In view of the fact that comparatively few who train in maternity nursing will wish to take the second course, it is thought that the interim period during which the nurse can practise and will be entitled to full fees will provide valuable experience for her in the homes of private patients, and will give her an opportunity for deciding whether she is prepared to fit herself by a further course of training for taking full responsibility.

It is impossible at this early stage—for many of the pupils now in training are governed by the old Act—to estimate what effect the change will have on the number of applicants for training in maternity work. When the scheme is fully understood it will be recognized that the registered maternity nurse of the future will be as well equipped for maternity work as the registered midwife of the past has been, and that the registered midwife of the future will be thoroughly expert in the management of midwifery cases.

*Nurses Registration Act.*—At the two examinations held under the Nurses Registration Act in June and in December there were 287 candidates. Of these 248 were successful and are now registered. From overseas forty-four nurses were admitted to the register.

Since my last report the hopes that were entertained for a post-graduate course for registered nurses in connection with the diploma in nursing at the Otago University have been defeated, the University Council repudiating all responsibility for the salaries of the two nurses who had been sent by the Department to Bedford College, London, and Toronto University for special training. However, the appointment of Miss Moore to the Department for the purpose of visiting the nurse-training schools of the Dominion, and there giving the benefit of her experience to those responsible for the teaching of the pupil-nurses, has the effect of distributing knowledge of the more up-to-date methods of teaching more widely—though, naturally, not so intensively—as would have been the case had her sphere of action been limited to the University lecture-room. Hospital Boards appreciate this fact, and are very willing and anxious to avail themselves of Miss Moore's services in this direction.

In the last annual report the need for the establishment of preliminary training-schools in connection with the larger hospitals was stressed. It is gratifying to note that a decided interest is now being shown in this modern method of testing candidates before allowing them to enter the wards. Before many months have passed it is hoped that such a school will be established in each of the four chief centres. In two where it has been instituted, though in a modified form, for several years, there has been a marked improvement in the results obtained at the State examinations.

The assistance of one who is thoroughly versed in the conduct of these schools as carried out in other countries will be most valuable. Sister tutors will necessarily be appointed to take charge of these schools, and also, in the case of larger institutions, to teach the more advanced pupils already on the staff.

The second nurse, Miss M. I. Lambie, who was sent to Toronto University to train in public-health nursing, will also be attached to the Department for work in connection with the prevention of disease.

*Hospitals under Departmental Control.*—King George V Hospital, Rotorua: There have been few changes here beyond the reopening of a ward to cope with the influx of children who had been victims of the epidemic of infantile paralysis. This led to a corresponding increase in staff, especially in the massage department. Unfortunately, there was a demand for masseuses at the same time in other parts of the country, and for some months it was difficult to find a sufficient number to carry on the special work in connection with these cases. With the lapse of time the pressure has eased somewhat, and at present there is no shortage. Miss Searell, A.R.R.C., is still Matron here.

Pukeora Sanatorium, Waipukurau: The staff here has lately had to be increased, mostly in the direction of the appointment of additional hospital aids in consequence of the admission of female patients to the institution. There have been remarkably few changes among the nursing staff when one considers the nature of the work and the isolation inseparable from these institutions.

Otaki Hospital and Sanatorium: The addition of a number of new shelters will provide accommodation for twenty more patients. In the meantime the staff is working cheerfully in the awkward conditions due to rebuilding and renovating, and live in hopes of reaping the benefit of an improved state of affairs for their patients in the near future.

Queen Mary Hospital, Hanmer Springs: There is nothing fresh to report here. It has on occasion been difficult to replace staff, probably on account of the severity of the climate and the isolation during the greater part of the year.

*District Health Nurses.*—There are nineteen nurses working among Maoris, mostly in the Auckland Province. Many of these have been engaged in this work for many years, and have done very valuable work under most trying conditions. Two of this number are Maoris, each in charge of her own district. There are also two Maori nurses acting as assistants until they have gained sufficient experience to manage on their own responsibility. Still another Maori nurse is on the staff of a departmental hospital awaiting a vacancy in a district.

*Superannuation for Nurses.*—Though the National Provident Fund Amendment Act, 1925, providing for the superannuation of nurses, was passed last session, it only takes effect as from the 1st April, 1926. There is much appreciation among nurses that this provision has been made for them. Naturally the scheme will benefit the nurses of the present and of the future, and there will be many who have spent years of their lives in devoted work under much more difficult conditions than can exist now, and with very much smaller salaries, for whom there is no such provision. It is recognized that this is inevitable, but one would be glad to know that these women could have some recognition of their services and would be freed from financial difficulties during their declining years. The Nurses Memorial Fund is able to give some assistance, but with the withdrawal of the Government subsidy the amount at its disposal is necessarily limited. In some instances Hospital Boards have recognized their obligations and have granted pensions to Matrons of long service.