

Candidates for the Royal Medico-Psychological Association's Examinations, 1925-27 :

		Males.	Females.	Total.
Total number entering from 43 Training Schools	{ Prelim.	1,588	. 1,797	. 3,385
	{ Final	1,870	. 1,769	. 3,639
Average annual number of candidates per Training School	{ Prelim.	12.3	. 13.9	. 26.1
	{ Final	14.5	. 13.7	. 28.2

In 42 hospitals the Royal Medico-Psychological Association's Certificate is necessary for Staff Nurse. One requires General Nursing Councils' Certificate, in 20 cases either certificate is accepted, 3 require no certificate, and one does not say.

6 can guarantee 25 candidates and 35 cannot.

25 can give the preliminary 6 months' bedside training prior to the Prelim., and 22 cannot.

As regards the one-portal question replies are :

{ Essential .	13
{ Desirable .	5
{ No .	24

42 agree to suggested alterations in the General Nursing Councils' Preliminary.

30 would be limited by the requisite attendance at a Centre and 15 do not anticipate difficulty.

THE ASSOCIATION AND THE STATE REGISTRATION OF MENTAL NURSES.

THE following observations may be useful in any negotiations with the General Nursing Councils which may follow the effort now being made to bring about the recognition of the Association's Mental Nursing Certificate for admission to the State Registers of Mental Nurses.

MATTERS NOT NEGOTIATORY.

(a) *Examination centres other than at the Mental Hospitals.*—The answers to the Questionnaire appear to settle this point conclusively.

Attendances at fixed centres needing absence from hospital for a whole day or days would restrict the number of candidates in no less than 65 hospitals. The Local Authorities would not tolerate such restrictions. In arguing this point it can be advanced that at most mental hospitals under Local Authorities there is but little change year by year in the nursing requirements. These

hospitals for the most part are full and staffed with the *minimum* necessary for the care and treatment of the patients and the "leave" of the nurses. Furthermore, for a few days' stress, public mental hospitals cannot, like general, fever and other hospitals, secure a number of temporary nurses.

So every training school recognized by the Association should be an examining centre, except those situated so near to each other that they can, for convenience of the Inspector of the General Nursing Councils, agree upon one hospital as a centre for the examinations.

(b) *Examiners.*—It is not likely that any scheme can be evolved which will prevent a candidate being examined by his hospital's Superintendent or Senior Medical Officer or Matron. *This is not even guaranteed by the General Nursing Councils.*

Adjustment of the system of examiners is possible and will be dealt with later.

(c) *Training.*—The Association could not commit every recognized school to all the requirements of the General Nursing Councils in regard to training in sick nursing. To do this would lead to not a few hospitals being removed from the Association's list of training schools. There should instead be a plain acceptance by the General Nursing Councils of the fact that the Association's certificate is primarily one in mental nursing.

We can, however, meet the General Nursing Councils to some extent.

Training also involves the syllabus.

(d) *Syllabus.*—The part of the syllabus likely to be called in question is that for the preliminary examination.

In the General Nursing Council's Examinations, "General Duties of Nurses in a Mental Hospital" and "First Aid" of necessity have been wrenched from their proper position as subjects for the preliminary examination and postponed to the final examination. The reason is obviously the adoption by the General Nursing Councils of the one-portal system of entry.

The Association has no adequate grounds for revising its opinion in this matter, and the replies to the Questionnaire show that the Association has in fact not changed it.

Whatever value the General Nursing Councils may put on these subjects as matters for early general training, there is no doubt that they are the first upon which the mental nurse needs instruction. In the London County mental hospitals they constitute a large part of the syllabus of instruction for probationers during their preliminary six months' service.

In the Association's syllabus, the "Theory and Practice of Nursing" is identical with that in the syllabus of the General

Nursing Councils, except that in the Association's syllabus it is dealt with as a whole subject, and not split up between the examinations.

The General Nursing Councils' "Class Instruction" should not be unattainable in any recognized training school, however small, but "Ward Instruction" is undoubtedly heavy for most mental hospitals, and many of the recognized training schools could not be committed to carry it out.

(e) *Examination subjects.*—The last point is the suggestion that the examinations should be arranged and marked more definitely in subjects than at present. It will be noted that the General Nursing Councils' division of their examinations into subjects is not entirely logical. One "subject" in the preliminary examination consists of (a) the paper on anatomy and physiology and the oral and practical in anatomy, physiology and hygiene; and (b) another paper on hygiene and nursing and the oral and practical in nursing.

There are obvious reasons for mental nursing examinations being conducted orally, practically and in writing on the *whole field* of the syllabus, and the Association should not make any essential change in this matter.

These are the points it is suggested the Association should exclude from negotiations for the recognition of its mental nursing certificate as qualifying for State registration.

MATTERS NEGOTIATORY.

(a) *Centres for examinations.*—Wherever possible mental hospitals situated near each other might combine for examination purposes, and hold, in turn, a joint examination at one hospital to facilitate inspection by representatives of the General Nursing Councils.

(b) It is suggested that the countries be divided into convenient areas for the purpose of appointing chief examiners whose decision shall be final. The medical superintendent of the hospital would ordinarily become the coadjutor.

The areas at present being mapped out as areas for divisional clinical meetings of the Association may be appropriate.

The Association should appoint to each area an honorary examination secretary, to arrange the rota of chief examiners and nurse examiners for the hospitals in the area.

(c) A candidate should not be admitted to the final examination without a certificate from some responsible officer declaring that the candidate is proficient in certain fundamental "First Aid" and sick nursing duties which it is within the facilities of all recognized training schools to teach.

(d) To compensate in some degree for there being less sick nursing in the Association's preliminary examination the subject of "Hygiene" might be extended.

In support of this it may be advanced that knowledge of "Hygiene" is more useful in mental nursing than knowledge of the finer technicalities of sick nursing. (One recalls the fact that Florence Nightingale's *Notes on Nursing* is mainly "Hygiene.")

(e) The offer that, should the General Nursing Councils accept the Association's Certificate for registration, such admission to the mental nursing register will not entitle the nurse to forego a year's training for entry into the general register unless she first passes the General Nursing Council's oral and practical examination in sick nursing.

This advantage up to now has been largely illusory as few general hospitals will admit nurses to two years' training. In many mental hospitals it is just as convenient to give three years' leave for general training as two, and it is better for the nurse.

(f) The offer to accept any reasonable variation in the method and standard of marking that the General Nursing Councils might stipulate. In the event of it being higher than the Association may think necessary, the condition of acceptance of the certificate for registration in that case would be—

"That the candidate has attained — % of marks in the examinations for the Association's Certificate."

(g) All the Association's examinations would be open to inspection by representatives of the General Nursing Councils.

(h) The Association would declare its certificate null and void in all cases in which the holder's name had been removed from the State Register.

(i) The issue of more precise regulations on "Class Examinations," "Demonstrations," "Class Instructions" and "Ward Instruction."

J. R. LORD.

THE CHAIRMAN OF THE BOARD OF CONTROL (L. G. BROCK, ESQ., C.B.) AND THE NURSING OF MENTAL PATIENTS.

SPEAKING at the formal opening of the new Nurses' Home at St. Audry's Hospital, Melton (for report, *vide* p. 581), the new Chairman of the Board of Control (England and Wales) referred to the change that was undoubtedly taking place in the attitude of the public towards mental disease. He did not say that people