

MMDNA - Malta Memorial District Nursing Association

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ABSTRACT: From time immemorial, members of religious orders, both male and female, have nursed the poor in their homes as occasion offered. In Britain, in 1859, an experiment by William Rathbone of Liverpool, led to the establishment in that city of an organised service of trained district nurses, badly needed at the time, because of the poverty and squalour in which the majority existed. This, in due course, led to the founding of the Queen's Institute of District Nursing (Q.I.D.N.). This in turn, provided the first qualified nurses when MMDNA was founded in 1945, to provide an organised Home Nursing and Midwifery service for the Maltese Islands. MMDNA is now well established and has been entrusted by the Department of Health to provide an important part of the National Health Services for these Islands; MMDNA nurses and midwives visit over a thousand homes a day.

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Introduction

"MMDNA is a voluntary, non-governmental, non-profit-seeking, philanthropic association providing a Home Nursing and Midwifery Service, which is reliable, efficient, cost-effective and of a high professional standard". This is how the Association sees itself and how it projects itself to the public.

The aim of the Association has always been to provide a domiciliary nursing and midwifery service in the Maltese Islands and to participate in any work concerning the health of the community, and this is in fact, what it does.

MMDNA has been operating for some years now, without going through any major crises. Its financial position is healthy. In fact, it has been able to assist other organisations financially with similar objectives besides continually improving its own service. This happy situation has not always been so.

Its foundation and history

The founder

MMDNA was founded on 1st September 1945 on the initiative of Captain Robert Ingham MBE, LLD (Honoris Causa, Malta), to serve as a living memorial to those who fought and suffered and gave their lives during the Second Great Siege of Malta (1940-1943) and to provide the much-needed service of District Nursing in Malta and Gozo.

Captain Ingham had served in

Malta throughout the seige as the Army member on the Food and Commerce Board. This was his second tour in Malta as, from 1916 to 1919, he had served as ADC to Field Marshal Lord Methuen, the Governor of Malta.

In 1944, Captain Ingham returned to the United Kingdom and raised some £3,000, mainly from the County of Stirlingshire in Scotland. On his return to Malta he persuaded the authorities of the great need to start a Home Nursing Scheme and on 27th July 1945, the Scheme was launched by the Governor of Malta, Lieut. General Sir Edmund Schreiber, at a Garden Fete in Villa Bologna, the residence of Lady Strickland.

Captain Ingham was made a Member of the Order of the British Empire in 1951 and the Royal University of

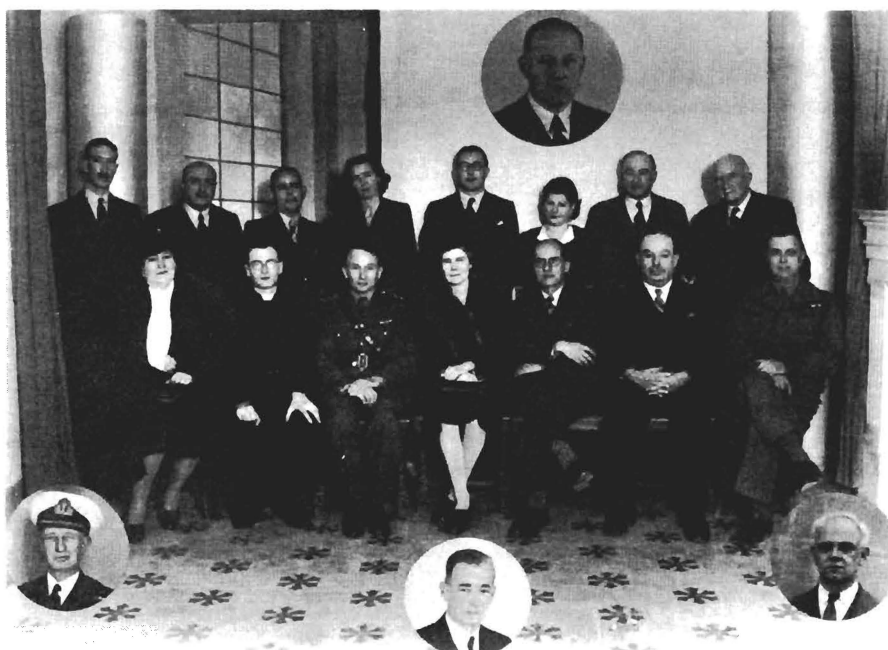


The founder, Capt. Robert Ingham, seen with Her Majesty Queen Elizabeth II at the Palace, Valletta, in 1969.

