

*The Asylum Trained and Certificated Nurses of the Medico-Psychological Association.* By T. OUTTERSON WOOD, M.D., F.R.C.P.Edin., M.R.C.P.Lond.

The fact that the Medico-Psychological Association has now upon its register upwards of 2,400 nurses, including both sexes, who hold the certificate of the Association "*for proficiency in nursing,*" renders it unnecessary to offer any apology to this meeting for bringing before it the question of considering the position in which we now stand with regard to our nurses and to the public.

When the subject of the systematic training and qualification of asylum trained nurses was discussed some years ago, and the matter was put into shape, although we were sanguine of the success of the scheme, we could scarcely have realised at that time all the results that would follow the successful inauguration of a uniform curriculum of training and high standard of examination for our nurses. Now we find we are face to face with an unequivocal success, and by the force of circumstances we are bound to act up to the responsibilities of the position in which we stand, that of being one of the most important, if not the most important, of the nursing authorities of this kingdom, an authority with which the nursing community will have to reckon, and which it is our duty to maintain.

I doubt if any nursing institution can boast of such a position as we hold. Among the many nursing societies there is not one, so far as I am aware, which acts as the qualifying Board for nurses trained and taught in so large a number of nursing centres as we do, nor which can show so numerous a body of trained and qualified nurses holding a "certificate for proficiency in nursing" of such weight as ours.

In the Asylums and Hospitals for Mental Diseases of Great Britain and Ireland there are roughly speaking 128,000 patients of all classes, and if we calculate only one nurse to every 20 patients it gives us a body of upwards of 6,000 persons engaged in the care and nursing of the insane. It is a gratifying fact that although our system of training and education has not yet been ten years in operation we have already one-third of that number who have had the ability and intelligence to train for and pass the stringent examination for our certificate. This has been in a great

measure due to the loyalty with which Asylum Medical Superintendents and medical officers have seconded the efforts of our pioneers in asylum administration, and their earnest recognition of the hospital principle in its truest and best sense as being the basis of successful treatment among our sick and insane patients.

It has been to me a matter of regret that the good work the Association has been doing in encouraging and carrying out the training and education of mental nurses, should by the force of circumstances have been, as it were, done in the dark, so far as the public is concerned; indeed, the ignorance displayed outside our Association with regard to the methods of treatment, care, and nursing we adopt for our patients is lamentable. It is with the hope that a little ventilation of the subject, not only on such an occasion as this, but upon every available opportunity when bodies of medical men are brought together outside our speciality, will result in the position of the Association with regard to its nurses being better understood and appreciated, that I have been induced to place the subject before you to-day for your consideration. It would be well for us to enquire: 1st. What is the present position our mental nurses hold among nurses generally? 2nd. What steps can we take to improve their status? And, 3rd. What is our position as the qualifying body for these nurses in relation to the public?

1st. As to the position our nurses now hold among nurses generally. Owing to the utter want of knowledge on the part of other nursing institutions as to the work, training, and qualification of our nurses, until very recently they have had no status, and no recognition whatever. They were looked upon as a body of rough, uncouth persons, devoid of education; ignorant of the very elements of sick nursing, and possessing but one quality worthy of mention, viz., courage to tackle a violent lunatic. I heard myself this opinion expressed when the question was discussed at a meeting of those who may be looked upon as authorities possessing special knowledge of sick nursing, many of them heads of large, important and influential nursing institutions. With the object of obtaining for the asylum trained nurses a recognised place in the nursing world, and of bringing them more into line with their hospital trained sisters, in July last I laid a proposal before the General Council of the Royal British Nurses' Association, of which I am a

member, suggesting that mental nurses who had had three years' asylum training, who held the certificate of our Association "for proficiency in nursing," and who could bring testimonials of good moral character, should be admitted members of the Royal British Nurses' Association, that they should be admitted as mental nurses, that is, as a distinct class, with a separate department in the published register of that Association. A Committee was appointed, consisting of Her Royal Highness Princess Christian, who is the President of the Association, and the Honorary Officers, with Sir James Crichton-Browne and myself, to consider and report upon the question, and in October a report strongly in favour of the proposal was laid before the Council and unanimously adopted. Immediately a violent opposition to this excellent scheme was started in the columns of one of the nursing journals, and a series of articles and letters, based upon ignorance, misrepresentation, and trades' union principles, forthwith appeared in that paper. No effort was spared to make it appear that an attempt was being made to force untrained lunatic asylum attendants upon the register of the Royal British Nurses' Association, and to prove that if this were done they would take the bread out of the mouths of the hospital trained nurses, and that their admission would degrade the register because they were not trained nurses at all.

