

and staff their wards with graduate nurses. Objection is bound to be offered to this plan until the public is seized with the idea that a graduate nurse is something more than a maid with some knowledge of the care of the sick. In the second place, the management of small hospitals must be shown that they can conduct their institutions with graduate nurses at no increase over their present costs, provided they have been making allowance in their budgets for the maintenance of an approved school. It is quite true that a hospital can keep its costs down if it refuses to recognise that a nursing school is a school for the proper education of its undergraduates in all branches of medical science, in so far as that science is necessary and applicable in the instruction of a graduate nurse, and that such a school must be properly equipped and provided with a teaching staff adequate to the responsibilities assumed. It is probable that many schools throughout Canada will say, on first thought, that if they have to provide instruction along lines such as these they will be forced to close their hospitals because of the added expense—in other words, unless they continue a low-graded school in order to give, as they believe, a cheaper service to their patients, and as a consequence of their belief, graduate nurses of mediocre ability, they must cease to exist. We are of the opinion that, from the educational point of view, such an argument is untenable, and further, that the cost of staffing a small hospital with graduate nurses in place of maintaining a modern school of nursing should be carefully investigated before any hasty conclusions are reached. Expediency is doubtless necessary at times, but it should not be accepted as an ideal and thus become dominant in practice; it tends to mediocrity in the end, and mediocrity can never be the goal toward which our lives should lead, either individually or nationally.

In this connection, I would like to point out that the hospital was ori-

ginally intended for the care of the poor, more particularly those without homes whose earthly days were drawing to a close. The nursing care was provided largely by Sisters, who voluntarily gave their lives to minister to the needy sick. The development of a training school in connection with a hospital is a modern idea, and doubtless was gradually evolved as a means of providing general care for the inmates at a cost that was of necessity very low. The advance of medical science in the last half century has compelled us to alter our ideas respecting the function of a hospital. Besides providing care for the patients admitted to its wards, it is becoming more and more a factor in health education. As we familiarise ourselves with this general health problem, the more we are led to believe that the small hospital could develop a greater field of usefulness by concentrating its energies in making itself the centre of a well-planned community health scheme, rather than in attempting the maintenance of a nursing school of doubtful educational value. It is not part of this address to elaborate such a scheme, but we offer it to those interested in health work as a field in which much can be done.

The hospital of the future must accept some responsibility for the quality as well as the quantity of its graduates, and not continue to send from its doors, into a vastly overcrowded profession, a procession of young women often very poorly equipped for duty, largely because the hospital believes that by so doing it is maintaining its costs at the minimum. We are not unaware of the high cost of sickness today, but we believe the reduction of these costs involves the solution of a problem much bigger than simply whether it is cheaper to utilise or not to utilise student nurses to do the many jobs about the hospital.

It may interest you to know that already some of the smaller hospitals in the province of Ontario have dis-