Malta conferred on him the degree honoris causa of Doctor of Laws (LLD).

In fulfilment of his wish and in recognition of his work, the Association adopted his family shield 'A Cross Moline on a shield of green and gold' and the Motto 'In Veritate Victoria' as its logo. The logo is incorporated in the belt buckle which qualified nurses wear with their uniform. The Association's premises are also named after him.

Captain Ingham continued to take a very active part in the affairs of the Association for the rest of his life, especially in the raising of funds and in obtaining the support of people who mattered. He had retired in Malta where he died at his home in I-Iklin, Lija on 13th August 1973 at the age of 81.



The first MMDNA Council

The first committee meeting

The first Committee Meeting was held at The Palace, Valletta, on 1st September 1945, under the Chairmanship of Lady Schreiber, the Governor's wife, for the purpose of considering a Draft Statute for the "Malta Memorial District Nurses Fund".

At that first meeting the Scheme was adopted in principle. The main preoccupation was the lack of trained nurses and it was, therefore, resolved that training should be started as soon as possible at the Blue Sisters Hospital. It was left to the doctors on the Committee under the chairmanship of Colonel RW Raven, Commander 90 General Hospital Mtarfa, to study the implementation of the Scheme and to submit proposals to the Committee. It was also decided to acquire temporary premises on lease to serve as a nurses' home.

However, perhaps the most important resolution passed at that first meeting was that the nurses provided under the Scheme were to be used for the benefit of all classes of the community from the outset - a principle strictly adhered to at all times.

Laying down the foundations

During the next few months the Committee met regularly and achieved much. The Statute of the Association was approved, providing for the setting up of a Council of not less than 15 and not more than 20 members in Malta and to form another Council in England with its own Chairman, Secretary and Treasurer. A booklet giving the aims of the Association and how it intended to operate was prepared by Colonel Raven to be distributed at Public Meetings and on other occasions.

Temporary office premises for a secretary, employed full-time, were acquired for three months, rent free, at Cassar House, Kingsway, Valletta, through the kindness of Mr C Cassar Torreggiani who also donated £250 to the Association.

The Blue Sisters Hospital had confirmed that they were fully prepared to co-operate in the training of nurses. The Council intended to seek the Government's recognition of the Training School for Nurses as soon as possible after this had been set up. Professor PP Debono was to be the Director of the School and he agreed to forego his honorarium.

Two houses in Sacred Heart Avenue, St Julian's were rented to serve as the Nurses' Home.

By the end of 1945, the Association's foundations had been firmly laid. More than a whole year was, however, to pass before the Association would be in a position to make its first Home Nursing visit; this happened on 7th February 1947.

Final preparations

The training school for nurses

It was only in the early fifties that the Department of Health eventually managed to set up the School for Nurses at St Luke's Hospital. The position in 1946 was that nursing staff in Government and other hospitals consisted, in the main, of religious, assisted by hospital auxiliaries. During the war, a number of young women had joined the V.A.D. service (Voluntary Aid Detachment) but many of these went to the United Kingdom when the war ended to qualify as nurses and the few who returned to Malta re-joined the British services' hospitals. There was also a small number of St John Ambulance Brigade volunteers who had had some training in nursing.

It had seemed to the Council that the only solution was to train its own qualified District Nurses, which meant establishing a School for Nurses which would conform to the standards required by the General Nursing Council for England and Wales. As it happened, however, the school never materialised except to train the initial batch of Nurse Assistants.

The task of listing the requirements for establishing the school was undertaken by Colonel Raven, whose

military tour in Malta was coming to an end. In his report in January 1946, he stated that it was of fundamental importance that the training of student district nurses should conform to the standard of training in the United Kingdom. He felt that the Blue Sisters Hospital would thus have to conform to the required standard if the school was to be set up there. A minimum daily occupancy of 100 beds was essential.

Additional equipment was required at the hospital to replace that which had deteriorated during the war years. It was also essential that the hospital had a Resident Medical Officer for recognition by the General Nursing Council. The Association offered to bear the lion's share of his salary.

