

INTERNATIONAL CONGRESS OF NURSES, ATLANTIC CITY, N.J., U.S.A., MAY, 1947.

REPORTS OF SESSIONS OF SECTIONS.

2. THOSE DEALING WITH PUBLIC HEALTH,

Tuesday Morning, May 13th, 1947.

TOPIC: "DEVELOPMENT OF INDUSTRIAL NURSING."

MISS MARY I. LAMBIE (New Zealand) was the speaker and she urged that the Education Committee of the International Council of Nurses give particular attention to setting up uniform standards and requirements for the preparation of industrial nurses.

She said that industry is increasingly aware of the need for health programmes "with major emphasis on prevention."

"The nurse in industry," she said, "is concerned not only with treatment, but also prevention of disease and promotion of health." She added that the nurse assists doctors with medical examinations and is responsible for making provisional diagnosis and carrying out appropriate treatment.

"Industry wants more health and welfare services because they help to keep workers on the job; they relieve the management of worry about health hazards; supply authoritative medical information 'on the spot'; also reduce compensation claims."

Miss Lambie suggested that more instruction in prevention of accidents, first aid and emergency nursing be stressed in basic nursing courses for all nurses, with particular emphasis on industrial implications in the theoretical courses and clinical services.

In the discussion following Miss Lambie's talk, MISS M. DURANT, of Great Britain, said England had special courses of six months following general training which give an Industrial Certificate. She "wondered if it would not be possible to have international recognition of these certificates and similar courses of training of the same standard."

"The industrial nurse must be deeply interested in people, love the factory with its dirt and noise and smells, be able to converse freely both with the boiler-man and the Chairman of the Company. She must appreciate the dignity of the dirtiest work, the individual behind the outward signs of coarse hands and rough tongues. The nurse with the wrong personality or attitude can do untold harm both to the community wherein she works and the ideals of industrial medicine.

"Nurses the world over stand for something steady, impartial, humane, courageous and sympathetic; for unselfish service in a society which often lacks these qualities. We must continue to serve our fellow-men in this spirit. We must instil this spirit in new recruits to our professional ranks. This Congress may perhaps best further steps to the international appreciation of the importance of such an attitude to life."

MISS RYAN (New Zealand), first industrial nurse in India and Technical Adviser at the Royal College of Nursing, wished that R.C. of N. standards be adopted by the Education Committee of the International Council of Nurses.

All workers in the health area must integrate their functions carefully with the rest of the team. Efforts and advances must be recorded so that comparisons can be made. Methods for nurses working single-

handed must be simple. We must ensure that new recruits to our ranks must be imbued with our ideals.

Mrs. McGRATH said she realised that there was certain basic public health knowledge that Industrial Nurses must have, but that they also required specialised knowledge. At the University of Minnesota Institute, a three-day meeting was held, in 1941, to learn what was required as "special knowledge." The questionnaire then brought forward was reproduced, in 1944, and brought forward again yearly. The nurses asked that the institute should concentrate on human relationships, compensation laws and industrial relationships from the standpoint of labour and management, and it was considered necessary that nurses be brought up to date on advances at least once a year.

MISS LAMBIE said that a group service plan was in the stage of development. It was to choose a group of factories adjacent to one another irrespective of their activities. The nurse would cover 6 factories with from 50 to 300 employees. The nurse visits each factory once daily and the foreman at each section knows at what time she will arrive at the plant and have a list of employees to be seen ready for her. She would keep records as for full-time service. In the afternoon, she does home visiting or contacts the local P.H.-nurse or whoever does her visiting for her and reports back to her—because of travel time. She may even make some home visits of an immediate nature. The welfare of the worker infringes so much on whole home situation.

MISS DURANT said the earlier the public health in industry is referred to the nurse, the more the health teaching and the less serious the injury may develop.

Men nurses have the advantage in work in coal mines. No woman can work underground. Women nurses increase the nervousness of men in dangerous industries.

Wednesday Afternoon, May 14th, 1947.

Miss A. Wilkinson (India) introduced Miss F. H. Ziegler (U.S.A.), and the topic of her address was: "Newer Developments in Nursing Education."

MISS ZIEGLER stated in her opening remarks that she would describe for us the work carried on in three accredited schools with a basic curriculum incorporating new subjects to prepare Student Nurses for Community service whilst they were studying their Nursing courses.

The three schools were Skidmore College Department of Nursing (New York Post Graduate Medical School and Hospital); the Vanderbilt University School of Nursing, Nashville, Tennessee; and the Yale University School of Nursing, New Haven, Connecticut.

The general aim of these three schools was to combine Nursing and Academic work and so prepare the students for a University degree. An extract from the first bulletin of the Vanderbilt University School of Nursing reads: "The plan of the course is to develop in the student the greatest possible practical efficiency and skill in the nursing care of the patients, and to provide her with the scientific training and knowledge of the theory underlying disease which will make her ministrations interesting and educationally profitable. The course is designed not only to prepare the student for skilled bedside care in homes and hospitals, but also to emphasise the social, preventive and teaching side of

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