

## RULES RELATING TO THE APPOINTMENT OF DISTRICT NURSES.

Under section 33 (2) of the Hospital and Charitable Institutions Act, 1909, "A Board may also from time to time appoint such district nurses as it may think fit for the purpose of attending sick persons elsewhere than in an institution."

(1). On receipt of an application from the settlers of a district, a Board may appoint a trained nurse to perform such duties with regard to the attendance and nursing of the sick in that district as shall be determined by the Board.

(2) In no case shall a Board refuse to grant such a petition when it is accompanied by a statement that the settlers of the district are prepared to guarantee a sum of not less than half the salary and expenses of the nurse to be appointed.

(3) The district nurse shall be a fully trained and certificated general nurse and midwife.

(4) She shall reside at a place convenient and central for her work.

(5) She shall work under the doctor appointed by the Board and other doctors practising in her district.

(6) She shall visit all cases of sickness in her district where her services may be required. She shall decide as soon as possible whether or not the services of a medical practitioner are needed, and shall advise the head of the household accordingly. In such cases she shall advise the head of the household to call in the services of the usual family medical attendant, and be specially careful not to exercise her influence in favour of any particular medical man or men.

(7) She shall faithfully carry out the instructions of the medical practitioner, and shall from time to time advise him as to the condition of the patient.

(8) Except in cases of emergency, no patient shall have an exclusive claim on her services. She shall carry out her duties by periodical visits. In those cases where continual nursing attendance is necessary, she must report the circumstances to the Board, with a view to getting additional nursing attendance.

(9) She may, if convenient, and if not required at more than one case, stay at her patient's house, it being understood that from that house she

may attend any other case needing her.

(10) Persons engaging her must understand that they must make reasonable provision for her comfort, and must not expect her to undertake the care of the whole family, or the ordinary work of the house.

(11) In case of emergency, and when the nurse sees that provision for this work cannot otherwise be made, she may obtain, if available, the help of some recipient of charitable relief in that particular part of the district.

(12) She may, with the approval of the Board, in remote country districts act as a midwife at confinements, adhering to the "Rules for guidance of Midwives" in regard to sending for medical aid.

(13) She may, if so desired by a medical practitioner engaged for a maternity case, give general instructions to the expecting patient, and supervise the work of the unqualified nurse, if such a one is left in charge of the case.

(14) She shall in all medical and surgical cases, except very slight and temporary ailments, obtain the advice of a medical man.

(15) She may for certain chronic cases among the poor—such as rheumatism, chronic bronchitis, asthma—distribute remedies prescribed by the medical practitioner appointed by the Board.

(16) She shall be provided by the Board with all that is necessary for her work, and such stock of drugs and appliances as may be deemed necessary by the medical officer of the Board. She shall keep an inventory and strict account of their use.

(17) She shall keep books with details as to the names, addresses, and ages of the patients attended; the natures of their maladies; the number of visits, the dates and results of treatment, and their ability or otherwise to pay for such. A copy of this book shall be sent to the Board, with a general report of her work for each month.

(18) She shall collect fees from her patients according to scale drawn up by the Board, and shall report the circumstances of any in which she considers a fee should not be exacted.

(19) She shall pay in these fees to the Secretary or to the Hospital account at the nearest bank as often as practicable. In no case shall she

make a charge or accept a monetary reward for her services.

(20) She shall be entitled to one month's leave of absence during the year, suiting her time of leave to the time she will be least needed in the district.

(21) She may not leave her district for more than twelve hours without permission of the Board.

(22) She may, in urgent cases, leave her centre to convey a patient to the Hospital, but in ordinary cases shall arrange for his safe conduct by a reliable person.

**Note.**—The District Nurse must also be very careful not to recommend any particular medical man or medical men, nor in any way assume the responsibilities of a medical practitioner.

Nor should a district nurse attend those houses—except for occasional visits—where the head of the household is in a position to pay the usual weekly fees charged by private nurses.

### Proposed Scale of Fees for District Nurses.

Maximum charges, to be reduced with the consent of the Board when the nurse considers necessary:—

	£	s.	d.
A single visit ... ..	0	2	6
Dressing wound, etc., for Doctor ... ..	0	2	6
Supplying dressings ... ..	0	0	6
Occasional visits to waiting midwifery case, doctor engaged: according to number ... ..	0	5	0
			or 10
Sitting up for night with patient ... ..	0	10	6
For entire term with one patient, per week ... ..	2	2	0
If midwifery case with delivery, extra ... ..	1	1	0
Daily visits, with nursing once a day, per week ... ..	0	10	6
Daily visits, with nursing twice a day, per week ... ..	1	1	0
Daily visits, midwifery case, delivery and puerperism ... ..	1	10	0

### WOMEN VOTE IN PALESTINE.

For a quarter of a century women have enjoyed the privilege of voting in all the Zionist colonies in Palestine. There are now about forty of these purely Jewish colonies with a population of eleven hundred.