

What will trained nurses gain by joining the British Nurses' Association?

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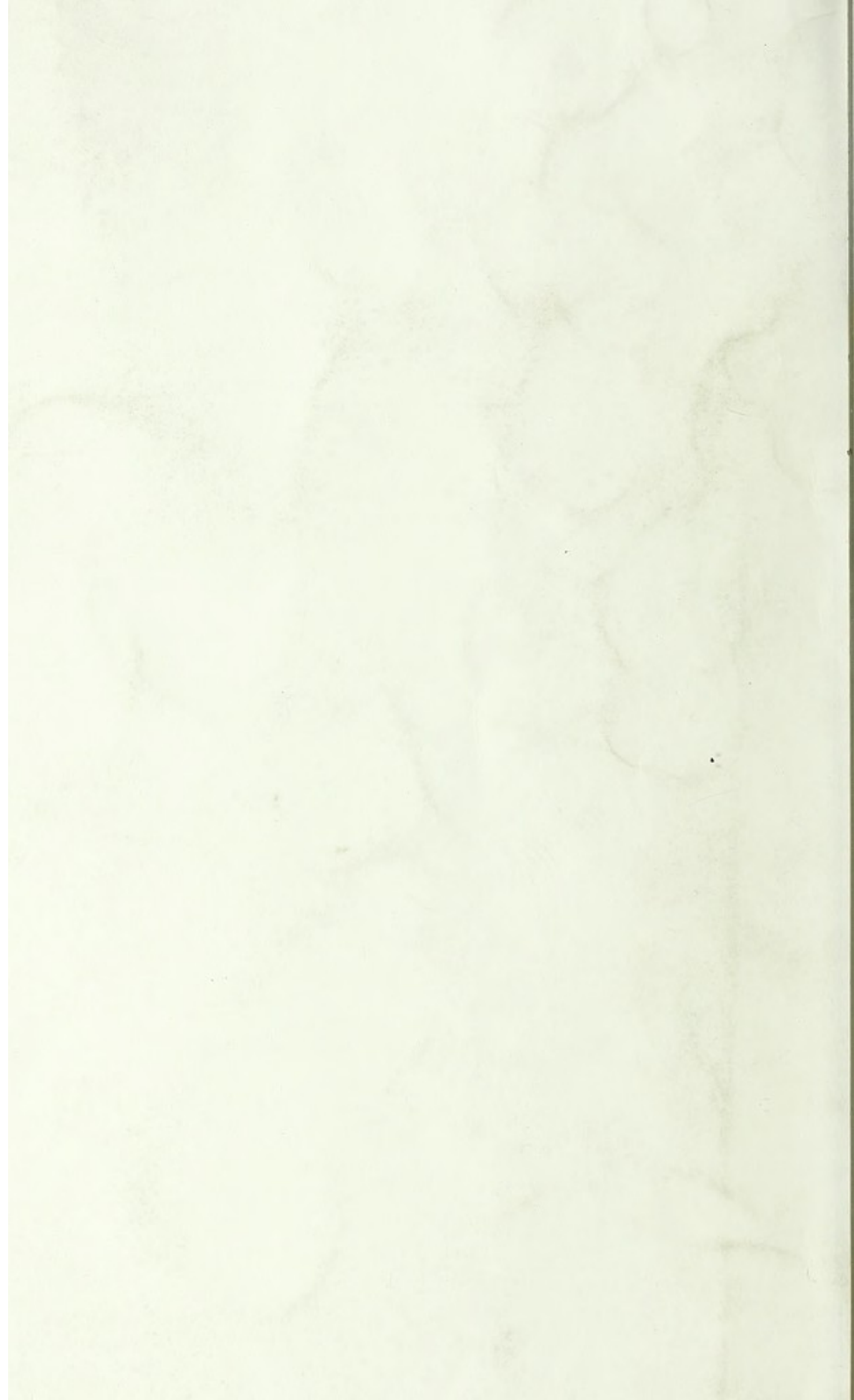
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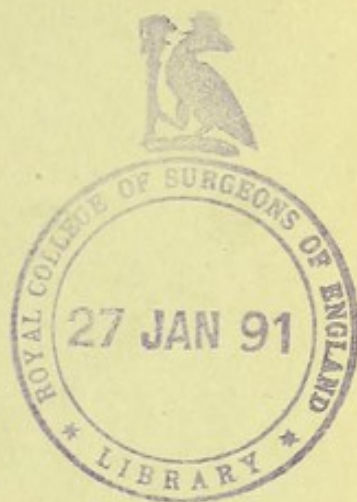


