A PLAY PROGRAMME FOR NURSES

Paper read at the MiraJ Conference by MISS GOHEEN,
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Perhaps some of you may wonder what connection play has with nursing, for usually we associate work with our profession. I am going to attempt to show, however, that there is definite value and importance in play for nurses. It has been said that “all work and no play makes Jack a dull boy”, and that is a criticism which too often can be levelled at nurses.

What does “play” mean? I have looked up the definition of this word both in the dictionary and in books on psychology, and I think that before we start to discuss it we should know what we are talking about. Here are some definitions from psychology: (a) play is doing what one wants to do; (b) play at its best is activity which gives the most development, that is, teaches us when and how to live at one’s best. In the dictionary I found many different meanings of the word: (a) to engage in sport or lively recreation; to amuse or divert one’s self; (b) to perform on a musical instrument, as to play the piano; (c) to take part in a game—to play tennis; (d) to do or execute, especially for amusement, profit, or education; (e) to act or perform, as to play the part of Shylock in The Merchant of Venice. Hence we see how many different meanings there are to this word and how wide a scope of activity play covers. With this background of understanding what the word means and what its value is, let us see how we can apply it to our nursing programme.

First of all I should like to talk about how nurses can and should “play” on duty. By this I do not mean neglecting one’s work, but what I do mean, using the broader aspects of the term, is to take a keen interest in our work. Especially on the doctors’ rounds can we take an interest in our patients. The discussions carried on at the bedside of the patient between the doctor and his assistants or medical students can be of great value to us. I am sure the doctors would appreciate intelligent questions from us nurses as well as from the other doctors. Or we can make mental notes of some points discussed by the doctors and refer to them later by looking them up in our textbooks. This practice of continually referring to our textbooks on questions of anatomy or symptoms of diseases and nursing care will help to keep us, graduate nurses especially, from getting rusty. I have never seen any professional people who are as intensely interested in their subject as are doctors. They can spend hours in fascinated discussion on some medical subject. Nurses too can and should have this same driving enthusiasm which makes their hours on duty seem very well worth while and rewarding.

Besides enjoying the doctors’ rounds we can take interest in the patients’ charts. To do good charting we need to observe our patients carefully and record our observations accurately. It is a
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pleasure to see nurses' notes which are intelligent, and doctors like to turn to them when they know they can get some help from them.

Another opportunity for nurses to “play” when on duty, is by helping to divert our patients' attention from themselves and their aches and pains to other things. Children especially need entertainment and it is a good nurse who can keep her children’s ward happy by teaching them songs and games and telling them stories. Adults also respond well to an effort on our part to cheer them up by a story or a game or anything which we can give them to do with their hands. This latter is called “occupational therapy” but really it is “playing.” Patients can help fold gauze or cut paper bags or make Christmas decorations, and they will enjoy these efforts because they take their minds off their own trouble and at the same time they can help a busy nurse who has other more important things to do.

In many schools of nursing in America there is scheduled on the students nurses' programme, especially for the new preliminary students, a definite time for exercise or physical education. This is supervised by a physical education instructor who directs the exercise of the students so that they can learn how to play tennis or swim. By teaching them good habits of outdoor exercise in the very beginning of their training, the instructors hope that the nurses will continue to exercise in their off-duty hours so as to keep healthy and strong during the rest of their training and when they are working as graduate nurses.

And now let us talk about a play programme for nurses when they are off duty. One meaning of the word “play” is relaxation or recreation, and nurses need that after their long hours on duty. However, there are various means of relaxing. Too often we nurses want to fall down on our beds and sleep away our time, whereas perhaps doing something else might be just as refreshing. I want to talk about hobbies. Most of us have hobbies or interests along a certain line, but not many of us find out as much about those lines of interest as we might, so that we can really find enjoyment and relaxation. Are your interests in music or singing? Then read about it in books, and practise on a musical instrument, or sing either by yourself or with a group of singers. Singing in a chorus can be very refreshing. I know of a nurses’ chorus from a hospital in a big city in America which has become quite well known for its good singing. The nurses who liked to sing organized a singing club in the evenings and with a good director they became good singers. Or do you enjoy painting or sketching or doing embroidery work or some other form of art work? Just because you are sleepy when you come off duty, is no reason to neglect it entirely. Many people like to read, but do they read good books which enlarge their view point? To read all that one can find on a certain subject is most fascinating—for instance, on a certain period of Indian history, such as the reign of Shivaji and the Maratha kingdom. Do you like to write poetry or prose? This can be an excellent means of relieving whatever tensions one may have and at the
same time be a good literary effort. In some hospitals the nurses publish a little monthly paper in which literary contributions and local news are printed. Then too, many people like to act in plays or other performances, and here in India especially there seems to be a great deal of natural talent along this line. Have programmes of entertainment, then, and release your latent energies. Another way of having a great deal of fun when one is off duty is to earn money for some common cause by selling what one has made. Some kind of food, such as sandwiches, when offered at a tempting time such as 9:30 p.m., when one has been studying hard, is sure to succeed. One group of nurses I know in their off-duty moments made and sold Christmas cards.

There are many ways in which one can express one’s self and so gain refreshment for one’s work. Both work and play are necessary for us to have integrated personalities and become nurses who can adjust to any situation easily and bring happiness to others. It was Jesus Christ who said, “I am come that ye might have life and have it more abundantly.”

REGISTRATION IN INDIA

Paper read at the Miraj Conference by MISS PAULL,
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The Bombay Nurses, Midwives and Health Visitors Registration Act was established in 1935, with a Registrar appointed by the Council under the bye-laws.

The Council is composed of the following 21 members.


Nominated by the Government of Bombay. One registered nurse.

Elected by the affiliated institutions.

One registered midwife.

One registered Health Visitor.

Five members from Bombay.

One member from the Northern Division.

Central

Southern

Elected by the Bombay Medical Council. Two medical practitioners, one of them a woman doctor.

The Register consists of the following parts.

1. A general part containing names of all female nurses who satisfy the conditions of admission to that part of the Register.

2. A supplementary part containing names of male nurses.