

THE NATIONAL HEALTH.

DEVELOPMENT OF LONDON SCHOOL MEDICAL SERVICE: THE SCHOOL NURSE.

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In the former paper some effort was made to trace the growth of the school medical service as carried out in the London schools. It now remains for me to endeavour to set out in more detail the functions of the school nurse in that service.

For administrative purposes the medical work of the Council's Education Committee is directed from the Central Office through five local divisional offices. The Superintendent of the School Nurses is attached to the Central Office Staff (and is assisted there by an Assistant Superintendent).

the rota of the district school nurse. That being done, days are then allocated to visits to all schools in the district for purposes of personal hygiene examinations, and, where necessary, re-examinations. Each school appears at least once per term on the nurse's rota, but where "difficult" schools are concerned, additional visits are set down for re-examinations. A certain allowance on this rota is made for special inquiries and home visits. I look upon the work of the district school nurses as the first line of the school nursing work—from these visits are reported all children noted for treatment of any kind—thus from the medical inspection visits one obtains the names of children suffering from defects of vision, hearing, throat and skin diseases, and from the personal hygiene visits information is obtained as to the children who are unclean in head or body. The former group is followed up by Committees of voluntary workers in consequence of the necessity for assessing payments under the Council's treatment scheme and co-ordinating with other



THE HIGHGATE NEWTOWN SCHOOL CLINIC.

On the staff of each of the five local divisional offices is an assistant superintendent of nurses, who in her turn is in charge of the nurses working in the schools, cleansing stations, and medical treatment centres in her division. The nurses themselves (about 312 in all) are divided into two grades, viz., school nursing sisters (who are all in positions of extra responsibility such as at cleansing stations and centres) and district school nurses; the latter having charge of a district containing from 7 to 15 schools according to size. Roughly speaking, it may be said that the district school nurses feed the stations and centres at which the school nursing sisters are working. From this it can be seen that the nursing sisters are generally in what might be called fixed positions, whilst the district school nurses work according to a rota drawn up at the beginning of each term by the assistant superintendent of nurses for the division. The assistant superintendent being in touch with the Divisional Medical Officer is able to obtain from him the days upon which medical inspections will take place, and is thus able immediately to place these appointments on to

organisations, but the responsibility for working the scheme approved by the Council under statutory authority for dealing with unclean conditions rests entirely on the shoulders of the school nursing staff. As previously stated, the names of unclean children are forwarded by the district school nurses to the nurses in charge of cleansing stations, who in their turn follow up these children until they are cleansed, either by the parents themselves, or by bathing attendants at the cleansing stations under the supervision of the nurse. This work requires tact, courage, and patience in dealing with parents and officials, and when police court proceedings are taken in stubborn cases, nurses are required to give evidence, a difficult and onerous duty. However important the medical inspection (including dental work), it is rivalled in results by the cleanliness campaign. The change in the conditions of children in this matter is recognised by all who work in the London schools. Furthermore, the reduction in the incidence and severity of infectious diseases can no doubt be attributed to the influence which this campaign has exercised.

[previous page](#)

[next page](#)