

only tend to lower the tone, deaden the sensibilities, and deteriorate the character.

But there are exceptions to all rules; and the Nurse, strong and well, is in a very different position to another, enfeebled by hard work and ill-health, or by old age. In considering the question of how to render efficient aid to the Nurse in illness, her necessities and capabilities of meeting the foe, it may be as well to divide illness into (a) temporary, and (b) chronic. It must strike every reasonable person that a Nurse suffering from temporary, acute illness, the result of overwork, strain or infection in the performance of her duties, should be entitled to the best Medical and Surgical skill the Hospital to which she is attached can procure for her; and I can say, from experience, that nowhere is she so likely to make rapid and satisfactory progress as in the Hospital where she has worked and is known—let us hope, loved and trusted. I have a pleasant recollection of a comfortable Private Ward, in which I lay for weeks, a kind Matron, an attentive Nurse, a clever Doctor, appetising food, lovely flowers, followed, in my case, by a rest at home, in others, by a transfer to a Convalescent Home, at the expense of the Hospital, where, from all accounts, every attention and kindness was received from the Matron and authorities. But whilst many Hospitals and Institutions are perfectly willing to assist Nurses, temporarily incapacitated by illness in the way I have indicated, each retains the right of disposing of the Nurse's salary as seemeth best unto them, either by withholding it altogether, or by voting only one half, or even a third, to the sufferer. Without stopping to discuss here whether such actions are entirely justifiable, it may be well to remember that many Nurses have claims on their purses which do not conveniently diminish with their inability to meet them, and so the inconvenience—often trouble—of such an arrangement is conclusively proved. It is in order to help such cases that I advocate the formation of

SICK CLUBS

amongst Nurses. Such clubs seem to flourish amongst working men; why not amongst working women? But to make them successful there must be united effort, mutual unselfish co-operation, each Nurse losing sight of her own interests, her individual good, in the desire for the general welfare. John Foster, in one of his famous speeches, said, "Society has been constituted for mutual dependence, and the improvement of mankind is destined to advance just in proportion as good men feel the responsibility for it resting on themselves as individuals." I am confident that, even supposing the B.N.A. should not be able to

accomplish its primary object—viz., the Registration of Nurses—it will have done much to infuse a more sisterly feeling amongst us; it will have helped by its meetings, perhaps more than anything else, to break down the barriers which exist amongst us, promote greater unity of feeling, of interest, so that the time may be not far off, when

"Each will find his own in all men's good,
And all men work in noble brotherhood."

But to return *à nos moutons*, the Sick Clubs. How are they to be formed and worked efficiently? Of course each club must have a President, Secretary, and Treasurer, or perhaps under certain conditions one competent person might undertake the management of all three offices. We could scarcely expect the Matrons to preside, considering the multiplicity and variety of their duties; but I do not anticipate much difficulty in finding a suitable President, perhaps among the many influential gentlemen connected with Hospitals and interested in the welfare of Nurses. I have examined many of the rules and bye-laws in already existing Sick Clubs, and have selected such as seemed best suited to our purposes, as follows:—

- I.—Payments to be made at short intervals.
- II.—An entrance fee to be paid in, to vary with the age of the member.
- III.—Members must have contributed at least three months to be eligible for sick pay.
- IV.—Members whose subscriptions are not paid up within a certain fixed period will be fined.
- V.—Contributions not returnable.
- VI.—Members eligible for sick pay must produce Doctor's certificate of ill-health.
- VII.—Members infringing the rules will, at discretion, be struck off the list and forfeit all claims and advantages of the Club.

Points which will need much consideration are:

(a) Shall all Sick Clubs be affiliated to a great Central Club in the Metropolis?

(b) Can a member who for misconduct has been struck off one Club join another? If not, how prevent it?

(c) At what time should payments to chronic cases decrease or cease altogether?

(d) Should certificates of ill-health be renewed, and how often?

Admirable as Sick Clubs may be, they will not, however, entirely compass the wants of every Nurse, and consequently I have no choice but to borrow a suggestion from the *Record*, and affiliate to the Central Club a

BENEVOLENT FUND.

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