

premises as soon as possible. Say that the fault is carelessness : is he likely to be more careful when he is putting in three months on notice ? Should one for three months have the anxiety of this man on the staff ? Of course, it may be urged that he can be given three months' pay in lieu of notice, but this would be an encouragement to men who were indifferent as to the service, and waiting an opportunity to get something outside, to commit some minor offences to be given notice, and a quarter of a year's pay for nothing.

At a conference with the Superintendents of the larger institutions at the beginning of this month these questions were considered, and there was but one opinion expressed, and that without qualification—namely, that in a service in which the necessity for discipline, as above defined, was paramount, local authority should be strengthened, and that the tenure of office of attendants and nurses should revert to the amending Act of 1887.

In concluding this subject I would emphasize the statement made in the preface, to the effect that the large majority of the staff are excellent public servants whose position and prospects would not be influenced by any system under which they worked ; but that those entrusted with the anxiety of administration, which the care of the irresponsible entails, feel that in justice to the patients they should have power to deal personally and promptly—that is, effectively—with the few who show a tendency to be "slack," lest a worse thing betide.

That is the case for differential treatment ; and now, in another matter—namely, the position of the staff with respect to superannuation—I would reiterate the plea for at least equality of treatment. It has been pointed out that the income of nearly all members of the staff is made up of partly cash and partly allowances in the nature of salary. In the case of nurses and attendants, these allowances could not be obtained for anything approaching £30 per annum, but in fixing the amount at that figure no grounds were left for the possible assertion that value for the money was not being given. Taking out the value of food, the proportion for water, light, fuel, &c., and for the laundry, the total is £30, not counting furnished apartments for the unmarried, or £20 house allowance for married men, uniforms, and ordinary medical attendance in the institution in case of sickness. It is quite evident therefore that £30 should be added to the salary of nurses and attendants for purposes of superannuation, and then deducted. And so through the other ranks, the allowances in each case being in the nature of salary. If, for argument's sake, we suppose the allowances discontinued and the staff having to provide for themselves, £50 at least would need to be added to the amounts now paid to the nurses and attendants. These facts are beyond dispute, and I therefore fail to appreciate the grounds upon which the staff is not permitted to count the value of allowances when their salary is estimated for purposes of superannuation.

Should this be conceded, as a matter of justice, it would be well to consider at the same time, as a concession on account of the nature of the work, the possibility of an earlier retiring-age, a subject touched upon in the last report.

The following nurses and attendants passed the Senior Examination, and their names have been added to the Register of Mental Nurses : Annie Blackie, Louisa Jervis Creswell, David Dickey, William Harrison Ellwood, Hannah Feeney, Jean Grant, Helena Ada Hamel, John Howie, Michael Hyland, James Patrick Kavanagh, Ida Kenward, May Lewis, Mary McTavish, Mary Josephine Martin, Arthur John Oatley, John Joseph Patterson, Jeanie Stevenson, Margaret Wilkie.

At the end of the probationary period the candidates are given a Junior Examination, the passing of which admits them to the rank of junior nurse or attendant. This examination is on elementary anatomy and physiology, and upon their duties, with special relation to first aid. After three years' service they are admitted to the Senior Examination, on passing of which they are ranked as senior nurses and attendants. This examination is mainly practical in its bearing, and consists of written answers to a paper and two orals, one on their work generally, as well as some questions on anatomy and physiology, and one upon nursing. The standard of the test may be judged by the paper answered by the successful candidates named above.

MENTAL NURSES EXAMINATION.

A. (Of the three divisions of A, the candidate must not attempt to answer more than two.)

- (1.) If charge of a ward, what course of conduct would you adopt with regard to a patient who in your opinion might need to be placed "in seclusion" ? Supposing that the patient is secluded, what would you be required to carefully note and report upon ?
- (2.) If the duty were yours, in what order would you place the patients preparatory to marching them to the dining-hall, and what principles would guide you in classifying them at the table according to seats they should occupy ? The patients being properly placed and dinner served, upon what matters must you exercise supervision during the course of the meal ?
- (3.) What course are you advised to adopt in dealing with—(a) Violent patients, (b) patients labouring under delusions ?

B. If placed under circumstances in which you had to rely absolutely upon yourself to administer "first aid," what would you do for a patient who had suddenly become unconscious ? (In answering this question, enumerate the various conditions to which such loss of consciousness may be due, state how you would tell one from another, and then proceed to the appropriate first-aid treatment in each case.)

C. Selecting a patient you have or have had under your care, whose case you consider interesting, and heading your answer with his (or her) name, write a detailed description of the facts you have gleaned from observation, conversation, and inquiry regarding the patient's bodily and mental state, so that one who has not seen the patient may be able to form a fairly accurate estimate of his (or her) condition.

D. (Of the five divisions of D, the candidate must not attempt to answer more than four.)

- (1.) When bathing a patient you have to observe if a hernia is present : state what you would look for, and where. Supposing a patient has a hernia which is being treated without operation, state briefly what would be your duties in the management of this patient. What special danger is to be apprehended in such cases, and what symptoms give you warning of this ?
- (2.) What is a bed-sore ? What classes of patients are liable to bed-sores ? What precautions would you take to prevent bed-sores ?