

HOSPITALS AND STAFFING

The problem of increased hospitalization and preventive medical services, with the consequent demand for larger staffs, is world wide. All the countries of western civilization are faced with a shortage of woman-power, due to the falling birth-rate between 1926 and 1935. This general shortage has led to many and various suggestions regarding the training of nurses in order to attract well-educated women and at the same time produce sufficient staff to afford proper care to the patients.

In the United States of America three types of training are developing :—

- (1) The University hospital, which accepts only matriculated candidates, or with two years' University college education, in which the theoretical course is given under the jurisdiction of the University, and includes some cultural and scientific subjects. Nurses graduating from these schools obtain a degree of B.Sc. in Nursing. There are approximately 130 of these schools included in the 2,000 nurse-training schools in the United States of America.
- (2) The present recognized three-year course, which varies considerably from hospital to hospital and from State to State.
- (3) A nine months' course, including three months' theory at a high school with six months' clinical experience in a hospital. This course entitles the nurse to be licensed as a practical nurse.

In Canada, developments are taking place on similar lines, with the exception that the University schools are schools apart from hospitals, and although the students obtain clinical experience in affiliated hospitals, they do not form part of the nursing service of the hospitals.

Senior Matriculation or similar University standard of education is required on entrance. The course is a four- to five-year one and students graduating obtain the degree of B.Sc. in Nursing.

Junior Matriculation is required of all entrants to Canadian schools of nursing. This, however, reduces the number of entrants, and consideration is therefore now being given to the training of the practical nurse. An experimental school has been set up in Ontario with the object of ascertaining whether the existing curriculum can be taught in two years instead of three, taking into consideration that the nurse trainees are relieved of the responsibility for the servicing of the hospital.

In Great Britain, the Ministries of Health and Labour have produced a report entitled "The Working Party Report" making revolutionary recommendations which, if implemented, would not only revise the present curriculum, making it wider in concept, but would also place the control of education of nurses under a nursing education authority and not under the hospital authority responsible for staffing.

New Zealand has the advantage of the conditions in our training-schools being more standardized than in most countries owing—

- (a) To the routine inspections over many years ;
- (b) To the guidance given by the Department in regard to standardization of nursing technique ; and
- (c) To the influence of the Post-graduate School, where our nursing executive officers have been trained.

The Nurses and Midwives Board has laid down not only a theoretical curriculum, but also a clinical experience guide, which is being followed fairly well. This ensures that our nurses do obtain experience in all the various services which are required overseas, with the exception of obstetrics and public health nursing. Here in New Zealand these, so far, are post-certificate courses.