The new training is being devised in such a way that the training in domestic science shall be given under such conditions that it can be followed by training in the same elementary nursing duties which the pupil nurse normally carries out in her first year of training. Having completed this preliminary training as a "nursing aid" and registered as such, if she wishes she may continue with her training as a registered nurse, doing a period of two years and three months (instead of three years and three months) further training, but if she does not wish to continue she may practise as a "nursing aid."

This scheme has been devised with two distinct objects—(1) for providing a means by which girls who must earn earlier may receive a training based on their ultimate goal; and (2) for providing a training for those women who do not wish, and find it difficult to qualify, for full registration as a nurse, yet who fill a very necessary want in the community.

All of these schemes are planned to give the pupil nurse of the future a better background and to make her entrance to hospital life easier. Probably the second and third schemes are those on which New Zealand will concentrate.

Next comes the important problem of making the maximum use of the valuable clinical experience available in every training-school so that every nurse will leave her school well prepared for the demands the social life of the country will make upon her.

In New Zealand, with its extensive social and health legislation, it is most important that nurses should be health-minded, and all procedures should be taught with this positive approach to health rather than with the more limited aspect of the cure of disease. How then can this be done?

First, there should be a definite plan to allocate the clinical experience according to the stage of training so that a proper sequence is ensured, keeping in mind the balancing of the preventive and curative experience.

Secondly, there should be sufficient staff to ensure that nurses can be allocated a group of patients for their complete care so that the pupil has the satisfaction of the entire care of the patients assigned to her, and not just to one duty relating to that patient.

Thirdly, there should be adequate supervision by the registered staff, who should realize what supervision means—to assist in the development of the individual—not to inspect the individual's work.

Too much emphasis cannot be placed on these three factors in the training of nurses. Theoretical instruction, though important, is far subordinate to these requirements. The very fact that nurses must pass State examinations will force controlling authorities to pay attention to theoretical instruction when attention to the far more important clinical instruction will fail.

Various methods for giving theoretical instruction have been and are being tried. These may be grouped into two principal ways:—

(*a*) Where the instruction is given concurrently with the practical experience spread out over the whole period of training. This may sound ideal, but has the disadvantages of being difficult to arrange so that the type of theoretical experience is really correlated with the practical experience—*i.e.*, infectious-disease nursing while doing duty in the infectious-disease ward, &c.—of nurses having to leave their wards to attend lectures without being replaced; or of attending lectures when off duty.

(*b*) Where the instruction is arranged in study periods of four to six weeks when the nurses are relieved entirely from ward duty. This system has the advantages that the theory in relation to the ensuing clinical experience can be given so that nurses should know what to observe, wards are not depleted of staffs, and nurses are attending lectures while they are fresh *within* their prescribed duty-hours.

If these periods of intensive study are followed up by careful clinical case studies during their period of clinical experience, many of the objects desired can be attained.

Another aspect of the training of a nurse which might be given attention is the present system of hospital discipline in the Nurses' Home as well as the hospital. Because the conditions of life were such as demanded protection for women when the original training-school was inaugurated in the last century, if educated women were to be encouraged to enter this new occupation a more or less military discipline was inaugurated, and though in New Zealand this discipline is much less severe than it is in some parts of the Old World, still the traditions of the service are such that this system is still more or less in vogue and still carried on even by the younger members of the profession when qualified.

To-day our educational system has as its object the development of the individual in its broadest sense, and the world presents opportunities for women far beyond that of the last century, so that the form of discipline necessary is rather of another type—self-discipline and the learning to discriminate; responsibility and the acquirement of the necessary courage and determination.

There has been some question as to whether life in a Nurses' Home is necessary for even the girl in training. University colleges in this country deplore the fact that they are not residential colleges, and so are denied the opportunity of giving their students that wider culture and training in self-government which residential colleges permit. Surely, then, the nursing profession should recognize the value the life in the home should be, provided that the life within the home is what the universities are aiming for. The inauguration of a students' section of the New Zealand Registered Nurses' Association with their own councils in each training-school should assist in this development very materially.

From these remarks it will be seen that the nursing world has already much, particularly in this country. We have reasonable hours and rates of pay, and means are being taken to improve these further; we are to inaugurate schemes to bridge the gap between school and nurses' training-school; we have the valuable clinical material for teaching purposes; we have even inaugurated theoretical