The Council realised that the setting up of the school would take a considerable time. It had to decide whether:

- a. To proceed with the training of qualified district nurses in Malta and delay the MMDNA service by, at least, two years or
- b. To train nurse assistants and employ 8 Queen's Nurses from UK so that the service could start in 1946

It decided to train, immediately, ten nurse assistants (later increased to 15) by way of experiment, at the Blue Sisters Hospital to work under the supervision of trained nurses from UK. Sister Gerome acted as Sister Tutor; medical lectures were also given by Prof PP Debono and Surgeon Major RL Casolani. The syllabus for Nursing Orderlies Class I in the Royal Army Medical Corps was considered adequate.

The Council postponed its plan to train qualified nurses in Malta. It was, no doubt influenced by Professor Alan Moncrieff, who attended its March meeting; he had discussed the Association's problems with Colonel Raven in UK. He stated that even in Britain a new scheme was also being introduced, which would make use of nurse assistants under the supervision of fully trained nurses. In his opinion, nurse assistants would be able to carry out most of the district nursing work just as efficiently as qualified nurses. Furthermore, he stated that the Blue Sisters Hospital, even with 100 beds, would be unsuitable for training fully qualified nurses but would be ideal for the training of nurse assistants.

Council for Britain

Meanwhile the Council for Britain was formed by Colonel Raven. Through the Council, Her Majesty, Queen Mary started taking an interest in the development of the activities of MMDNA. Her Majesty made a donation and sent her warmest good wishes to all those who were working for the Association. Her Majesty also helped to pave the way to obtain the co-operation of the Queen's Institute of District Nursing, who eventually seconded the British nurses to MMDNA. A special appeal for the MMDNA was made on the Radio in Britain by Sir William Dobbie, which elicited a very good response. The appeal money was added to the Trust Fund for the Association administered by the Council for Britain.

The Lady Strickland Fund for Malta

The Lady Strickland Trust Fund for Malta was established during 1946 with MMDNA as its beneficiary. It was originally believed that it would

amount to £150,000. but actually amounted to £20,000 - still a very large sum at the time.

It provided a very useful annual income to MMDNA up to 1997 when, because the Association's financial position had improved substantially, MMDNA proposed to the Trustees that the income of the Trust should be transferred to another local voluntary organisation.

The Trust had also enabled MMDNA to obtain a mortgage from Britain, when the Nurses' Home at St Julian's was being purchased.

The Queen's Institute of District Nursing

In January 1946, Colonel Raven returned to his peace-time work as a Consultant Surgeon in London.

He described the work of the MMDNA to the Queen's Institute of District Nursing, who agreed to provide a Superintendent and five qualified nurses for work with the Association in Malta. The Council for Britain made all the arrangements for the nurses to proceed to Malta and their travel costs were met by money raised in Britain.

Colonel Raven was later elected a Vice-President of the Association.

Leverhulme Scholarship

The problem of training Maltese women as fully qualified district nurses to replace the Queen's nurses, in due course, was however still present. Even as late as December 1946, Professor PP Debono was still in correspondence with the General Nursing Council for England and Wales to obtain their advice on the proposed course for registered nurses, which the Council still hoped to run at the Blue Sisters Hospital - this time, however, in association with certain departments at the Central Hospital in Floriana (for Ophthalmology and Orthopaedics) and the Cini Institute (for Obstetrics and Gynaecology). The course had been planned in detail, which eventually helped when the Department of Health was in a position to open its School for Nurses a few years later.

The Association eventually abandoned its plans to establish its own school for nurses when the Council for Britain managed to make arrangements to train Maltese women as fully qualified nurses in Britain. Colonel Raven had approached the Trustees of the late Lord Leverhulme and obtained their agreement to donate nine scholarships to the Association to train its nurses in Britain. They were first to qualify as State Registered Nurses and then undergo a course of training in district nursing before re-joining MMDNA.

The agreement provided enough breathing space until qualified nurses started to become available from the local School for Nurses some five or six years later.

D-Day - Friday 7th February 1947

Colonel Raven came out to Malta to attend the last Council Meeting on 17th January 1947, before the service was finally made available to the public.

The meeting turned down a suggestion that the service should initially be restricted to the Harbour Area. It was to be given to those areas which needed it most. Colonel Raven suggested that some midwifery cases should be undertaken especially in such places as Balzan, Lija and Attard where no midwifery was available.

