DEPARTMENT OF PUBLIC HEALTH NURSING

IN CHARGE OF

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POST GRADUATE WORK. An ex-visiting nurse who has been doing very good work in a small town community recently wrote us in regard to an industrial position which she could have for the asking. In her letter she said that her plans for post graduate work were well known to the recipient of it, but would not a position with this corporation be just as helpful as post graduate work? The following was our reply:

"I could not advise you about the position with the ——— without knowing more about it. If it is a fairly comfortable position with a good salary, into which you will slip and stagnate for the next ten years, don't take it. If it offers you an opportunity to do intelligent, constructive welfare work for a lot of employees, with the assistance of a good physician and a good general manager, it is worth considering. No matter how good a position is, however, nothing will compensate you for giving up post graduate study for it. The country is full of good positions—there are going to be more of them, and you are young enough to make any sacrifice now for post graduate work; five years hence it may not be so easy. If the salary is larger than you are getting now and will enable you to save more, why not take it for two years and go to Teachers College instead of post graduating in ———? Do not take it simply because it is a good position; see how much future it offers you before you make any change in your present plans. There are two kinds of industrial positions—one (rare), enables a nurse to develop the work and herself to her utmost ability; the other wants a good employee who will prevent minor infections from becoming serious and who will make herself as unobtrusive as possible. There are a great many positions of this latter sort—probably due to the fact that Illinois has a good workmen's compensation law. They are not fair to a progressive nurse, however, and I don't advise nurses to consider them seriously. Whatever you do, don't give up the idea of a post graduate course. Postpone it for a year or two, if by so doing you can make Teachers College possible, but don't give it up permanently."

COLORADO. A very interesting course of instruction to invalids, pupil nurses and graduate nurses is being offered by the Colorado Springs Society of Occupational Therapy, with Susan S. Harris, as Occupational Director. The aim of this course is threefold: (1) The patient's physical improvement; (2) his educational advancement; (3) his financial betterment. The method is based upon a threefold principle: (1) The realization of resources; (2) the ability to initiate activities; (3) the participation in such activities of invalids, convalescents, and the handicapped. Thanks to the intensive work in this subject done by Miss Tracy of Boston, and the Mental Hygiene Society of Chicago, under the stimulus of Elnora Thomson (Presbyterian Hospital, Chicago), we are all being awakened to the realization of the shut-in patients' needs. Patients who are only temporarily ill, need resources and occupational diversions quite as much as chronic cases whose only future seems to be bounded by the four walls of a bedroom. There is surely going to be a broad field for nurses thus trained in invalid occupations, and the nurses who go into the work will undoubtedly feel more than repaid for the expense and time expended upon it.

NEW YORK STATE. The State Charities Aid Association is planning a very comprehensive system of state-wide clinics for the treatment of infantile paralysis cases. The work was organized with the assistance of Dr. Robert Lovett of Boston; and two physicians and several nurses are going throughout the state holding one or two clinics daily where children are examined and local physicians and mothers are advised regarding their treatment. New York public health nurses have been of greatest assistance in this campaign, for they have notified their patients and have helped to make the clinics a success. The excellent condition in which most of the patients are found shows the careful treatment which has been given by local physicians during the acute stages of the disease. Several interesting publications and leaflets on the subject—notably the *Bulletin* for November and an article by Dr. Robert Lovett entitled *The Management of Poliomyelitis with a View to Minimizing the Ultimate Disability*, are being issued by the State Charities Aid Association. Nurses desiring this literature should write directly to the headquarters of the Association, 105 E. 22nd Street, New York City.

Although New York City and New York State were most seriously crippled by this infection, a number of other states, notably Ohio, Minnesota, Pennsylvania and Illinois, had more of the disease than was at first believed. The State Board of Health of Illinois is planning to get under observation every convalescent case in the state;

and the Chicago Visiting Nurse Association, by means of a special committee, is attempting to visit and instruct each case registered in Chicago.

