NURSES IN HOSPITALS FOR THE INSANE.

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No apology is necessary for bringing to the attention of the Association the subject of the nursing care of the insane.

It is one which has already very properly received much consideration and occupied much of your time. Theoretically, we all agree that, both in the selection and in the proper training of nurses for the insane, no pains should be spared. My wish now is to apply the theory to which we all subscribe, to outline the methods followed in the hospital with which I am connected, in the hope, first, that something may be thereby disclosed that will aid in advancing the cause of hospital nursing of the insane, and secondly, that the discussion may bring out suggestions that will enable me to still further improve the service.

The conditions existing in the Government Hospital for the Insane are, in some respects, peculiar and for this reason I am aware that all of the suggestions may not be equally applicable to other hospitals for the insane. The hospital is a large one; our patients now numbering about 2250 and increasing at the rate of more than 100 annually. As regards sex, there are at present in the hospital 1725 males and 525 females, and of the former a large proportion come from the army and navy and from the National Homes for Disabled Volunteer Soldiers and Sailors. The majority of these are advanced in years and feeble in body and mind. Almost 10 per cent of the entire population of the hospital are constantly in bed and another ten or fifteen per cent are barely able to be about the wards and out of doors when the weather is pleasant enough for them to sit about without discomfort.

Attendants are selected under regulations established, after consultation with the hospital authorities, by the U. S. Civil Service Commission. A blank application has been prepared

which the applicant must fill out in his or her own handwriting and to which affidavit must be made before a proper officer. It comprises complete data as to height, weight, age and general physical condition, the amount of school training, the occupations followed and the residence year by year. The applicant must also state whether he or she has ever been charged with any criminal act. Each question is so framed as to admit and require a rather extended reply. Two certificates from reputable citizens of the locality claimed by the applicant as a residence must accompany the application and also the certificate of a physician as to the physical condition of the person applying. The applicant must also state the extent of service, if any, in government employ and the experience he may have had in the care of the insane.

This application is mailed to the superintendent of the hospital and delivered by him to a local branch of the U. S. Civil Service Commission, composed of two members of the hospital medical staff and a secretary who is also an employe of the hospital. The application is by them given a rating based on all the data comprised in it, height, weight, age and physical condition being considered as well as experience in such service, and the general appearance, including orthography, composition and neatness of the application as presented. When the applicant has had service in another hospital, he is required to present a letter of endorsement from its superintendent, or the latter is asked to give his opinion of the applicant's service, before the rating is made.

Each month all the applicants for the month previous receive notice of the rating given. A careful record is kept of these ratings and when a vacancy occurs the superintendent is given the names of the three highest on the list, from whom he must make a selection or give his reasons for passing by the names presented. If a name is passed by three times, it is dropped from the roll and applicants are continued on the eligible list for one year only from the date the rating is given. An average of 70 in a maximum of 100 is requisite to place the name of the applicant on the eligible list. When a selection is made the applicant is requested to present himself for physical examination, which enables the superintendent to determine the

state of the physical health as well as the degree of intelligence and the apparent general desirability of the applicant. If the applicant is then selected he comes on a six months' probation, the males receiving for this period \$18 per month and the females \$14.

During the probation period, or as nearly as possible after its close, the physician, in whose department the attendant is employed, and the chief of the training school determine whether or not he or she shall enter the training school. This training school was established three years ago and the second class completed the course of instruction on May 23d of this year.

The school is under the charge of a chief who is a woman, a graduate of a training school of a general hospital and with several years' experience in the care of the insane. The course covers a period of two sessions each lasting from Oct. 1 to June 1. Weekly recitations are given by the chief of the school to the Junior class from Weeks' Text-Book on Nursing.

A lecture is also given each week by a member of the medical staff of the hospital, the different subjects being divided among the several members of the staff. The chief of the school attends these lectures with the class. The members are required to take notes of the lectures, write them out later and submit them to the chief for criticism, explanation and correction.