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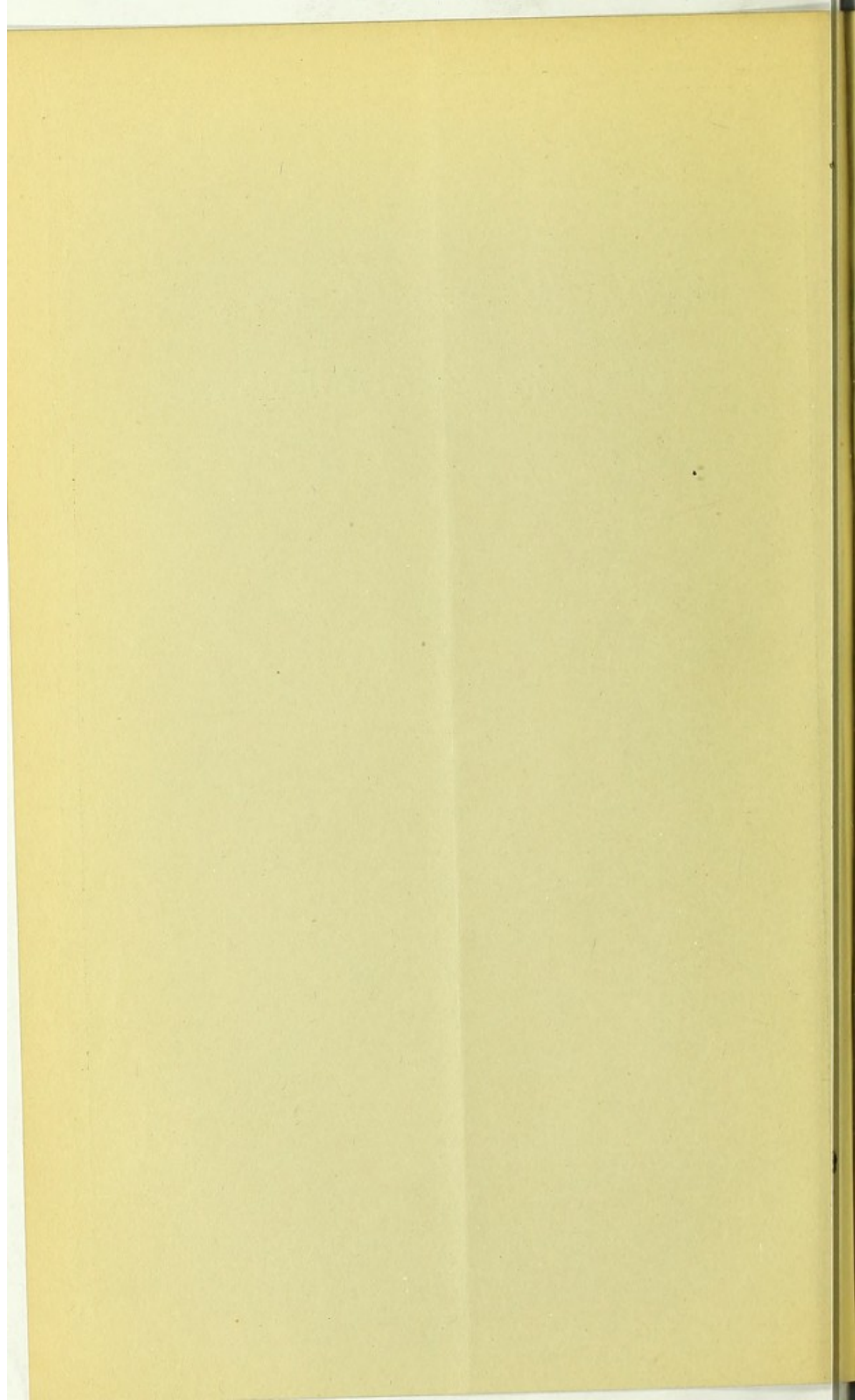


