

which enables it to be in touch with its neighbour, to see with the eyes of its neighbour, to think with the thoughts of its neighbour, and so living as it were outside its own being, to have a "heart at leisure from itself to soothe and sympathise." The tact that causes a reproof to be administered only in private, can hardly be called "lies without words." The tact that does not ask troublesome questions of a tired and overworked house-surgeon, but waits till he is fresh and bright, can hardly be called "lies without words." The tact that brings the patient some little delicacy without consulting him beforehand, as to whether he will take it, is hardly "duplicity." The tact that introduces some new subject of conversation at the Nurses' table, and brightening the tired faces, stirs up a look of interest all round, is hardly "duplicity, subterfuge, or humbug." If only Nurses and Matrons, not to speak of Hospital Committees, could be provided with antennæ—those useful appendages, by which even insects are able to keep in touch with their environments—what friction might be saved in the Institution world!—Yours faithfully,

M. F. E. H.

NURSES' CERTIFICATES.

To the Editor of "The Nursing Record."

Sir,—The question of "qualifying certificates" is very important, and one which will have to be discussed before long by Hospital authorities. There are at present two classes of certificates given, one which simply states that a Nurse has completed her term of training and passed through various Wards—this gives no clue to moral character or temperament. The other class, to which "A Staff Nurse" seems to object, goes more into character and disposition. Now which of these is to be preferred? I think the former, because it simply states facts, that a Nurse was such and such a time in the Nursing School. This a "Governing Body in its official capacity" can say, and it need not be the expression of "individual opinion." But I fear we cannot escape "individual opinions," even from "paid officials." Who would take a Nurse on to their staff with such a certificate without making further inquiries? If they were well acquainted with the Hospital the certificate came from, they might know such a certificate would not be given unless the moral character and conduct had been all that it ought to be. From many Hospitals one could not be certain of this, and in cases where the working of the Hospital was unknown, further inquiries must be made, and the inquiry must be to an individual. What does a Board in its "official capacity" know about a Nurse?—Not even her name!

I hope the note by the Editor to "A Staff Nurse's" letter does not imply that he thinks character certificates out of date, but only that he has such a high opinion of the heads of the Nursing Schools, that the fact of a Nurse being two or three years in one, is sufficient guarantee of her moral character. But is it so? Superintendents of Nurses change, and as was ably pointed out in a letter to the *Nursing Record* of last week, "sufficient care and circumspection is not exercised by the governing bodies of our Hospitals in the choice of Matrons and Superintendents."

If an ideal Matron, such as Mrs. Bedford Fenwick sketched for us in her paper read last February in the Medical Society's rooms, could always be found, there

would be no need of any further certificate than one simply stating the time the Nurse had been in the school.

As things now exist, the best course seems to be to grant a certificate simply stating a Nurse has passed through her course of training, and leaving the question of moral character to be answered by other inquiries. I earnestly hope we may never see the day when a Nurse only expects to give a certificate of work, apart from character. No more fatal blow could be dealt to our profession. If characters and certificates were strictly accurate, and not given out of pity to help on some incompetent person, or to get an opening for an unsuitable woman, we should not have so many black sheep in our fold, nor should we hear so many complaints from employers of Nurses.—I am, Sir, faithfully yours,

F. A. COOPER.

[We quite agree with Miss Cooper. If she will again read our editorial note, to which she refers, she will observe that our only point was that a Certificate of Training was an entirely different affair from a "character," given equally to Nurses and domestic servants by some Workhouse Infirmary.—ED.]

NURSES AND DOCTORS.

To the Editor of "The Nursing Record."

Sir,—In the report of the meeting of B.N.A. of the 15th ult, I do not think that sufficient stress has been laid upon several important points which came under discussion. As I thoroughly agree with a "Hospital Sister," that it would be of great use to discuss Nursing matters in your Correspondence columns, I shall be obliged if you will be good enough to insert my letter. I was present at the meeting, but not being fluent of speech, did not express an opinion, much as I should like to have done so. It seemed to me as a listener, that the ladies who did discuss the paper rather misunderstood one another. I think Miss Wood made a very good suggestion, in recommending more consultation between the Doctor and Nurse as to ways and means, as in public Hospitals, from my own experience, I know that it is with the greatest difficulty that the innumerable orders sometimes given to be carried out in a few hours, for thirty or forty patients, by a limited number of Nurses, are managed at all. If the Hospital funds and accommodation were limitless, more Nurses should be provided, as suggested by Mrs. Bedford Fenwick; but this is not always possible, and the best must be made of existing arrangements. Again, how true it is all Nurses know that Nursing proper is learnt in the Wards by practice, with the aid of clinical instruction, observing cause and effect. Dr. Sturges must have been convinced from the unanimous answers in the affirmative to his question as to whether bed-side lectures were necessary and appreciated by Nurses, that we do not close eyes and ears when attending the Visiting Staff in their tour round the Ward, but deliberately pick up as much information as possible. I think if the actual disease from which every patient in the Ward was suffering was graphically explained to a Probationer, so that she could focus it as it were with her mind's eye, she would learn to carry out directions with much greater accuracy and ease. Take hip disease as an example, paint to her in simple language the exact condition of the inflamed

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