It is needless to say such evident partisanship defeated its own object. It raised on all sides the question, what qualifications do these mental nurses really possess, and what has been their training? An opportunity was thus afforded of answering these questions fully in the medical Press and in the representative nursing journals, and in spite of the efforts of a few prejudiced persons anxious to pose as the sole leaders of light and learning in the nursing world, the facts became more widely known, and our asylum trained nurses have at last had their training, education, and qualifications recognised by many nursing authorities, who, in the first instance, through want of knowledge, had refused to allow them any status whatever. It is now admitted by many competent authorities that no nursing curriculum is more uniform or more practical, and no standard of examination is higher than ours.

2nd. What steps can we take to improve the status of our asylum trained and certificated mental nurses?

I have mentioned that a Committee of the General Council

of the Royal British Nurses' Association was appointed to consider and report upon their admission, under certain conditions, as members of that Association. On the report of the Committee being adopted, Her Royal Highness the President was empowered to confer with Medical Superintendents of Asylums upon the subject, and I ventured to suggest that as the Council of the Medico-Psychological Association was their representative body, an application should be made to it, asking for a Committee to confer with the Committee of the Royal British Nurses' Association. The application was made, and a Committee consisting of Drs. Newington, Nicolson, Savage, Spence, and White was appointed. A Conference was held, at which Her Royal Highness presided, and the proposals of the Committee of the Royal British Nurses' Association were explained. Both Committees still exist, and I trust ere long we shall be in the position to have the result of their deliberations laid before this Association. My own view is that if we can have our asylum trained nurses affiliated with a large General Nursing Association, such as the Royal British Nurses' Association, as a distinct class, and in no way clashing with the interests of the hospital trained nurses, but still as a branch of the nursing service, we shall obtain for them a position among nurses to which by their training and qualification they are fully entitled. As regards improving their status in asylums there can be no doubt the possession of our certificate gives them a standing of which they are justly proud, and I am glad to hear that asylum authorities are also recognising its value by giving increased pay to those who hold it. I also understand it is becoming the rule in many asylums to regard it as a necessary qualification for the post of "charge nurse," and it is most desirable it should be, for the position our certificated mental nurses will ultimately hold will in a great measure depend upon the position we ourselves give them.

3rd. What is our position as the qualifying body for mental nurses, in relation to the public?

Up to the present time the knowledge the public and the medical profession generally have had with regard to the class of persons called mental nurses has been to a great extent obtained from those engaged in private nursing, either on their own account or attached to various nursing institutions, and as many of them were inadequately trained, or not specially trained at all, or their only knowledge of

mental nursing had probably been obtained by a few weeks' residence in the wards of an asylum from which they had been dismissed for incompetence or some other cause, we can readily understand the public estimate of the mental nurse has not been a high one.

Those who like myself have to deal with the care and treatment of mental cases in private practice know only too well the difficulty of obtaining trained and qualified nurses for our patients. We, therefore, look to this Association to continue to further and encourage in every way the training, education, and qualification of mental nurses so that this urgent and growing public want may be supplied. It is the only authority to which the public can appeal. There is no other. Mental nurses must be asylum trained.

The success of our scheme of systematised training and qualification having placed us in a position to improve the status of our nurses serving in asylums, we should still further increase our sphere of usefulness by assisting as far as possible to raise the position of those who leave the service of asylums to enter upon private nursing and take their place in the great nursing world beyond.

To this end the possession of our certificate "*for proficiency in nursing*" will be of the greatest service, as under the conditions I have mentioned it would enable them to join such a Society as the Royal British Nurses' Association should the proposal for their admission be carried, and I would earnestly beg this Association to favourably consider the admission of our asylum trained and certificated nurses as members of the Royal British Nurses' Association as a distinct class and in a separate department of its register to distinguish them from those who are hospital trained.

In supporting this proposal we shall be doing an act of justice to our nurses, and at the same time conferring a boon upon the public by affording them the means of ascertaining whether the nurses they employ are properly trained and qualified or not.

In this brief paper I have merely touched the fringe of what is a large and important subject, but the limit of time compels me to make it as condensed as possible.

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