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*What will Trained Nurses gain
by joining the British Nurses'
Association ?*



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*What will Trained Nurses gain
by joining the British Nurses'
Association ?*

11. The first of these is the
fact that the number of
cases of disease is
increasing.

WHAT WILL TRAINED NURSES GAIN BY JOINING THE BRITISH NURSES' ASSOCIATION?

THE British Nurses' Association is stated to have been founded "in order to unite all British nurses for their mutual help and protection, and for the advancement in every way of their professional work." These words have a very attractive sound, and point to an object with which many will sympathise. Will that object, so far as those who claim to be trained nurses are concerned, be attained by the means proposed by the British Nurses' Association, and, if not, what will be the result?

The British Nurses' Association proposes "to obtain a Royal charter incorporating the Association, and authorising the formation of a register, which shall include all nurses as described in Bye-Law IV* applying for registration before the first day of January next following the granting of the charter," and after that date "to provide for their registration on terms satisfactory to physicians and surgeons as evidence of their having received systematic training."

The great efforts which are being made by the British Nurses' Association to induce all nurses to become members, render it incumbent upon every one, before doing so, to obtain

* *Bye-Law of B. N. A.* IV.—Until the following shall be eligible to become Members on producing to the Executive Committee satisfactory evidence of professional attainments and personal character, and of having been engaged for three years in nursing, viz.—the past or present Matrons or Lady Superintendents, Sisters or Nurses, of any Public Hospital or Infirmary, or Public or District Nursing Association in the British Empire, all trained Midwives, and women who have been engaged in Private Nursing.

a clear understanding not only of the benefits which membership may offer, but also of the means by which it is thought that the supposed benefits will be attained.

As a trained nurse and hospital matron of some experience, and as one who is deeply interested in the welfare of my fellow-workers, I have most carefully considered the proposals of the British Nurses' Association. I have reluctantly arrived at the conclusion that the proposed measure of obtaining a charter with a view to establish an authoritative registration of nurses, would be detrimental to the interests of the best trained nurses, and that its tendency would be to hinder rather than to advance their professional work.

I find that many experienced matrons, sisters, and nurses concur in this view, and are, moreover, distinctly of opinion that a result decidedly injurious to trained nurses, both individually and as a body, would be entailed if the suggested plan of registration were carried out.

We also feel that sufficient opportunity has not been afforded to nurses generally to hear and understand some of the reasons which can be adduced in support of this opinion, and I trust the importance of the question as affecting their interests may be regarded as sufficient excuse for putting another aspect of the matter forward from the nurses point of view.*

I would preface my remarks by saying that it is with genuine regret that I and those who concur with me find ourselves in disagreement with many of our own body, as well as with others having most honoured names, who, we are sure, have the interests of nurses at heart as sincerely as we have ourselves.

Nothing is further from our intentions than anything

* Mr. Henry Bonham-Carter's pamphlet, entitled, "Is a General Register for Nurses desirable?" published in August 1888, deals with the general objections to this proposal. Copies can be obtained from Messrs. Blades & Co., Printers, 23 Abchurch Lane, London, E.C.

approaching to personal controversy, but as we are dealing with a question important to all nurses, personalities really have no place at all in the discussion, and we may rest assured that all who have interested themselves in the matter are equally desirous of arriving at a sound conclusion.

For our part, we are firmly convinced that were the scheme of registration proposed by the British Nurses' Association successful, a serious blow would be dealt at that steady progress which has marked the position of nurses in recent years, and that the step contemplated is one which, if taken, would leave most injurious consequences.

