

Miss McKenny:

"The Sister is often driven through zeal and enthusiasm. She knows she can give a service to the patient with more skill and she wants to give him the benefit of her greater skill. That is why she serves him when time presses, instead of letting one of her assistants. Matrons make the best selection they can. They have not always got a very valuable candidate for the sistership, but they take the best they can get. The real problem is giving them enough help to leave them free to devote to the student. This is an economic problem. This is a remit, and the Council has referred it to us. Patients should not exceed twenty, for a Sister to do her work as it should be done and give the patient that care he is entitled to."

Miss Moore:

"It do not think that the public or our Boards quite realise what responsibility they are putting on this one Sister. They demand skilled nursing service for 30 up to 50 patients, and complain that the patients are not getting skilled care. How can she do it when she is the only trained one and those under her are getting training?"

Miss Holford:

"You are going to suggest that adequate help be given to the Sister, but if the Sister has from 50 to 60 patients, she is still responsible. We must agitate for smaller units in our institution."

Miss Swayne:

"We find a difficulty in getting trained nurses to remain to help the Sisters in the ward. Directly the nurse trains she immediately wants to go. That, I find, is the difficulty with me."

Miss Bagley:

"I would draw the attention of the meeting to the difficulty there might be in dividing the ward into two units owing to the construction of the ward. It might sometimes be difficult to appoint two sisters to a ward which may be considered too large. Therefore, I would favour the giving of more assistance in the ward."

Miss Bicknell:

"I think we all recognise, and have done for many years past, that the Ward Sisters have not sufficient trained help. In fact, the Conference has brought this up several times. The root of the matter is that our wards are over-crowded. Fifty to sixty beds are too many for one person to be responsible for. I would like to tell you here that the Department at present is advising Hospital Boards where they are building to go in for smaller wards. There is a large hospital being built at Invercargill. The wards are small wards of about ten—not more than 20. There is another Hospital to be built by the Government, and the largest ward will contain ten beds. There are other smaller wards."

"I think the only thing we can do at this juncture is to send some recommendation to the Hospital Boards that the number of patients is too great for one person to be responsible for, and ask them if they cannot alter the construction of their wards. A hospital building is a very expensive item in the country at present. If they cannot divide the ward, they can at least do what is being recommended in some hospitals, partially divide them, thereby making the large wards into small wards. This is done in America and Scandinavia; perhaps two Sisters could work this. Whenever they are adding to their hospitals they will bear in mind the necessity of building smaller wards."

Miss Muir:

"The whole thing hinges on over-crowding. That is where the Sister cannot manage, but where the ward is kept to its regulation bed list, and adequately staffed, the position is just a little different."

Miss Bagley proposed, and Miss Lambie seconded:

"That more trained help be given to Ward Sisters, who should not have an excessive number of patients under their care, and that this be sent as a recommendation to the Hospital Boards' Association."—Carried.