

years, and (b) also for students eligible for the Ministry of Health's grant, £54 10s. for two years.

The following statement of the Joint Consultative Committee should be noted:

"The number of students enrolled for these courses is comparatively small, partly on account of the time and expense involved, and partly because (although the Ministry of Health Regulations recognise this training, with the addition of the Certificate of the Central Midwives' Board, involving a further training of twelve months, and at least six months' hospital experience, together with the Health Visitors' Certificate, as a sufficient qualification for a Health Visitor) students whose training has not included three years' nursing training in a General or Children's Hospital have difficulty in obtaining appointments as Health Visitors in the service of Local Authorities. Some of these students, at the completion of their two years' course of training for the Health Visitors' examination, enter a hospital for three years' nursing training, in order to overcome this difficulty. In this case, they usually defer their training for the Certificate of the Central Midwives' Board until after the completion of their three years' nursing training, when the midwifery training only involves a period of six months (instead of twelve), but even so, they have spent at least five and a half years in obtaining the same certificate as the students who take the six months' courses of training for Health Visitors have obtained after a minimum period of four years, during only six months of which has it been necessary for them to provide for their own maintenance, in addition to paying tuition fees."

The Local Authorities are to be congratulated upon their recognition of the value of the trained nurse, holding the certificate of the Central Midwives Board, and with a short specialised course in Health Visiting, when appointing Health Visitors.

#### CONCLUSIONS.

The Joint Consultative Committee have arrived at the following conclusions concerning approved training schemes:

1. Although all these courses have been approved by the Minister of Health and are based on the same syllabus, they differ, not only in duration and in type, but courses of the same type and duration differ among themselves.

2. They differ in the proportion of time allotted to practical and theoretical work respectively, in the total number of hours given to theoretical instruction, in the method of this instruction (lectures, tutorial classes, discussions on practical work, laboratory work, coaching and written work), in the proportion (apart from the number) of hours allotted to each subject in the syllabus, and in the nature, variety and method of the practical instruction.

3. There are other differences—differences in the conception of the purpose of the courses. Whereas the idea underlying the two-year course is that Health Visiting is a specialised occupation for which a specialised training course of two years constitutes the principal part of the preparation, the ideas underlying all the other courses is that general nursing training should be regarded as the principal part of the preparation of a Health Visitor, to which a short specialised course should be added.

4. Students are not selected for training by any uniform standard either of education or personality, each Training Institution placing its own interpretation of the words of Memorandum 101/M.C.W.

of "a previous education of such a kind that she is likely to profit by the course."

5. Students rejected by one Training Institution on the grounds that their previous education does not conform with this requirement are accepted by others. It follows that there is a wide variation among those who finally qualify as Health Visitors.

6. We are of opinion that the requirements of the Minister as to previous education should be interpreted as the possession of an educational qualification not lower than that of the School Leaving Certificate.

7. While not in favour of rigid standardisation, we consider that it is apparent that the extreme discrepancy shown in the courses of training in existence, indicates that there is as yet no general agreement as to what type of preparation best fits a woman to undertake the responsible duties of a Health Visitor.

With regard to conclusion 7, it appears to us that as four out of the five types of Training Courses for Health Visitors, recognised by the Minister, are open only to Trained Nurses, and Local Authorities have shewn a marked preference for Health Visitors who are trained as nurses, that there is a great weight of opinion in favour of a nursing qualification for Health Visitors.

#### RECOMMENDATIONS OF THE JOINT CONSULTATIVE COMMITTEE.

The Committee recommend that the Minister of Health be asked to consider:

1. The relative value of the various types of training now in existence especially with regard to: (a) duration; (b) allocation and arrangement of time for practical and theoretical work and to the various subjects in the syllabus.

2. The possibility of interpreting the words "previous education" in Memorandum 101/M.C.W., as the possession of an educational qualification not lower than that of the School Leaving Certificate.

We are informed by Miss Amy Sayle, the Honorary Secretary of the Joint Consultative Committee of Institutions recognised by the Minister of Health for the training of Health Visitors, and of organisations of Health Visitors that prior to 1931, the number of appointments open to Health Visitors was increasing markedly from year to year, but since 1931, owing to the policy of economy adopted by most Local Authorities, this increase has not been maintained. At the same time, owing no doubt to the increase in demand during 1929 and 1930, the number of persons qualifying as Health Visitors has increased to such an extent that the supply at present exceeds the demand. The present is therefore an opportune time for carrying into effect the recommendations made by the Committee.

#### NEW MASSAGE CLINIC FOR LONDON.

##### Alfred Eichholz Memorial.

As a memorial to his cousin the late Dr. Alfred Eichholz, Mr. William Eichholz has offered to pay the whole of the initial cost of equipping a new massage clinic in London. The offer was made to and has been accepted by the National Institute for the Blind.

The new clinic will be established near the headquarters of the National Institute in Great Portland Street, London, and will serve as the headquarters of the profession of massage and electro-therapy by the blind. All the most modern types of apparatus for massage, medical electricity and medicinal baths are to be installed so that the widest range of treatments can be given.

During recent years, massage has come to be recognised as a particularly suitable profession for the blind, and the careful selection of students has produced a high standard of efficiency among those who subsequently qualify. St. Dunstan men blinded in the War, and Civilians, both men and women, have responded with remarkable intelligence to the training at the National Institute's School.

Dr. Alfred Eichholz, who died last year, was formerly Chief Medical Inspector of the Board of Education. On his retirement he devoted his leisure to the care of the blind and deaf. He was a member of the Council of the National Institute for the Blind, and served as Chairman of the Institute's Education and Research Committee.

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