We think further development of nursing on the existing lines highly desirable, and I would now point out some of the chief reasons why we should deplore the proposed new departure.

I. The scheme of registration would hinder rather than advance a high standard of nursing, and would tend to prevent the progress and development of the work on its present lines.

II. It would inevitably injure the position which a well-trained nurse now holds in the estimation of the public, by rendering it increasingly difficult to distinguish between first and second-rate qualifications, and it is obvious that those who have most to lose will suffer most by an attempt to reduce all qualifications to a dead level of uniformity.

III. Of the minor objects of the British Nurses' Association, the establishment of Convalescent Homes for Nurses, and of offices to facilitate the obtaining of engagements, are not needed, and if instituted would not be conducive to the welfare and advancement of the best nurses.

I. The scheme of registration is, in our judgment, calculated to lower rather than to raise the present standard of nursing, by concentrating the attention of nurses on the theoretical examination, the passing of which is ultimately to

get their names placed on a public register. In the first place, we do not see that any exact uniformity of theoretical knowledge is needed to enable a nurse to be justly described as *trained*, and in any case the authorities of the best known Training Schools for nurses are not agreed, nor likely to agree, as to the required standard. It is found that many women who are good practical nurses fail to pass examinations; and, on the other hand, that those whose previous education enables them to come out well in the examination test, frequently fall far below the others in their practical work. As women from every class of life become nurses, this fact is not remarkable; but it renders the adoption of one theoretical standard manifestly undesirable. It is well known by nurses themselves that the examination test, serviceable as it is as evidence of a certain amount of technical knowledge, is no sort of guide as to the qualifications of a nurse for her practical work. This is far more influenced by experience and character, the latter being the chief point upon which the nurse's value must ultimately depend.

By character is not meant only those fundamental qualities of honesty, sobriety, cleanliness, etc. In these days it is understood that no one would be accepted as a probationer without producing satisfactory evidence on these points, any more than they would be received for training unless they could read and write. But what examination can test those special characteristics of gentleness, quick observation, quiet self-control, the innate motherly tenderness—essentially tact—which belong to real nursing, and the helpful sympathy with suffering which all true nurses must possess in some degree if they are to be worthy of the name? The fact that these qualities exist in individual workers, the degree in which they exist, can only be ascertained by those under whose observation the process of training is carried on.

The work either draws out these essential qualities, or

proves the lack of them in the individual nurses concerned ; and if we admit that the ultimate value of a woman as a nurse depends upon her personal characteristics, combined with her practical experience, is it not futile to attempt to judge of her fitness for the work merely by her theoretical knowledge, or rather by her capability of bringing this theoretical knowledge to the fore in examinations ?

A testimonial as to conduct would doubtless also be required to enable a nurse's name to be placed on a public register, but it could only be given in the general terms before indicated ; so that, from a nursing point of view, the finer shades of character upon which a high quality of work depends would necessarily be left out of consideration altogether.

All persons, of course, are liable to be the victims of errors of judgment, but as every probationer has her two or three years of training in which to correct any false impressions that she may have given to begin with, and in which to overcome failures that have been pointed out to her, in short, to do herself full justice, the conclusions of the authorities of the Training School as to her capabilities are, truly speaking, able to be formed from an all-round knowledge of her work, and the character shown in the doing of it.

Surely this is fairer to every nurse than any diploma granted by a self-constituted outside body possibly could be. Only those who are responsible for the training of the nurse are in a position to judge of her fitness for the work, of how far her theoretical knowledge and practical work, combined with the personal characteristics essential to success as a nurse, render her qualified to rank as first-rate at the end of her training.

The necessity for obtaining a nursing qualification outside her own Training School would inevitably tend to make the nurse regard a suitable character for the work as secondary

to the importance of her technical knowledge, whereas her value to the public as a nurse is immensely influenced by the former consideration.