Stationery for Nursing Records had been brought out

from Britain; records were to be held at the Nurses' Home in St Julian's. The scale of fees to be charged had been laid down:

- Minimum wage earners and all those living on minimum private means were to have all services free on becoming Associates.
- Those earning up to £300 per annum were to be charged one shilling per visit and the rest two shillings.

The British nurses were to be paid on the Rushcliffe Scale of salaries, and, in addition, 10% of the salary was to be paid by the Association towards their superannuation. The Rushcliffe Scale was however adjusted, from time to time, in Britain and an increase had been authorised by the time the nurses arrived in Malta. The new scale of salaries appeared out of proportion to the salaries paid to other officials in Malta and the Council felt that this would cause a certain amount of discontent among Government officials. There was, however, nothing else to be done so late in the day but pay up.

Acceptance by the public

The Queen's Nurses

When on 7th February 1947, the nurse superintendent sent out her five Queen's Nurses on their first MMDNA nursing visits in Maltese homes, she was not embarking on an entirely new kind of service. It was more of an adaptation of the work which her nurses were used to in Britain before they came out to Malta.

From the moment they stepped inside the patients' homes, the procedures were the same. These procedures had been formulated and improved upon during the previous ninety years and had reached a very high standard, both in terms of the nurse's attitude as well as in the adaptation of professional nursing techniques for use in a patient's home.

Home nursing had all started with an experiment initiated in 1859 by a William Rathbone of Liverpool, a philanthropist. During the terminal illness of his wife at home, he had employed a hospital-trained nurse and had been greatly impressed with the difference which her presence had made during that sad occasion. He wondered what such an illness must mean in the homes of the poor where comforts and skill were wanting.

After the death of his wife, he continued to employ the nurse to care for poor patients in their homes in a Liverpool district and this, in time, encouraged him to engage others on similar work.

As with MMDNA, Mr Rathbone's main problem, when first starting, was also that of finding trained nurses which were very scarce in Britain at the time. To raise the standard of nursing, he eventually managed to obtain the services of a superintendent and four qualified nurses from London Nursing Schools. Meanwhile, Home Nursing in Liverpool had got off to a flying start.

Soon, district nursing spread from Liverpool to other areas in Britain. In time, the district nurse became a familiar and beloved figure in busy cities and remote rural areas throughout the United Kingdom and rapidly assumed a similar position in many other parts of the world.

William Rathbone recognised early the need for a central organisation to recruit and train district nurses

and took a leading role in establishing, with the guidance of Florence Nightingale, the Queen Victoria Jubilee Institute for Nurses in London. This later became the Queen's Institute of District Nursing (Q.I.D.N.). The nurses trained by the Institute were referred to as Queen's Nurses. The Q.I.D.N. lasted until the early seventies.

It was through this splendid organisation that MMDNA obtained its qualified nurses until enough Maltese girls became available to replace them. A number of Maltese nurses qualified as Queen's Nurses.

When in 1968 the last British Queen's Nurse left Malta, the high standards demanded by Q.I.D.N. had been firmly established. These standards have been jealously preserved by MMDNA ever since. Even after 1968, MMDNA retained close contact with Q.I.D.N. and several visits by senior Q.I.D.N. officials to Malta were arranged, including that of a Midwifery Tutor who ran a refresher course for MMDNA midwives when such courses were not otherwise available in Malta.

Funds

In Malta, District Nursing also got off to a flying start. It was, however, obvious that income from subscriptions and nursing fees would be hopelessly inadequate if MMDNA was to be within reach of all classes of the population.

A continuous effort had to be made to organise fund raising activities and this went on year after year. MMDNA was lucky in having the resources of the Armed Forces and of the Dockyard to come to its support as well as the support of many individuals and firms. Each year a Ball, a Garden Fete and a Flag Day were organised. However, the Association could not depend indefinitely on such a large scale of fund raising activities and donations to balance its accounts as there were other organisations with just as worthy causes which also enjoyed the public's sympathy.

In September 1947, the Council with the support of Lady Edwina Mountbatten, wrote to the Lieutenant Governor appealing for a Government grant-in-aid and/or permission to hold a large scale lottery. The appeal was turned down but in 1949 the Government voted a grant-in-aid of £1,000 p.a. and this was increased to £2,000 in 1952 and to £4,000 in 1959. Finally, the grant-in-aid was increased to £6,000 in 1965 and remained so until 1973 when the concept of a grant-in-aid was dropped in favour of a request by MMDNA for remuneration for the free service which was being given to the indigent, who at the time, were issued by the Department of Health with a "Pink Card" entitling them to free hospitalisation and to other benefits.

