of Health on important Nursing matters.

That certain questions had been asked in the House of Commons concerning alleged miscarriages of justice under which some Members had suffered.

That several Doctors had kindly consented to act as Medical Officers to the Union—General

Practitioners, Bacteriologists, Oculists, Aurist, &c.—and it was hoped shortly to have a number of Dentists who would give special terms to Members.

That a Social Club had been formed, and meets at the "Plane Tree" Restaurant the last Saturday in each month, and it was hoped to hold a course of lectures and give concerts, dances, &c., during the winter months.

That a Benevolent Fund had been started to assist any Members who might require help (to pay for an ambulance when needed; Nurse to bring a sick Member from country, &c.). The subscription was voluntary, and it was hoped all would subscribe and make it a useful Fund.

A message of congratulation was sent to Miss Gretta Lyons, of Melbourne, complimenting her on her courage in forming a Trained Nurses' Guild.

MAUDE MACCALLUM,
Hon. Secretary.

COLLEGE OF NURSING, LTD.

BIRMINGHAM THREE COUNTIES CENTRE.

On Tuesday, July 26th, in the Lecture Theatre of the General Hospital, Birmingham (by kind permission of the Governors), Dr. Harries, Medical Superintendent of the City Hospital, Little Bromwich, gave an interesting lecture on "Barrier Nursing in Fever Cases."

Dr. Harries commenced his address by declaring emphatically that the success of Barrier Nursing is entirely dependent on skilful and efficient Nursing, and that satisfactory results can only be obtained if the Ward Sister and Staff Nurses are General Trained and proficient in surgical asepsis. The technique of Barrier Nursing is based on the accepted fact that infectious diseases are not spread by infection through air, but by immediate or intermediate contact. Smallpox is the one exception to this rule.

The first experiment in Barrier Nursing took place in Paris twenty years ago, when glass screens were erected between the beds and the cubicle System was introduced; this was superseded by the abolition of the screens and the introduction of the Invisible Barrier—the beds being marked by a blue band for definite fevers, and a red band for observation or questionable cases. In Liverpool the distinctive marks have now been abolished, and the Medical Superintendent relies solely on the skill and efficiency of the Nurses.

The Advantages of Barrier Nursing are:—

1. During an epidemic when small isolation wards are not obtainable, suspicious rashes can be kept under observation.
2. Patients suffering from one definite fever who have been in contact with relatives suffering from another can be isolated.
3. Patients recovering from one fever, having contracted a second, can be admitted without endangering others.
4. Patients can be warded for observation.

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