We need not undervalue the importance of lectures, classes, and examinations, because we cannot concede that the passing of any examination proves a nurse's fitness to be considered a good trained nurse.

The result of an annual examination in a Nurses' Training School affords valuable evidence of the attention paid to the instruction given, of marked ability on the part of some, of much painstaking-study on the part of others, of lamentable negligence or lack of ability on the part of a few. It is useful to know the exact individual and comparative results of the labours of the teachers and of their pupils. But, it must be confessed, that even in the Training School itself, if the results of an examination were the sole guide as to the comparative practical merits of the nurses concerned, it would be an extremely misleading one.

How much more would this be the case if the examination were conducted by an outside body, who at best would only be in a position to judge of the theoretical attainments? It would be fatal to the interests of nurses and their patients for this important point to be thrust into the background in a mistaken zeal for proficiency in that limited portion of their qualifications which can be adequately tested by examinations.

Associations have their distinct attractions and value. On the whole, may not the good to be derived from them be wisely confined to the past, present, and future members of the Hospital or Training School to which the nurse is attached, rather than extended vaguely to the whole nursing world?

Are not the mutual interests of individual nurses almost limited to these, and is this altogether to be deplored? Nurses who belong to large Training Schools know how impossible it is to keep up even with the names of those who are

working under the same roof, yet they have the sense of association with numbers. If they meet the familiar uniform in different surroundings, the knowledge of their mutual interests and "association" brings them strongly together. But, if even in one building, the Probationers quickly passing through the Training School have a comparatively slight sense of community in work, how much more must this be the case in an attempt to organise a sort of surface unity between workers who have received their training under very varied conditions?

The actual work of private nurses must of necessity be isolated, but no satisfactory person trained in a Hospital need lose touch with her "association" unless she desires it, nor need she feel otherwise than friendly towards fellow-workers because their qualifications for nursing may not be identically the same.

A feeling of special fellowship for the Hospital that nurses have been trained in is rather to be encouraged than not. So long as they are engaged in nursing anywhere, they *are* working for their Hospital in the widest sense, and casting credit or discredit upon it.

Is it not more wholesome for and natural to a woman to throw her whole energies into working for the credit of some person or something that is not herself, but intimately connected with her, than to strive only for her personal advancement, however legitimate the latter aim may be?

There is a community of interest between all whose business it is to nurse the sick, but this is only true in the broadest outline.

The amicable competition between different Training Schools tends to greater development of the art of nursing itself, and is surely of a wholesome kind, stimulating them collectively and individually to renewed endeavour and steady progress. Is it not better calculated to suit the varying require-

ments of the physicians and surgeons connected with them than the enforced adoption of a standard which might not be equally well adapted to all cases ?

When each nurse does her best to enhance the reputation of her own Hospital, wherever she may be, in what way is the profession as a whole likely to suffer in the public estimation ? But how might it not suffer if they all were judged by one standard only, that standard, too, narrowly and arbitrarily arranged.

Why has nursing become the popular and well-recognised "profession" that it is to-day ?

Is it not because our courageous predecessors knew that it was work eminently fitted for women as women, and realised that all womanly qualities must be brought into it. It remains for the best nurses to prove worthy of the privileges they have inherited, and to take care that they hand on to their successors all, and more than all, that they themselves have received by transmission.

Women's work, especially, must be the sum of individual effort ; it is not a subject which can be justly estimated from any other point of view, as it then loses its special characteristics.

Goethe tells us that "it is appointed for women to stand alone all their lives and work alone." "Observe a young lady as a lover, as a bride, as a housewife, as a mother ; she always stands isolated. She is always alone, and will be alone ; even the most empty-headed woman is in the same case, each one of them excludes all others. It is their nature to do so because of each one of them is required everything which the entire sex have to do."

Is this less true of a nurse than of any other woman ? Will it be any consolation to a patient within or without a Hospital to know that there are hundreds of good nurses in the world, if the woman tending upon him has mistaken her

vocation, and is devoid of practical skill and true nursing instincts?