This new line of approach changed MMDNA's relationship vis-a-vis the Department of Health from that of a collaborator to that of a contractor. It was an important change.

Home nursing & midwifery

The demand for the service of MMDNA nurses grew rapidly year after year. Word of mouth was the best advertisement. The high standard of nursing, never experienced before in these Islands, and the nurses' pleasant and helpful attitude, quickly earned the trust and respect of the Maltese public.

MMDNA operated from the Nurses' Home in St

Julian's. The Home had nine bedrooms and all other facilities for the nurses to live in reasonable comfort. The service was extended to Gozo in 1955.

By 1952, the first two Maltese Queen's Nurses had joined MMDNA, but the main problem was still the availability of staff. The number of nurse assistants had been reduced considerably mainly through marriage and it was difficult to comply with the Archbishop's insistence that the British nurses should all be Roman Catholic. Eventually, the Archbishop relented and agreed that three non-Catholic nurses join MMDNA from Britain.

By the end of the fifties, MMDNA was well and truly established. MMDNA had become a household word even in the most remote parts of Malta, where, if anything, the nurses were even more respected and appreciated. The cost had been much effort by a large number of people to ensure its survival especially to provide the necessary financial backing. The Association had not yet experienced any serious financial crises. These were still to come during the next decade.

The difficult years

MMDNA continued to make good progress in so far as its Nursing and Midwifery service was concerned as this side of the Association was being run by professional nurses.

The extracts from statistics in Table 1 show how the service to the public increased over the years until MMDNA was eventually overwhelmed by sheer weight of numbers because there was not a correspondingly adequate increase in funds, in spite of the Council's strenuous efforts in fund raising activities and the increase in the Government's grants-in-aid.

Goodwill from all quarters was not lacking. The frequent charity functions were well supported; the Council continued to attract top personages - some, possibly, encouraged by the fact that the meetings were held at The Palace in Valletta or at San Anton.

The Governor had been the Association's Patron from the start, but this changed in 1951 when Her Royal Highness Princess Elizabeth graciously extended her patronage to the Association. The Royal Patronage continued on her accession to the throne - Her Majesty The Queen remaining MMDNA's Patron until 1974 when Malta became a republic. Since then, MMDNA has again been greatly honoured by the patronage of each of the Presidents of the Republic of Malta.

The superintendents from the United Kingdom continued to control the nursing side until 1968. It is

thanks to these ladies that the high standard of nursing techniques, which is still very much in evidence today, was passed on to the Maltese district nurses who gradually replaced the British nurses and carried on the good work on their own after 1968.

The day to day administration was attended to by the Secretary. Besides his secretarial duties at Council, Executive Committee and other committee meetings, he was responsible for keeping the accounts, for providing administrative backing to the nursing side and for many other chores in connection with the preparations for holding the numerous Fund Raising activities each year.

No one person was responsible for running MMDNA. The Council retained a strong hold not only on general policy but also on many details. Most of the Council's time was taken up in discussing how to overcome the current financial crisis. One crisis followed the other at very frequent intervals and some were so desperate that the nurses' salaries had to be withheld for a month or two.

By mid-1966, it was already clear that the Association was again heading for a major financial crisis and that this time, it would probably mean the complete collapse of the Association. The Government was not prepared to increase its grant-in-aid and had made it clear that it would run the service itself if MMDNA closed down.

However, a last minute solution was found. It was based on a plan submitted by Mr Louis E Galea, a senior Barclay's Bank official, who had joined the Council as its honorary treasurer in 1963. He had then taken various measures to revise MMDNA's administration and an improvement in the financial position had been immediately registered; however, this had been too small and too late. The secretary, Mr V Vassallo, decided to call it a day and took employment elsewhere but continued to help part-time until a proper hand-over could take place. Mrs Jeffries, the superintendent, agreed to return to UK after handing over to Miss C Muscat, who remained in charge for some months, and the last two UK nurses, the Misses Veillard and O'Friel were asked to resign but were allowed to stay on until they found alternative employment in Britain.

The new plan was based on a drastic retrenchment exercise and in making users pay a more realistic fee for the service, but most importantly of all, in having one person managing the Association. The plan did eventually work but not without many more heartaches.

