

to mix with the outside world, to receive visitors when off-duty, and generally to lead a less isolated life than has been permitted to fever nurses in the past. This has long been possible for doctors, and since the War Wardmaids have been allowed to live out and to mix freely with their friends, and I think we shall have to exercise our ingenuity to devise means for the nurses to have some of the same opportunities. With suitable overalls, which can be removed before leaving the Ward, and a closely-fitting pattern of cap, I think the risk of infection when the nurse comes off duty would be much minimised.

Hostels for probationers, under the superintendence of suitable Home Sisters, might be tried, and the Sisters might be allowed to live away from the hospital, thus giving them the opportunity of cultivating an interest in home life which is natural to almost every woman. Probably the popularity of the post of School Nurse and Health Visitor is due to the fact that all the off-duty time is not spent in the atmosphere of her work.

This would possibly mean the decreasing of the hours worked in hospital, but I do not think this would be a disadvantage, as clerical and other women workers have considerably shorter hours, although the nature of their work is of a less responsible order.

(5) One more point requires consideration, and that is that the general education of our candidates might be improved upon.

This difficulty is accentuated in the Fever Hospitals by our having to engage girls of a lower standard of education during epidemics. This might be obviated by engaging more trained nurses, or by employing temporary Assistant Nurses, *i.e.* women, who, for some reason, are unable to go in for the full term of training. If this is done, care should be taken that the temporary nurses are not kept so long as to justify them in considering themselves to be on a level with the certificated Fever Nurses.

With the increasing demand for the lengthening of the years of school age up to sixteen, we may look forward to the girls of the coming generation being better grounded in general knowledge, and this, combined with greater advantages afforded in the hospitals, and the prospect of affiliation with good training schools, should result in a better supply of candidates for the work of fever nursing in the future.

The greater importance which is now attached to a certificate of fever training enhances a nurse's value in the eye of the public, widens her sphere of influence, and increases her power of earning, and no doubt as more importance becomes attached to public health work, it will be almost a necessity for a nurse to have some experience in fever nursing.

Those of us who have spent 25 or 30 years in this particular branch of nursing will readily admit the great improvement which has taken place in the training of the nurses in that time, and we shall watch with special interest the further developments and far higher standard of efficiency it will be the privilege of the younger Matrons who succeed us to carry into effect.

A satisfactory report was then presented, and the Council notified that they had elected the following members of the Council to the various offices:—Chairman of the Council, Miss S. A. Villiers; Vice-Chairman, Miss L. M. Holroyde; Hon. Secretaries, Dr. J. Todesco and Miss J. H. Balsillie; Hon. Treasurer, Dr. F. Foord Caiger. Miss A. Stewart Bryson was added to the Council in place of Miss Balsillie, who was unable to act.

Dr. Foord Caiger presented a Balance-Sheet, showing £362 14s. 2d. in hand at the close of the financial year, £250 of which had been placed on deposit. Dr. Caiger, however, reminded the members that they could not expect so large an income in the future, as in April their examinations ceased, and the Examination Fees were their chief source of income.

In the discussion which ensued on the future status and functions of the Association, a medical man expressed the view that the Association should be reconstituted. Now that its functions were now so largely assumed by the General Nursing Council the whole outlook was rather different. He thought that it was now for the lady members to carry on.

Miss Drakard thought Miss Villiers's address had shown them there was plenty to work for, and Dr. Caiger said that there was still a good deal left to be done in regard to the status of fever nurses. He expressed deep regret at the

death of Miss Isla Stewart. Had she lived he thought she would very materially have helped in establishing a system of reciprocal training between fever and general hospitals.

At the conclusion of the meeting tea was served and those present discussed their problems more informally.

THE PROFESSIONAL UNION OF TRAINED NURSES.

The Professional Union of Trained Nurses, Evelyn House, 62, Oxford St., London, W., has just issued its Annual Report as follows:—

With the close of 1924 the Union completes the fifth year of its existence. In spite of the fact that everything has been done and *insinuated* that could harm it; that the *Nursing Mirror* and *Nursing Times* have ranged themselves against the Workers and on the side of the Employers, who pay them with advertisements, the Union has grown and flourished, and shown that it can be independent. It owes a debt of gratitude to THE BRITISH JOURNAL OF NURSING, which it will be hard to repay. This JOURNAL, which is the only one owned and edited by State Registered Nurses, generously opened its columns to the P.U.T.N., and it is hardly too much to say that without this help the Union would not now be as prosperous as it is. It should be very grateful to Mrs. Bedford Fenwick and Miss Margaret Breay, the Editor and Sub-Editor.

It is satisfactory to record that the Union is now in such a position as to be able to repay part of the loan advanced by its members. It is to be hoped that in the near future all money borrowed to start it will be returned.

It has now eight Branches in different areas, and others in process of formation.

The Guild of Handicrafts has been the means of helping several members, and we are now able to assist them in finding sale for their work when it reaches a certain standard.

More nurses are realising the necessity of insuring against sickness and accident, and another member is reaping the benefit of her foresight in this matter since joining the Union.

Borough Councils have been approached in the interests of Health Visitors.

The London County Council, in the interests of School Nurses.

The Union has been able to help some members to find employment, and to assist others in obtaining pensions, &c.

The *Nursing Review* has proved very useful in keeping members in touch with the Central Office, and it is proposed to enlarge it in 1925.

The P.U.T.N. has been successful in tracing the Nation's Fund for Nurses, as far, at least, as the College of Nursing, Ltd. On application to the London County Council (the Body which issued the licence), the following information was received:—

" . . . the audited accounts (of the Nation's Fund) for the period of 5½ years, from 6th June, 1917, to 31st December, 1922, have been carefully examined. They show that the total sum raised by the charity up to the end of 1922 was slightly over £200,000 (excluding £10,000 raised and administered in Ireland), that of this sum nearly £100,000 remained in the hands of the charity, that £23,000 had been spent on the relief of nurses and the administration of the charity, and that about £80,000 had been handed over to the Authorities of the College of Nursing . . ."

The amount remaining in the hands of the Charity was earmarked for the Tribute Fund. Of the £23,000 for the relief of nurses and the administration of the Charity, £11,700 was spent on administration, which leaves approximately £11,300 out of £100,000 to be used for nurses in distress.

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