

The following is a table giving the number of candidates who sat for the State examinations during the current year and particulars of the result :—

	Number sitting.	Number failed.	Percentage of Failures.	
			1932.	1933.
State Examination for—				
Nurses	448	110	28·56	24·46
Midwives	60	7	15·00	11·66
Maternity nurses	198	15	7·43	7·57

HOSPITAL INSPECTIONS.

Following on a conference of departmental officers who are concerned with hospital inspections, an attempt has been made to have inspections carried out in more detail so that when the reports made by various officers have been combined there will be available a complete record concerning the various sections of hospital administration in each hospital visited.

Medical Officers of Health have been asked to notify Head Office where any member of the nursing or domestic staff of a hospital have been notified as suffering from tuberculosis, or any infectious disease, so that a careful investigation may be made to determine whether any weakness in nursing technique exists.

During the year special investigations into various aspects of nursing technique were made by issuing questionnaires to all training schools. As a result, a very definite weakness in the use of disinfectants was made evident. This was further checked during visits of inspection. To assist the teaching of pupil-nurses in this subject, and to lay down a standard which could be used as a basis of comparison, a table of disinfectants and their strengths for different purposes was drawn up by Medical Officers of the Department. This has been circulated to the matrons of all hospitals, and has been published in the *New Zealand Nursing Journal*. The Nursing Division of the Department was assisted by a committee of the New Zealand Registered Nurses' Association in carrying out this investigation.

OBSTETRICAL NURSING.

For many years there was constant complaint regarding the hours of duty in obstetrical hospitals which were training schools. Gradually the hours have been made uniform throughout the Dominion to suit obstetrical nursing conditions. In addition, all of these hospitals provide for regular days off per month, so that the conditions generally are satisfactory.

With very few exceptions, practically all the maternity nurse training schools are maternity annexes under the matron of the general hospital. It is obvious that the sisters-in-charge of these annexes carry more responsibility than the sister of a general ward, and that, owing to the nature of their work, their hours of duty are more fluctuating. If, then, women of the right type are to be attracted to this special branch of nursing, the matrons must be prepared to give these sisters at least the status of a sub-matron with a certain amount of freedom to arrange the duties of their staff according to their work.

The present syllabus for the instruction of midwives has now become stabilized, and it has been found possible to include not only post graduate teaching in ante-natal care, but also in infant care. In view of the increased attention being paid to this subject in nurse and maternity nurse training schools, the midwife of the future should have a good foundation on which to base her practice.

TROPICAL SERVICES.

I have appreciated very much the opportunity given to me of spending six weeks actually in the Apia Hospital, Western Samoa, as it has given me a better appreciation of tropical conditions.

As a result of my visit it has been decided in future to staff the hospital with a matron and sisters who are definitely on exchange from the service of the Department or one of the Hospital Boards, and to arrange for a senior nursing officer from the Department to relieve the matron for her furlough so as to keep in closer touch with this service.

The training of the Samoan nurses was revised with the idea of preparing them to undertake public health nursing duties in the islands under supervision of the Central Hospital.

THE NURSING STAFF.

Owing to the transfer of Otaki and Pukeora Sanatoria, Wanganui and Gisborne St. Helens Hospitals, and King George V Hospital, Rotorua, to the control of Hospital Boards in whose locality these institutions were situated, the Department has lost the services of a large number of nursing officers who have given the Department faithful service in the past. In nearly all instances the staff were taken over by the Boards concerned, so very few have suffered financially.

Other changes which have taken place are the transfer of Miss Arnold from Invercargill to Wellington St. Helens Hospital as matron, and the appointment of Miss Sparkes, late sub-matron of St. Helens Hospital, Wellington, as matron of Invercargill St. Helens Hospital.