

and with the perfect faith which has made Rome a jewelled shrine.

As Founder of the International Council of Nurses, which now includes the organisations of professional nurses, with few exceptions, throughout the world, we realise that without the organisation and inclusion of a National Association of highly trained Italian nurses, our International Council is incomplete, and we cannot rest content.

England and Italy are peculiarly united in relation to the great Founder of professional Nursing Education—Florence Nightingale.

Her nationality reflects undying lustre upon England, but Firenze has the honour of being the city of her birth. And while her genius is the heritage of the whole world it is a sacred duty of England and Italy, in reverence to her memory to uphold the splendid standard of efficiency and service which she left to future generations of nurses to maintain.

The subject for discussion during the morning was:—

DISCUSSION ON NURSE SPECIALISTS. PREPARATION MORAL AND TECHNICAL. PREPARATION SCIENTIFIC AND SPECIAL FOR THE CO-ORDINATION OF THE SERVICES, IN SANATORIA, DISPENSARIES, AND IN THE HOMES OF THE SICK.

The first subject discussed was Specialised Nurses.

SPECIALISED NURSES.

Miss Garbagnati, speaking also for her colleagues, Misses Cantù, Sartori and Guidetti, said in part that the Royal decree of Law for Nurses' Boarding Schools (No. 1832, August, 1925) Promulgated (No. 562, 18th March, 1926) granted to Nurses in the Nurses' Boarding Schools the diploma after a course of three years' study; from which follows the granting of the said Diploma to Public Health Nurses.

This definitely regulated in Italy the moral and technical preparations of Hospital and Public Health Nurses.

In order to illustrate the quality of the above-mentioned Diplomas, those regarding the trained Nurses from those of the Public Health Nurses were divided.

Speaking of the general intention of those who must submit themselves for each specialisation, it was necessary to consider the moral, technical and scientific preparation in each case, particularly the co-ordination of services in Dispensaries, Sanatoria, Factories, Elementary Schools and the patients' own homes.

Considering that the VI Conference for the fight against Tuberculosis appointed a group of Public Health Specialists interested in Tuberculous patients, to undertake their cure whether in Dispensaries, Sanatoria, or at the patients' own homes, it was logical that this turned particularly on a group of Public Health Nurses.

One could now see the particular preparation required from the specialised Nurses; and, in the group above mentioned, it was preferable to point out their special functions, their different works, so as to make clear the course that must regulate the work done by the Nurse *herself*, and her particular natural gifts and acquisitions.

In favour of the public (especially the needy who have become fervent admirers of the Public Health Nurse) the opinion of the majority of Physicians is to retain to-day the service of the Public Health Nurse, an indispensable one in the machinery of Public Hygiene.

Dr. Felix Sartori says:—"An anti-tuberculosis dispensary could live without a doctor, but would die or live badly without a Public Health Nurse."

Signorina Angiola Moretti (Secretaria dei Fasci Femminili) also presented an interesting paper in this Session, to which we hope to refer further in a subsequent issue.

GENERAL OR SPECIAL TRAINING.

Mlle. de la Grange (France) raised the question as to whether a general or specialised nurse should be employed for the nursing of tuberculous cases. She thought three years too short a training if it was to cover both. It was very difficult to get the public to understand such a social problem.

THE RESPONSIBILITY OF THE NURSE IN THE TUBERCULOSIS CAMPAIGN.

The above subject was discussed by Miss Isabel Macdonald, F.B.C.N., Secretary of the Royal British Nurses' Association, who has very high qualifications for presenting the subject. She undertook the first course of Lectures on Tuberculosis given by the Fife County Committee (one of the most leading authorities on technical Education at that time in Scotland). She also lectured on the subject for the Carnegie Dunfermline Trust. Also the whole of the teaching on Tuberculosis under the County Committee of Fife and the County Council of Kinross, for many years, was carried out on a Syllabus drawn up by her and submitted to the Medical Officer for the Counties of Fife and Kinross, and which he adopted as his authorised Syllabus for the public lectures given on Tuberculosis by Medical Practitioners in the districts for which he was responsible.

We propose to publish Miss Macdonald's paper in full in a future issue and therefore now only quote her opening sentence, which gives the key-note to the paper.

"The responsibility of which I would speak, is one that rests, not only with those engaged in the various branches of Tuberculosis or Health work, but with every qualified nurse; directly or indirectly she comes constantly into touch, in one way or another, with the great problem of combating the spread of Tuberculosis or of rendering assistance to its victims. The keynote of a paper on "The Responsibility of the Nurse in the Tuberculosis Campaign" lies, I consider, in the one word, Knowledge. Knowledge of Tuberculosis, of its prevalence, its causes, its symptoms, its cure, and, above all, knowledge of how infection is spread, must, of necessity, engender, in every nurse worthy of the name, a great sense of responsibility whenever her work brings her up against the many problems connected with the disease. Whether it be in some Institution for the treatment of tuberculous patients, or in their houses, whether it be in the schools, in the General Hospital, in the factories, perhaps, or, it may be, only in the train or omnibus, opportunities, with their corresponding responsibilities, continually arise for her of doing something in the great campaign against this disease so insidious in its approach, so terrible in the havoc which it gives rise to, and so menacing as regards its influence on the coming race."

PROVISION FOR THE CARE OF THOSE SUFFERING FROM TUBERCULOSIS.

Miss M. Ritchie Thomson, R.R.C., F.B.C.N., who presented the next paper, was on the notification of Tuberculosis in Glasgow in 1910 appointed one of the visiting nurses. On the outbreak of war in 1914 she was called up with the Q.A.I.M.N.S. Reserve, and in 1919, on her return to Public Health work in Glasgow, was appointed Superintendent of Staff of Visiting Nurses, which numbers 21 for Tuberculosis and 32 for Child Welfare Work. In addition she performs the duties of Tuberculosis Almoner.

Miss Thomson said that the policy of the Corporation

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