

## Training in Various Institutions

At the Conference of Delegates to the first meeting of the Central Council of the New Zealand Trained Nurses' Association, the opinion was expressed that the scheme, under the new Hospitals and Charitable Institutions Act, of placing all the institutions for the care of the sick under one Board, would largely do away with the difficulty of training nurses in some of the smaller, and in special, hospitals. We are pleased that this plan has already had a start, and is being proved practicable. From two of our principal hospitals probationers are now being sent for a part of their training to the fever hospital of the district, which is now an adjunct of the main hospital; and to the consumptive sanatoriums, and the chronic wards of the old people's homes.

We do not go so far as our American cousins, who, in what they term affiliated training, send their nurses for a year to another hospital under quite separate control. This, we think, too long for a probationer to spend away from the immediate control of the matron who will be responsible for her training, not only in the special technicalities of her work, but in the countless needs of discipline; of moulding of character (as far as that can be done with grown women); of awakening of power of observation; the teaching of method, economy, responsibility, and the developing, within reasonable limits, of the sympathetic feeling of a woman truly fitted to be a nurse.

The pupil will be sent, perhaps during her first year, to one of these adjacent institutions for about three months. If near enough to the parent institution she will still attend her lectures, but this may not be possible, and as the same lectures are given at least three times during a course of three years, it will always be possible to get at least the major portion of all that are delivered.

The matron will still watch over her; recall her if she is not progressing as desired, and receive reports of her work and conduct, just as she would if the pupil were merely in another ward. We consider that not more than six months should be spent away from the main hospital, but in those hospitals which make an agreement with their nurses to remain for a fourth year on the staff, after full qualification for State registration, further experience in the outside institutions might be obtained during that time, as charge nurse or sisters.

We do not consider that it is possible to include obstetric nursing in any but a systematic post-graduate course. Six months, at least, is needed to become sufficiently familiar with the many aspects of this work—this for qualified nurses; for others, at least twelve months. Therefore we dismiss the idea of nurses going through their general training attempting at the same time to study midwifery.

Undoubtedly this new development of training in various institutions will increase the work of our matrons; but as none of our hospitals approach the size of large hospitals in the older countries, we cannot feel that they will find any insuperable difficulty in carrying out a scheme which will make for the improvement of nurses' training in general, and the more efficient staffing of a large number of cottage and special hospitals; not to speak of the better care of the aged and chronic patients in the old people's homes.

It will be necessary in each base hospital to have on the books as many more staff nurses and probationers as will be needed for the institutions connected with it, and this will give the opportunity of more careful selection from a larger number of those nurses best fitted for positions of trust and responsibility, and best qualified to assist in the training of the juniors.