Every experienced Hospital worker knows that the clumsiest practical work in nursing is not incompatible with the passing of a highly satisfactory examination, yet the unlucky patient and the would-be nurse are alike to be pitied, and the result can only be characterised as a failure.

Nurses who know how to estimate their chosen work aright, will spare no pains to prevent it from degenerating into a mere profession, and will resist the obvious danger of a lower standard replacing the steadily advancing progress which can now be found in different degrees in many directions. They will see wherein their true strength consists, and will beware of betraying their trust by a weak yielding to a passing fashion.

The real spiritual unity is attained by striving after the same ideals, and these must be approached by each individual in the degree and by the means possible to her.

They can never be secured by conforming to a nominal uniformity of theoretical attainments.

II. Would any real benefit accrue to less well-trained nurses if those who have nothing to gain and much to lose by being classed with second and third-rate nurses sacrifice themselves by doing so? Surely not. It is never well, voluntarily, to lower our standard. Nurses will be judged individually by their respective patients, and if all are classed together, it is gravely to be feared that the unpractical and unsuitable, even though not ignorant, nurses will damage the others most seriously in the public estimation.

At present there is every opportunity for any one requiring a nurse to ascertain her personal qualities, and the extent of her training.

In these days of certificates the nurse has sufficient independence, and yet the right to fall back upon her own

Hospital for help in difficulties, if she needs and deserves it; while any member of the public can apply to that Hospital to verify certificates, and to obtain fuller information.

If those persons who pass themselves off for trained nurses when they have no claim to the title sometimes injure others in the eyes of the public, it must still be remembered that the employers of the nurse have chiefly themselves to blame for not asking for written evidence of the truth of the statements made. But what protection would good nurses or the public have, if good and bad alike, fulfilling nominally the same external conditions, produced the same diploma? How could the public distinguish between them; or the best nurses maintain the position which is justly their due?

It is true that some difficulty exists in distinguishing well-trained from inefficient nurses; but the establishment of a register, enrolling all persons described in Bye-Law IV, and including the best nurses, would enhance the existing difficulty, and therefore be harmful to the public and to the most qualified nurses.

The idea that the public cannot protect itself from incompetent nurses cannot be seriously entertained when nearly all the metropolitan hospitals and very many large provincial hospitals keep highly trained private nursing staffs.

Medical men and others have no difficulty in knowing where to apply when they need specially skilled labour.

It does not seem necessary that well-trained nurses need disturb themselves about the claims of those who are not qualified, while the difficulty of discriminating between first and second-rate qualifications is comparatively small, but the matter would assume quite another aspect were all placed on one level.

Nursing covers a large field, and employment may fairly be found for the most varied degrees of knowledge and differences of character. Plenty of good work may be, is, and

will be well done by nurses who have no certificate, nurses who might be disqualified for training in these days of keen competition, and who are yet well suited for much useful practical work.

There is no need to look down upon their more limited knowledge and capabilities. There is nothing to despise in them or their work, provided it does not *pretend* to be what it is *not*, HIGHLY SKILLED TRAINED NURSING.

The important point is, that the public should be able to distinguish between first and second-rate qualifications, and be able to pay for and secure whichever it may happen to need.

At present this is to some extent possible, but this would no longer be the case if nurses of all shades of character, ability, and experience produced the same diploma, and their varied qualifications were reduced to a dead level of nominal uniformity.

Any outcry against private nurses as a class nearly always resolves itself into a complaint of a lack of the characteristics which are essential to good nursing, and instances of actual ignorance are rare in comparison. The best nurses would be less able than ever to protect themselves from the prejudice created by the incompetent members of the "profession." Neither must it be forgotten that failure to meet the reasonable demands of the public would go far to produce reaction in favour of employing untrained nurses to attend many private patients, when otherwise skilled labour would be preferred.

In fairness to all let nurses be true, and let them make every effort to render it easy for those whom it may concern to know their exact capabilities. All cannot be equally well trained any more than all are equally suitable for training, but they must keep clear of all pretension if they wish to do full justice to their work, and to retain the respect and due appreciation of the public.