MMDNA today

A tight retrenchment exercise, the appointment of a General Director, a thorough administrative restructuring and the replacement of the last British nurses by locally enrolled nurses on new salary scales, at par with those paid to the Department of Health employees, soon started to have a positive effect on the Association's funds; but even more importantly, MMDNA regained the full support of the Department of Health. A new Statute for the Association was approved,

Table 1 - Extracts from statistics

Year	No of Nurses	General Cases	Nursing Visits	Midwifery Cases	Midwifery Visits	Govt Annual Grant £
1949	10	878	26,939	55	1,155	1,000
1953	10	1,809	41,360	79	1,659	2,000
1959	18	3,013	75,805	250	5,250	4,000
1963	16	4,796	74,909	185	4,908	4,000
1965	23	9,244	133,832	150	3,321	6,000
1967	21	8,448	138,376	69	1,861	6,000
1968	19	1,731	91,866	37	882	6,000

allowing very much more latitude to the newly-formed Board of Management, with Mr. LE Galea as its chairman, the Council retaining mainly trustee powers. The Board of Management, in turn, delegated many of its powers to the General Director, Major Maurice G. Agius, who, with the Principal District Nursing Officer, Mrs. Raffaella Farrugia, ran the Association. Both were full members of the Board of Management and reported monthly to the Board on the previous month's activities and on the plans for the future. Since 1971, the Council Chairman has been the Hon Chief Justice Emeritus Prof. JJ Cremona.



The present MMDNA Council

The subscription remained at 10 shillings for the whole household, but nursing fees for each visit were re-introduced, this time at more realistic rates. These eventually ensured regular and prompt payment of the annual subscription as subscribers in their second year qualified for reduced nursing fees and were totally exempt after five years. Nursing fees were waived for "Pink Card Holders". Group subscribers did not have a qualifying period.

In 1973, the Department of Health was persuaded to contract MMDNA to provide free Home Nursing and Midwifery service to the indigent - "Pink Card Holders". These were exempt from paying nursing fees but usually paid the annual subscription when using MMDNA's services. As a result, the annual subsidy of Lm6,000 was changed to a payment for services rendered of Lm10,000 p.a. This created a new relationship between MMDNA and the Department of Health.

The arrangement was very successful; in fact, the following year, the service was extended to give the elderly and disabled living alone, special care and attention so that they would not have to be institutionalised. This also worked very well but only for eight months. Perhaps through a misunderstanding, the Ministry of Health decided not to renew the contract and MMDNA lost not only the payments under the

contract, but also the annual subsidy, which it had been receiving since 1949.

It also meant that MMDNA had to dismiss more than half its employees and to make stringent economies. The nurses' home in St. Julian's had become too large and expensive to run as MMDNA no longer needed to provide sleeping accommodation for its nurses. MMDNA moved to much smaller premises near the University at Tal-Qroqq, resulting in its funds acquiring a substantial financial reserve in the transaction.

For eight years, MMDNA provided its services only to its subscribers. The annual subscription was raised to

Lm1 and a few years later to Lm5, however, it remained at Lm1 for group subscribers. No further increases have been made since. The number of paid-up subscribers is now about 15,000.

However, contact with the Department of Health was maintained and eventually in 1982, MMDNA was given the responsibility of providing Home Nursing Service in outlying areas on behalf of the Department of Health. Year by year, this co-operation was built up as additional areas were taken over to relieve Department of Health nurses, who were badly needed elsewhere.

In 1990, MMDNA assumed full responsibility for Home Nursing and Midwifery Service throughout the Maltese Islands. It was also given control of the Home Help Service (Scheme II) which MMDNA had started in 1973

and a Scheme for Special Care to Diabetics. Both schemes were staffed by seconded personnel from the Department of Health. All these now generate over a thousand visits a day, controlled and allocated to each nurse centrally by computer. Each visit is recorded by the nurse in a case card left with the patient until it is full or until the patient is convalescent; the card is then filed at the office for at least five years. It is hoped that some day the records will be kept electronically and possibly linked to the patients' medical records held centrally by the Department of Health.

General Nursing visits include: general care of patients, eg blanket-baths, prevention and treatment of bedsores, toenail cutting; injections; enemas and wash-outs; post-operative and other dressings of wounds; urethral catheterization; care and treatment of diabetics, etc. Also, each day, an MMDNA midwife visits Karin Grech Hospital for the list of mothers and infants being discharged that day. These are visited at home on the next day and on three other occasions within 10 days of the birth of the child (and later if necessary).