To the Junior class four lectures are given on anatomy, four on physiology, three on chemistry, three on materia medica, three on bandaging, local applications and surgical dressings, two on what to observe and report to the physician, four on bacteriology, four on mental diseases. In addition three are devoted to a general review.

The Senior class have five lectures on materia medica, medical chemistry and urinalysis, four on regional anatomy, four on physiology, four on bacteriology and hygiene, three on surgery, four on hydrotherapy, massage and electricity, three on pathology and regional anatomy, and three on mental diseases. An examination is held in each subject at the close of the series of lectures and an average of 70 is required in each.

Weekly quizzes are held by the physicians on most of the subjects and the instruction is made as practical as possible.

No attempt is made to teach the subjects as they are taught to medical students, but simply to give such parts as may be of use to the students as nurses. Everything is made as simple as possible and the use of technical terms avoided as far as is consistent with the ends desired. In materia medica, the most important medicines are taken, and by sight, handling and use, the students are familiarized with them. The study of anatomy is chiefly limited to regional anatomy and the structure of the principal organs of the body. In physiology, such practical subjects as digestion, blood formation and circulation, respiration, and excretion are given prominence. The bacteriological course comprises a review of the simplest classification of bacteria, the nature of those found in disease, the points to be observed in the diseases in which they are found, how they are disseminated, together with such parts of the subjects in general as the nurse should know and may reasonably be expected to understand. The study of hydrotherapy, massage and electricity is entirely practical. A patient dressed in trunks is brought before the class and each member is shown the various movements of massage, the different methods of bathing, and as far as practicable is required to practice the various movements under the eye of the instructor. The same method obtains for bandaging and local dressings.

The entire hospital is divided into five departments, with a senior medical officer in charge of each. Four of them have a female head nurse in charge of each. This nurse is a graduate of several years' standing. She has immediate charge of all the sick in that department and of all acute cases. She gives special bedside instruction to the nurses of the school in all that pertains to their duties in the sick wards. These nurses, as far as is practicable, are given periods of three months' service each, on the receiving ward and the hospital ward proper, the infirmary, the ward for disturbed cases, with the convalecents, and on night duty. They are required to make careful notes of all sick and all special acute cases, to dress all sores, wounds and fractures, to properly handle patients in bed, to give hypodermic injections, enemata, baths, massage, to record the pulse, temperature, respiration and actions of bowels and kidneys, to describe the mental condition of the patient, the way

in which he occupies his time and every accident that occurs. About twelve graduate female nurses, or those in the Senior class are employed in the male hospital and infirmary wards. These have especial charge of the nursing care of the patients. Each department of the hospital, as above described, has an office in the hospital ward, which is equipped with appliances for surgical dressings, minor surgery, etc., and a cabinet with the usual medicines required. Most of the medicines prescribed are kept here, and many of them are compounded by the nurses. All medicines are administered under the direction of the head nurse of the ward.

During the first year of training, males receive \$20.00 per month and females \$18.00. During the second year the wages are for males \$25.00 and females \$20.00. After graduation associate nurses receive \$30.00 per month for males and \$25.00 for females, and when in charge of wards male graduate nurses are paid \$35.00 per month and females \$30.00. When female graduate nurses are employed on male wards they receive \$32.50 per month. In all cases board and washing are included. Attendants who have not taken the training receive about \$5.00 per month less.

During the course lectures are given to the female nurses in cooking by the dietician who has charge of the entire sick diet of the hospital wards and who has herself taken a full course of instruction in a cooking school of recognized standing.

Throughout the course the importance of the moral treatment of the insane is made prominent, and the nurses are taught to consider all these means as only adjuncts to the constant efforts which the nurse should make to direct aright, and to guide into normal channels, the activities of the patients in his charge.

