stability, status and title of Certified Midwife—the opportunity has been lost to protect the title and status of Registered Nurses acting as district nurses. The Government must realise the injustice it is inflicting on Registered Nurses, by perpetuating the use of semi-trained village nurses through voluntary nursing organisations, and its refusal to listen to the request of Registered Nurses to place their just cause before it is to be regretted. The truth is the "village nurse" is cheap in comparison with the thoroughly trained nurse which is presumably the reason of her employment by voluntary associations. In this new Bill every effort through local authorities and voluntary societies should have been enforced to remove the irregularities of nursing standards for rich and poor. We are not surprised to learn that socialist members of Parliament who understand the question intend, when they have the chance, to make an effort to rectify the action of

the present Government in ignoring the rights of Registered Nurses, and the sick poor in rural districts, whose interests are It is one. high time patronage οf skilled professions ceased —it is now out of date, and the cause of resentment.

THE HOME NURSING SERVICE, AUCKLAND HOSPITAL, NEW ZEALAND.

Recently, during a visit from Miss E. N. Nutsey,

S.R.N., S.C.M., Lady Superintendent of the Auckland Hospital, New Zealand, to the British College of Nurses, we received from her some interesting information concerning the Home Nursing Service connected with that hospital. Appended is a copy of a form returned to the hospital by one of the district nurses employed in this service, which will demonstrate its methods and value.

Name—Mrs. A. B. Address-St. Heliers.

Ward 17. Hospital Number. Date.

Honorary—Mr. Milson.

Diagnosis—Breast abscess incised and packed. Treatment required—Breast sinus to be packed and dressed daily, c Acriflavine dressing, commencing 24.3.36. Nurse's report—First visit paid 24.3.36, packing removed, fair amount of pus discharge, wound well, swabbed \bar{c} peroxide and repacked \bar{c} gauge wick, 1 in., soaked in

Acriflavine. Both breasts swollen and large lump under left axilla, firm bandage applied, fluids restricted, large dose of mag. sulph. each a.m. ordered.

General condition greatly improved, breasts soft, less discharge from wound. Dressing changed to Acriflavine in oil, small wick inserted. 28.3.36.

Wound healthy, slight discharge, dressing changed to red lotion, breasts normal, tight binder still applied.

Wound almost healed, red lotion dressing applied every second day. 5.4.36.

Wound healed. General health, fair.

Discharged 8.4.36.

P. J. DAVIS GOFF, District Nurse.

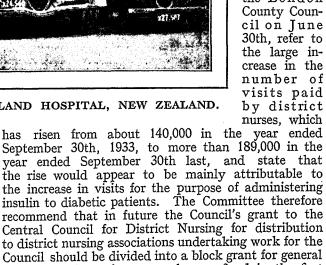
It is easy to realise the advantage of this close association between the hospital and the Home Nursing Service. Patients can be discharged sooner than would otherwise be possible, and beds thus freed for acute cases,

and the medical staff can be kept informed of the condition of their patients in their own homes.

> THE LONDON COUNTY COUNCIL.

Grant in aid of District Nursing.

The Hospitalsand Medical Services Committee, in a Report to the London County Council on June 30th, refer to the large increase in the number of visits paid by district nurses, which



The sum suggested for the general nursing grant is £4,500 a year for the present and next financial years and 6d. a visit towards the cost of insulin visits.

district nursing, of an annual sum, fixed in the first

place for a period of two years, and a separate variable annual grant towards the cost of insulin visits.



HOME NURSING SERVICES, AUCKLAND HOSPITAL, NEW ZEALAND.

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