

The following tables show the position over the last five years in regard to the total average occupied bed rate for training-school purposes; the total nursing staff over the same period; the total number of nurses sitting for the State Examinations, and the number who have passed:—

A. Daily Average Occupied Beds for all Training-schools.

31st December, 1931.	31st December, 1932.	31st December, 1933.	31st March, 1935.	31st March, 1936.
3,981·71	3,981·72	4,059·3	4,220·05	4,467·41

B. Total Nursing Staff for all Training-schools.

	1931.	1932.	1933.	1934.	1935.
Total nursing staff	1,740	1,769	1,967	2,116	2,264
Total pupil nurses on staff ..	1,223	1,257	1,412	1,502	1,640
Total registered nurses on staff ..	517	512	555	614	624

C. Total Number of Nurses Sitting and Passing State Examinations.

	1931.	1932.	1933.	1934.	1935.
Number sitting	412	385	448	403	354
Number passed	328	272	338	280	262

A comparison of these three tables shows that while the total number of average occupied hospital beds for training-school purposes and the total number of nurses employed has increased, the number of nurses sitting for the State Examinations has decreased. This is because during the year 1931–32 at the time when there was much unemployment amongst nurses Hospital Boards retained registered nurses and decreased the intake of pupil nurses in many instances. The present shortage is exaggerated by the fact that approximately one hundred nurses have gone to England during the past year.

A further point to be considered is that of the total average occupied beds for training-school purposes 1,155·3 beds are in hospitals which still only give two days off a month. If the nursing staff in these hospitals is to be increased to allow one nurse to two occupied beds—which is necessary to allow a day off a week—another one hundred nurses in training will be required.

The graph opposite shows the position in regard to nursing staffs employed in training-schools as at 31st March, 1936.

OBSTETRICAL TRAINING-SCHOOLS.

The work of the obstetrical hospitals on the whole has been satisfactory. Owing to the increased use of maternity annexes, several staffs have been increased with the result that there is an increase in the number of registered nurses qualifying as maternity nurses and midwives. The number of women who are not qualified nurses who are taking obstetrical training remains much the same.

The examiner for the obstetrical examinations in December remarked that the standard of work both professional and educational was considerably higher than on the last occasion on which he had examined.

During the year an obstetrical refresher week was held both in Wellington and Christchurch with great success, and it is intended during 1936 to establish more refresher weeks of this nature. In the meantime both at the St. Helens Hospitals and at the Jessie Hope Gibbons Maternity Hospital in Wanganui, many practising maternity nurses and midwives have availed themselves of the opportunity of a clinical refresher course.

The number of experienced nurses willing to specialize in obstetrics is limited, and several times during this year Hospital Boards have had difficulty in obtaining the right type of women for charge positions. In many instances the salaries, both for charge positions and for junior Sisters, are small in comparison with ward Sisters' positions in general hospitals in spite of the fact that these nurses must hold additional qualifications. There is no doubt that the time has arrived when larger salaries must be paid for this type of nursing if the standard is to be maintained.

Examination Results :—

MATERNITY NURSES.

Registered Nurses.

	1932.	1933.	1934.	1935.
Number sitting	152	158	170	190
Number passed	143	148	108	180

Unregistered Women.

	1932.	1933.	1934.	1935.
Number sitting	35	43	33	34
Number passed	30	35	30	33

MIDWIVES.

Registered Maternity Nurses who are also Registered Nurses.

	1932.	1933.	1934.	1935.
Number sitting	45	48	53	57
Number passed	39	44	47	53