

cate from the State is not sufficient to secure their recognition in other countries, and only those nurses from the hospitals of over forty beds are so recognised. In a longer term of years—say, four for under forty beds, five for under twenty beds—a nurse might obtain a knowledge and experience more equal to those trained in the large hospitals. Regarding the private hospitals the chief difficulty would be that these are mainly for surgical cases, and that many of them never admit a typhoid-fever case, which is the one above all others in which a nurse's skill and knowledge of symptoms are required. It will be necessary, therefore, if arrangements are made for the training of nurses in private hospitals, that they should obtain experience in the nursing of such cases before being eligible for registration as trained nurses, and it will be absolutely necessary that all nurses training in either private hospitals or in small public hospitals should be given a course of lectures and practical instruction as nearly as possible equivalent to that received in the larger hospitals.

Maori Nurses.

There are at present three Maori pupils training in the various hospitals as day-pupils with a view of being then drafted on to the staff of the other hospitals to complete their training. Among those who are going through the regular training two have passed the preliminary State examination, and are eligible for the final examination in June.

This Department is now co-operating with the Education Department in the scheme for the training of the Maori nurses, and is now taking the responsibility of finding vacancies in a certain number of hospitals which have agreed to accept Maori nurses, and during the last few months, since this arrangement has been come to, three pupils have been placed, one in Wanganui Hospital, one in Hamilton, and one in Mangonui. Wellington and Napier Hospitals have already one pupil each in training. The Auckland Hospital has a day-pupil at present, but finds a difficulty, owing to lack of nurses' accommodation, in taking a resident trainee. The Maori nurses placed in the small hospitals complain that the instruction given them is nil, and that their time is occupied entirely with domestic duties; therefore it will be endeavoured to find places for them in other hospitals where there is a reasonable prospect of giving them some useful training.

Mental Nurses.

It is proposed in future to give mental trained nurses who have undergone a course of lectures and passed the Medico-psychological Examination, instituted by the Inspector-General of Mental Hospitals, a course of training in general work to fit them for positions of charge in the mental hospitals. It will be of great value to the asylums to have nurses qualified in both mental and general nursing. The large and medium-sized hospitals were circularised and asked to assist in this project by taking nurses from the mental hospitals specially recommended by the Inspector-General, for a course of two years' medical and surgical work. That, added to three years in mental work, should give them a sufficient training to cope with cases of illness occurring in the asylum, and qualify them for positions of charge. Several of the hospitals have acceded to this request, and one mental trained nurse has commenced her course of two years' training.

It would be a better arrangement, if possible, to give the mental course as a post-graduate one, and it is hoped to induce general trained nurses to enter the mental hospitals for a year's experience in the care of the insane.

MIDWIVES REGISTRATION ACT.

Maternity Hospitals and Homes.

During the past year two examinations of nurses trained under "The Midwives Act, 1904," in the State maternity hospitals—the Medical School Maternity Hospital, Dunedin; the Alexandra Home, Wellington; and the Linwood Refuge, Christchurch (the two latter in conjunction with the course of lectures at the St. Helens Hospitals)—have been held, and twenty-nine candidates entered for examination, twenty-five of whom passed, and are now on the register as trained midwives.

There was also an examination of a very elementary character for those women practising as midwives, but without training, who had hitherto neglected to register. Sixty-four entered, and fifty-six passed, and are now on the register, in the list of untrained women. This should have been the last examination of the kind, ample opportunity now having been given for registration of all women who had been practising the required length of time; but a petition on behalf of one woman who had failed to satisfy the examiner was brought before Parliament, and it was arranged that those who had failed at the June examination should be given another chance. This was done, with the result that the candidates were passed, and are now registered.

The receipts from fees from the St. Helens pupils for training and examination amounted to £564 15s. 6d.; fees from outside pupils, £9 7s.: total, £574 2s. 6d. Expenses of the examination, £22 11s. 6d.

The receipts of fees from the untrained midwives for examination and registration amounted to £58 18s. Expenses of examination, £35 17s. 6d.

A Board of Examiners under "The Midwives Act, 1904," was appointed for three years: Drs. Ewart, Rawson, and Elizabeth Gunn, Wellington; Drs. Church and Fitchett, Dunedin; Drs. Gibson and Westenra, Christchurch; Drs. Bull, Robertson, and Lindsay, Auckland.

On the 31st March, 1908, there were on the Midwives Register 1,004 midwives. Of these 149 are trained and certificated, forty-three from the State maternity training-schools and institutions recognised as maternity schools in conjunction with lectures at the St. Helens Hospitals. During the last two years fifty-six trained and certificated midwives from England and the Australian States have also been registered in New Zealand.