MMDNA has still much potential for expansion; it has started getting involved in Mental Health Reform in the community and occasionally in Day Surgery. Another area for possible expansion is in post-natal care. Contact with the mother and infant could be extended



The present Staff

from ten days after birth, to at least six or twelve months. The organisation exists but restrictions are the availability of qualified staff and funding.

Visits to the elderly already represent over 85% of the total nursing service. MMDNA helps to make it easier for the elderly to continue to live in their home, using auxiliary nurses for their general care, wherever possible. MMDNA owns 19 patient lifters which are always in use; when a waiting list starts building up, more are acquired. It is hoped that soon special patient beds will be made available on loan.



The contract with the Department of Health is for an indefinite period. Payment is based mainly on the previous year's expenditure and is worked out on a simple formula, taking into account the visits made by MMDNA nurses to Department of Health patients as a percentage of the total number of visits. As accurate statistics are maintained, the result is easily obtained. In 1997, expenditure was just over Lm340,000. The current cost of each visit works out at 89c2. Since 1995, MMDNA has been providing nursing stores free of charge, when treating its subscribers. Stores include sterile dressing packs and swabs, tubular bandages and syringes. It has been suggested that patients discharged early from hospital should, at least, also have similar facilities.

MMDNA provides a few other services, eg Intensive First Aid Courses under the auspices of St. John Ambulance Brigade and the provision of a nurse at factories for a few hours daily.

The Association employs a staff of about 65 and has another 16 personnel seconded to it from the Department of Health. It runs a fleet of 42 cars; nurses servicing a driving area, drive an MMDNA car which they keep at their home after duty hours.

In 1996, MMDNA moved to more spacious and congenial premises in Triq ir-Russett, San Gwann, and again, the fund reserves were improved as a result of the move.

Income from the contract with the Department of Health represents about 80% of MMDNA's income, the balance is obtained from other sources - mainly from subscribers; many of the larger companies are Group Subscribers and most of the Private Health Insurers enroll

their subscribers with MMDNA. This ensures that MMDNA remains an independent non-governmental organisation, which, in turn, guarantees that high professional standards are maintained and, indeed, improved upon at every opportunity.

Continued education of staff is given a high priority. Staff have access to Community Nursing periodicals from Britain and to a small reference library kept at the offices. In-service training is regularly held on the premises and staff attend courses and other sessions at the Institute of Health Care, at Zammit Clapp Hospital



MMDNA's cars: THEN and NOW

and elsewhere. Training in supervision is particularly important as nurses work unsupervised, and nurses in charge of an area as well as relief nurses often have to supervise the performance of more junior staff, when these are on their day off or on leave.

Nurses are also regularly accompanied by students from the Institute of Health Care and from the Department of Gerontology of the University; an assessment report is produced at the end of the attachment on each student.

Complaints from patients are few and often petty; however, if the problem is not settled by the visiting nurse herself or on the phone, every case is investigated by a senior nurse or by the PDNO personally. On the other hand, many patients or their family go out of their way to send notes of appreciation of the service and occasionally also send money donations. MMDNA has not had a serious crisis for many years now. Like all other organisations employing qualified nurses, MMDNA finds itself with a temporary shortage of nurses from time to time. The staff is, however, a happy one and proud to belong to the MMDNA team. Each member of staff has access to the PDNO and to the

General Director and is assured of personal attention. New staff is attracted mainly by those still serving or those who had previously served with MMDNA.

Like others, MMDNA gets its share of daily problems: some arise because of poor communication between MMDNA and some hospitals and the occasional GP. Some families think that as MMDNA nurses are paid for the service they give, the patient's family should not raise a finger to help. The PDNO has often to correct this impression. Shortage of nursing stores for Department of Health patients sometimes causes difficulties.

MMDNA welcomes visitors, even at short notice. Many overseas students from various parts of the world attending courses at the International Institute on Ageing visit MMDNA and sometimes patients in their home, as part of their field work. A good number of them think that Malta is lucky to have such an organisation, non-existent in many of the countries they come from.

The MMDNA founders who sat round the table at the Palace in Valletta on 1st September 1945, would certainly be proud of the progress which their dream has made.

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