

friends the knowledge, nor his Doctor—in his brief visits—the opportunity, of judging whether or not the Nurse performs her duties conscientiously, skilfully and well, whether she neglects this instruction, or erroneously carries out that.

The absence of supervision is, of course, in private houses quite beyond remedy. The supreme importance of the personal character and absolute trustworthiness of women engaged in such work is consequently becoming more and more clearly understood by the public. But growing from, but beyond this is the conviction, now so frequently expressed, that there should be somebody to whom every Private Nurse should be responsible for the manner in which she discharges her duties. The first outcome of this feeling is evidenced by the gradually increasing number of Nursing Institutions in connection with large Hospitals and Nurse Training Schools. We have on several occasions pointed this out as a sign of the times, and prophesied the extension of the system to every town in the kingdom. Again we do so, for this additional reason—that it will thus supply a public want, and a professional requirement, of control over, and responsibility for, the individual Nurses of such Institutions.

A second effect has undoubtedly been the movement in favour of Registration, which we are glad to know is now so nearly an accomplished fact. But although most marked improvement in the character and education of Private Nurses has in the past few years undoubtedly been effected, no good can result from an attempt to close one's eyes to the patent fact that all the ignorant usurpers of the title of Trained Nurse are now to be found in their ranks, necessarily therefore lowering the average standard of excellence, and immeasurably diminishing the popular estimation of the whole class and the entire calling.

But there is even a worse result, which has, so far as we know, never before been traced to this cause. From many inquiries, we are convinced that a very large number of gentlewomen in the profession have hitherto either declined to undertake private work, or after a short trial of its amenities have returned to an Institutional career, because they found themselves working with, or even supplanted by, women who were entirely unskilled and untrustworthy. Stories, by no means uncorroborated or unique, are told of employers surprised beyond measure that a Nurse should refuse a proffered supply of spirituous liquors, that she did not go to sleep when on night duty, or that she attended to the cleanliness of the patient and his bed and his room—such conduct, in each instance, being diametrically opposed to all their previous experiences of the habits and customs of such attendants on the sick. Small

wonder, therefore, that only those whose moral fibre is fairly tough, or whose powers of endurance are unusual, continue for long as Private Nurses.

But from the fact we have noted we deduce great consolation and foresee a rapid improvement in future. Because we believe that so soon as Registration is well established, and Nursing impostors are therefore practically banished from better class houses, it will be found that their places will be taken by many more of the best trained women in our midst. And the effect of this will necessarily be not only to raise immeasurably public trust in, and appreciation of, the Nurse's vocation, but to still further attract to this branch of the work the best of the profession. For this leads us to the next consideration—the nature of the duties allotted to a Private Nurse.

Speaking generally, it may be said that a Private Nurse has more responsibility, but less hard work, than falls to the share of her sisters engaged in public Institutions. She is, as we have previously said, necessarily free from supervision, but in dangerous cases she is therefore thrown upon her own resources and judgment. Whether, for instance, to send for and disturb an over-worked Doctor in the middle of the night, as so many patients—and so many more patients' friends—so often propose to do, or to try to calm their fears, and by simple measures tide things over until the morning, is only one of the many questions the Nurse has to solve again and again, but one which often tests all her knowledge of the progress of disease, all her judgment, and all her tact. But, beyond this, the labour of tending one patient is naturally less than that involved in nursing seven or more in a Hospital Ward; and, again, in most cases, if the work is somewhat trying and onerous at first, there is the restful time of convalescence to which to look forward. So that, altogether, it may be said that this section of the work needs less robust health and bodily strength than is essential to those engaged in Hospitals. And, on the other hand, it demands an amount of gentleness, tact, and moral courage which is not called forth in the greater and harder routine of an Institution. For the due development of all these qualities, education and refinement are conspicuously important, and consequently we believe that it will be found in the coming time that the best educated gentlewomen will prove to be the most popular and successful Private Nurses.

For other reasons we are strengthened in this conviction. Everyone is aware of the importance of our environments to our well-being in health. And the invalid is still more susceptible to the influences which surround him. It is bad enough for the highly strung nervous man or woman to be ill at all, to feel that he or she is perchance within

[previous page](#)

[next page](#)