

The Staff of the Nursing School.

The Officer Commanding is in charge of the Training School and under him a Medical Officer known as the T.T.O. (Technical Training Officer), a Technical Training Matron and ten to twelve T.T.I.s or Technical Training Instructors who are Male Nurses qualified in Civil Hospitals.

Training.

A building is provided with all Hospital equipment as a model Ward, and contains wet and dry specimens, skeleton, instruments, wall maps etc. The learned Male Nurses give the six weeks Nursing training at the end of which the Students are put into the following categories

- A. Selected for training in special departments.
- B. Suitable for General Nursing.
- C. Requiring further Training.
- D. Unlikely to make a good Nursing improver.

The Passed candidates are then sent to different Hospitals for further training. In this Hospital they have to work in different Wards and take different duties, and those suitable are trained in higher grades. A Ward is provided in the Hospital with Models, Skeleton, Instruments etc. and the Student has to work in the ward and to attend the Classes.

At the end of 5 months the 1st Grade Nursing Examination is held.

At the end of nine months the 2nd Grade Nursing Examination.

At the end of 15 months the 3rd Grade Nursing Examination.

At the end of 24 months the Diploma Examination takes place.

What then will be the fate of these successful candidates?

The Examiner for basic Nursing Training is The Matron, The Technical Officer and the Technical Training Instructor. For the higher grades in the Hospital, the Matron Examiners are coming from Headquarters. If a Medical officer wants to become a Technical Training Officer, he has to undergo a six weeks training i. e. 3 weeks in Administrative subjects and 3 weeks in the Hospital Nursing Lectures.

We enjoy especially when the Male Nurse Instructors teach these Student Medical Officers.

At present in this Hospital there are :-

Medical Officers (8th Batch)	8.
Warrant Officers	30.
Nursing specialist improvers.	150.
Nursing Sepoys.	100.

In the above scheme I would like to suggest that the Male Nurses should work not as regular Nurses but as good Tutors, giving a good Nursing Training to the raw hands to become at least a semi-Nurse, and if it might be recommended to the Government or to some Post Graduate College to give a short refresher course in teaching to the professionally trained Male Nurse it would be of great benefit.

Jemader L.N. Thomas, R.N., T.T.I.
(contributed in May 1945.)

Mainly for Health Visitors

A Pre-Natal Clinic Day

"The good health of the Children is a symbol of the sound health of the Mother"

Pending the introduction of 'Mother Craft' in our Nursing Schools, it is important to concentrate upon the Teaching of Mother Craft in our PreNatal Clinics. The young expectant Mother is an exceptionally receptive subject for this, and welcomes it when it is given. What is to be avoided in our present Clinics is the 'Hospital atmosphere' and

the handling of expectant Mothers as if they were a pack of cards. Let us see what we generally see in the morning of a Clinic day. A row of expectant Mothers sitting on benches waiting to see the Doctor. The Nurse in Charge after settling the Clinic, may be making swabs or cotton balls until the arrival of the Doctor. Some Mothers may be telling of the complicated deliveries they have seen, or about the gripping pain over the legs whilst working in

the kitchen, or about the abnormals they have seen, thus threatening the younger women with horror. The latter may be primiparas. On some days there is an epidemic of pain in the legs, on another frequency of micturition, or abdominal cramp. Generally their attention is focussed on some kind of physical symptom, rather than on the proud expectancy of childbirth. The visit to the Clinic is the duty of every expectant Mother, and to be examined on a couch in case anything is wrong, but a clinic run on the above lines cannot be right. Pregnancy is not a "nine months" standing disease. It is a physiological condition and should not be associated with illness. The expectant Mother is not a Case or a Patient.

From the time the mother enters the clinic, she should get the instructions combined with entertainment; the programme of training for her new role of motherhood. It should be made as interesting as possible. Of course the doctor should examine her and if once the position is normal and the date of confinement is achieved, it is advisable to leave it in charge of a health visitor or a district nurse.

If our nation is to play a leading part in the world of the future, it is necessary to produce healthy post war generations. This is not likely to come about if Child birth is regarded in the same light as a surgical operation. Why not bring it back to a normal event?

Physical exercise with proper feeding:

The expectant mothers will ever be ready to hear any advice given by the nurse or by the medical officer. She must tell it in their own languages in order to make them understand in an easy and interesting way. She should give hints on cookery. This includes the boiling of milk, the value of calcium, the intake of fluids and thus the necessity of proper output daily.

Believe in Yourself

The business man who believes he can overcome difficulties finds he can do so. The power of the human mind when it is fully brought into use is tremendous. Ordinary difficulties are small things when attacked with courage and tenacity and faith in one's self. Don't therefore lie down under trouble. Many men known to all of us have gone through and

The necessity of exercise:—so many young women end in instrumental deliveries due to mere lack of exercise. A demonstration of physical exercise if convenient, is very beneficial to them rather than telling it out by mouth.

Cleanliness is very important: We can point out so many cases of sore nipples.

The third thing is the advice combined with demonstration about babies feeding, the driving of wind after each feeding, calculation of babies feeding, regular weighing of babies and the proportionate addition of feeding, babies bath, cause of sore buttocks, thrush, constipation and the relieving of it by giving of water in between each feeding. We can also teach them how to stitch babies garments.

Of course all mothers cannot see the doctor at the same time, so they have to wait at least till 1 or 2 p.m. one by one. So if we start a clinic on the above line, how interested the mothers would be to spend their time rather than gossiping.

We must impress on them a happy future when they become the mothers of lovely healthy babies. It is to be hoped that all Clinics will run in a way which emphasises the ideal of health and not the idea of disease with special consideration to Hygiene.

Thus we can utilize our prenatal clinics in order to reduce maternal mortality. Let the future generation be benefited by our efforts.

The above reforms can be carried out very easily in mission hospitals if the staffs and Matrons take some pains and interest in it. If the mothers are healthy, then the children are bound to be healthy and if the children are healthy, then nation is bound to be healthy, wealthy and happy for "the children of today are the citizens of tomorrow".

Nurse Martha,
General Hospital, Munnar.

surmounted difficulties far greater than those with which we are today confronted. Some men have become bankrupt only to rise again and make second fortunes. So no position is hopeless. Just believe in yourself and attack your problems with courage and all will in time come right.—
Amicus.