Although not very much is known about the disease, apparently, the study published in the *Survey*, recently, is interesting in that it shows that in 7000 cases, only 6748 families were affected. In 205 families there were 2 cases; 20 families had 3 cases; 1 family had 4 cases and 1 family had 5 cases. In spite of the exposure of thousands of children and adults, a very great many people escaped the infection; on the other hand, adults and children who were most carefully guarded developed the disease.

A post graduate course in muscle-training and after-care nursing is now being given at the Children's Hospital in Boston, and a somewhat similar but more restrictive course is being contemplated in Chicago. During the height of the epidemic in New York, very few nurses were found who had had experience in the after-care work, and now nurses and masseuses who understand muscle training and other after-care treatment are almost at a premium.

INDIANA. The following letter from the Public Health Nursing Association of Terre Haute was recently sent to each physician in town. The question of obtaining coöperation with local physicians is of such vital importance that all nurses undertaking this work in new fields will be glad of an opportunity to see how this problem has been successfully solved by a recently-organized society.

We have launched the work of The Public Health Nursing Association of Terre Haute, and we earnestly ask your coöperation. Our purpose, first, is to give skilled nursing care to the sick in their homes; second, is to teach personal hygiene, cleanliness and the prevention of disease. The work is not intended in any way to substitute the work of the physician, as the attendance of a physician in all cases will be imperative, and strict ethics required of the nurses. Regarding cases where there is no physician in attendance, and the family refuse to call one, the nurse will only make the initial visit. Should the family be strangers and insist upon the nurse advising them regarding a physician, she will refer them to the nearest doctors in the neighborhood, or if the case be an indigent one having no family physician, it will be referred to the township trustee. The poor will be our first consideration, our second will be the middle class; the length of visits varying from one-half hour to an hour. A fee will be charged wherever it is possible to collect one, the maximum fee being fifty cents. An extra charge of from ten to twenty-five cents will be made in maternity cases where the nurse cares for the infant. The very poor will be allowed to pay any small amount they can afford. We will desire a diagnosis of each patient nursed: (1) To enable us to give as much and as careful nursing as indicated; (2) to protect the nurses from the danger of infection to themselves and others; (3) to enable us to show, by carefully kept statistics, the kind of cases under our care and the approximate amount of nursing service required by the dif-

ferent types of cases. Our standing orders for First Aid have been approved by the Vigo County Medical Society. Any or all of these orders may be canceled or substituted for at any time by the physician on the case who prefers to leave *specific written orders* in each family. The above orders are intended to serve for the interim. We employ only registered graduate nurses, in good standing, and we feel that the physician will not only benefit by the work the nurse does herself, but that through her coöperation his instructions will be more faithfully and intelligently carried out by the friends and relatives of the patients. Asking for your cordial coöperation, we are, Very sincerely,

THE PUBLIC HEALTH NURSING ASSOCIATION OF TERRE HAUTE.

The Terre Haute work has been very well organized. All of its publicity has been done through the local Council of Women's Clubs, and the splendid backing which they have given the work has meant a great deal to it. Lillian M. Rose is supervising nurse, and she has two assistants. They began their work as an organization on October 1. They are planning to use the records of the National Organization for Public Health Nursing.

The new form authorized by the National Organization at the New Orleans meeting is now printed and is being used by a number of smaller organizations, although up to date the Chicago Visiting Nurse Association is the largest organization using this record for nearly all of its cases. The Instructive District Nursing Association of Washington, D. C. is also using this form and other associations are considering its adoption.

The Mental Hygiene Society of Chicago has recently compiled a new history card for its work, and has carefully incorporated all of the suggestions made in St. Louis, San Francisco, and New Orleans, so its records will in the future be just as helpful in comparative work as the form prepared and authorized by the National Organization. If this can be done so successfully for the Society of Mental Hygiene, surely Infant Welfare and Tuberculosis organizations can use a modified form of this record, incorporating in their new records all of those items and such additional items as the special work of each agency requires.