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EDITORIAL.

THE TRAINING OF HEALTH VISITORS.

We are reminded by Sir George Newman, Chief Medical Officer of the Board of Education, in his Annual Report, on "The Health of the School Child," that "the day for working in water-tight compartments has gone," and we have a concrete instance of this in the Regulations for the "Training of Health Visitors" promulgated by the Ministry of Health in this country, and the "Conditions for the Certification and Registration of Health Visitors" issued by the Scottish Board of Health. The position in this connection was interestingly discussed—at a meeting convened by the London Workers' Section of the Association of Infant Welfare and Maternity Centres, held at Carnegie House, Piccadilly, on Tuesday in last week—by Miss Gladys Le Geyt, S.R.N., a member of the Central Midwives Board.

Miss Le Geyt strongly advocated the establishment of an English Register of Health Visitors, and based her argument in support of her contention on two main grounds. (1) That the Scottish Board of Health have already decided to form a Register of Health Visitors working in Scotland; and (2) that the Scottish Register, unless Reciprocal Registration can be arranged, will work most adversely against a woman taking her Diploma in England without the protection of an English system of Registration after certification.

The Curriculum laid down by the Scottish Board of Health is, Miss Le Geyt points out, one which should command the respect and attention of all persons interested or concerned in the future of Public Health Work. In normal circumstances the course of training extends over four years, one and a half years of which are devoted to specialised instruction, and not less than two and a half years to hospital or other work. The training must include, in addition to instruction and practice in General Medical, Surgical, and Gynaecological Nursing, the nursing of sick children,

nursing of infectious and communicable diseases (including fevers, tuberculosis, and venereal diseases), and nursing in special hospitals or institutions (*e.g.*, for the treatment of ailments of the eyes, ears, nose, throat, and skin). The Health Visitor must also hold the certificate of the C.M.B. for Scotland, or have received a year's training, including instruction in midwifery, in a Maternity Home approved by the Board of Health, and must be 25 years of age before receiving the full Health Visitors' Certificate. Miss Le Geyt contrasted this training with that in England, where the Course prescribed by the Board of Education can be taken by a candidate just fresh from school. A girl at latest leaves school at 18, and can therefore complete the Diploma Course at 20, and the Minister expects preference to be given to her application by Local Authorities. She considers it most undesirable that this youthful person, even if she adds a year's experience of midwifery to her qualifications, should be able to establish herself in Public Health Work, and be permitted to officially visit the homes of the mothers, give advice, make recommendations, and undertake the multiple duties assigned to Health Visitors. She contends that the experience of life's gravities possessed by "sweet and twenty" cannot be such as to make her suitable to invite the friendly confidences Health Visitors work to establish when Home Visiting.

She further pointed out that there is nothing to prevent the really competent and registered product of the Scottish Model of Training from competing for Public Health work in England, and is of opinion that, with a public-spirited Committee, or Local Authority, such a candidate would rightly and justly be appointed to any vacancy that might arise.

Reciprocity in regard to the definition and recognition of standards between the two countries is thus of great importance, and Miss Le Geyt considers it also of primary importance for existing Health Visitors to press for Registration in real earnest, both in their own interests and in those of the public whom they serve.

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