To sum up, the influence of the course of training has been here, as I believe it is universally found to be, markedly beneficial. I desire especially to commend the service of the female nurses in the male wards. There has been a very decided change for the better in these wards. There is an increased appearance of neatness of both patients and beds, there are less frequent complaints and a greater degree of contentment among the patients. Great care, of course, is used in selecting candi-

dates, but the results thus far have been surprising even to ourselves in the readiness with which the nurses adapt themselves to the work and the little that we find in any manner objectionable in the conduct of patients toward them. It also increases the confidence of the friends of patients. How far this service can be extended we have not yet fully demonstrated. In a general way the female head nurses, before referred to, have general charge of the entire hospital service in all the wards for the acute and chronic sick and for many of the feeble classes. Female nurses are actually present constantly during the day in eight hospital wards. Male nurses and male attendants are also on duty in these wards, but the responsibility for the nursing care of the patients, the recording of notes, and the administration of remedies are primarily left to the female nurses. We find their presence in these wards of advantage in many ways and thus far we have not discovered any disadvantages. One of these hospital wards is also a receiving ward and in it we have three female nurses, two male nurses and a dining-room attendant.

The number of graduate nurses from the two classes now in the service of the hospital is 52. A few are sent out in charge of private cases in the City of Washington and this we have encouraged, believing it to be of advantage to the hospital in widening the experience of its nurses and in keeping it in close touch with the medical profession outside. Moreover, by this means we aim at securing a wider dissemination of the correct methods of nursing in insanity.

How far it will be practicable to introduce female nurses into the general wards, for the care of the able bodied chronic cases, is yet untested, and I have doubts as to its adaptability for these classes. I believe, however, that for all acute and curable cases, the introduction of one or two discreet, intelligent and trained female nurses into each ward, more particularly for the moral treatment of the patients and the general supervision of their medical treatment, is of decided advantage and entirely feasible.

With the lapse of years, and as my experience has been extended, I have been more and more impressed with the fact that the female is, generally speaking, better adapted to the position

of a nurse for the sick insane, than the male. In my experience the chief reason for this superiority has seemed to be the different point of view of the two. Men who take up this work so frequently look upon it as a temporary employment and one to be used simply as a present expedient or a stepping-stone to something more remunerative. They also are less disposed to look upon it as a profession or a work that would justify any special preparation for it. Women, on the contrary, are more inclined to consider the work of nursing as deserving their best efforts. They take more pride in it. To the class from which they are chosen there are few occupations that offer more financial inducements and they are, therefore, less inclined to change. They are more ready to undertake the training required because they see in the work a permanent employment at good wages. I believe, too, that females, taking them as a class, are by nature better adapted to the profession of nursing. The duties and responsibilities of motherhood are reflected to some extent in the nursing work of most women. They have a kinder and more sympathetic manner, are more patient and long suffering. Their touch is gentler.

These qualities have been recognized for years in general hospitals and I am now disposed to believe that they are relatively just as valuable in the treatment of insanity as of any other disease. Certainly it is true for many classes of the insane, particularly those that require special nursing and individual care. Nearly all forms of acute insanity and all feeble, sick or bedridden among the chronic cases, are better cared for by females.

It will of course never be advisable to attempt wholly to dispense with male help even with these classes. Orderlies or male assistants will be required for the heavy work which goes with the care of most of these cases and also for possible outbreaks of violence, although I have found the latter remarkably infrequent where female nurses are employed.

There can be no question that the insane are visibly impressed and influenced in their conduct by the presence of women. Insults and improper language have been surprisingly less frequent than are found by a male physician among female insane. Why this is so I cannot explain, but my experience

has demonstrated its truth. Men who abuse their doctors and are generally suspicious of their surroundings, often yield unquestioning obedience to the female nurse. I have seen this in many instances and the male patient is a rare exception who goes out of his way to offer any insult or show any disrespect to a woman who comes to him in the capacity of nurse. All the white patients not suffering from chronic forms of mental disease, admitted to the Government Hospital for the Insane for nearly one year past have been placed in a ward where the majority of the nurses are women and I believe we have had a good opportunity to test the question, inasmuch as we have had to deal with an unusual variety of classes. We receive the young soldier from active service, the veteran from the Soldiers' Home and civilians of all social classes from the District of Columbia.

I look forward to a gradual extension of this service; but how far it can be carried with advantage, only time and future experience can demonstrate.