Trained midwives are not nurses, and their claims cannot be considered under the same conditions.

III. There can hardly be a greater mistake with regard to the needs of nurses than to imagine that Convalescent Homes—that institution-life of any kind—would prove a refreshment to tired or sick nurses needing rest and change. Of all persons they require home-life, or its equivalent, with friends whose interests lie outside the comparatively narrow groove of hospital-life.

Are these women who devote their health and strength to their patients never to be allowed to turn their minds from “cases,” never to be allowed to forget that there are sick people in the world, never to refresh their hearts and souls by resting in surroundings where health and not sickness is the normal condition of the people they are with?

Does it need any very wide experience to perceive that those whose lives are passed in the punctual routine inseparable from the work of a well regulated institution, find special relief and actual pleasure in the ease and freedom of the home-life, which to them is such a welcome variety?

A mental change is often as much needed as physical rest and change of air, and it would be short-sighted to fancy that nurses would be benefited by the establishment of Convalescent Homes for their special use. It must not be forgotten that nurses come from all classes of the community, and, on the whole, more nurses are inclined to regret that they have not sufficient time to spend with their friends and relations, than to lament that they have nowhere to go when a holiday comes.

There are the lonely, friendless workers of course, but they are so small a minority that it is not difficult to find kind-hearted people who are ready to bestow the most cordial hospitality on over-tired nurses, who are eager to make them happy, and who take pains to do this in the nurse's own way,

and according to her individual inclination. This not only provides for the needed rest or holiday, but often adds the charm of a fresh and lasting friendship, while everything that tends to make the Public and Hospital workers mutually interested is an advantage to both.

Then, as to any need for registration offices, nurses worthy of employment find very little difficulty in securing it, either through their own Hospitals or by answering the numerous advertisements for persons possessing various degrees of training.

Lastly, it is not possible that an outside body, even if it could be made fairly representative, should advantageously dictate to various institutions, or to the whole body of nurses in the country, what is the best means of settling their affairs. They do not desire strict uniformity of aim, nor practice, nor will they endeavour to bring it about.

Some Training Schools are far more advanced than others, and are still progressing. Others appear to stand still, or to achieve with difficulty, by slow degrees, what other places have accomplished long before.

Progress is essentially relative in this as in other connections, and it is idle to imagine that any attempts at enforced uniformity can produce any real advance.

Well-trained nurses will see for themselves that the success they have attained in the present has been solely due to individual effort in the past, individual excellence in each worker, and in the institution with which her own share of work associates her.

It will be clear to all that a fuller measure of success in the future will be best secured by following in the lines which have brought them with comparative rapidity to the position which is theirs to-day.

Further reflection will only serve to show thoughtful nurses that a mere combination of numbers, however

imposing it may sound, can do little to advance the true interests of work, the best side of which, though connected in practice with technical acquirements, lies far beyond these. Each nurse will most truly serve the cause she has at heart by striving herself to reach the highest she can see, taking pains to ascertain first in what that highest consists.

She would be preserved from that narrowness of mind which the dwelling upon her work as a *mere* profession is only too likely to engender, by reflecting that it is true in nursing, as in other matters where a noble result is sought, that—

God fulfils Himself in many ways,
Lest one good custom should corrupt the world.

Neither on practical business-like grounds, nor on what may be termed the more sentimental aspect of the question, will well-trained nurses derive any benefit from attempts to reduce their varied acquirements to one dead level of crushing uniformity.

The authorities of their respective Training Schools, whose guidance nurses are advised to ignore, have *proved* their best friends in the past. The advantages nurses enjoy to-day are mostly the result of the unwearied labours of these authorities, and the improvements yet hoped for in many directions must depend chiefly upon their continued individual exertions.

It yet remains to be seen what first-rate nurses have to gain by following their untried champions, who are eager to rank all together, and protect them from—what?

EVA C. E. LÜCKES,
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