started, it was soon evident, as your correspondent says, "that in order to succeed the Nurse must possess qualities of a rare order, quite distinct from mere technical skill or knowledge," and it was the combination of a sympathetic nature with professional skill which we found so difficult to obtain, the latter being easier to get than the former, but without it a District Nurse can make but little way. After many efforts and several changes we began to see a marked difference in the spirit in which the work was done in 1882, when a Nurse came to us who loved the poor and sympathised with them. She found after a time district work too trying, and in 1884 we were fortunate in securing the services of Nurse Elizabeth Allen, who has won the hearts of all classes by her sympathy and kindness and her high professional qualities. She was trained at King's College Hospital, and was three years at St. John's House. She has joined the B.N.A.

Our Nurse's Home has become known far beyond the limits of our parish. I had at least six applications last year as to the best means of starting one in other places. been this: the Nurse lives in a small furnished cottage with a friend; this secures her companionship congenial to her, and also preserves the position which each District Nurse should hold in the parish in which she works. There are stated hours, morning and afternooon, at which patients come to the Home for medicine or dressings; those who cannot come are visited by the Nurse at their own houses. The Nurse works with the Doctors, and if she considers a Doctor should be called in, her word is law, and unless obeyed she reports to the clergyman. She of course cannot take infectious cases, nor can she devote herself to a single case; but she sits up occasionally when the patient requires the attention of a regular Nurse, or to relieve the relatives, but this is exceptional, as night nursing necessarily involves a certain number of hours of district work. The District Nurse does not attend confinements for obvious reasons, some of which are contained in the letter already referred to.

We have always aimed at having really skilled Nurses, and from our experience I should advise no one to have any but a Certificated Nurse. District Nursing seems specially to require this, for the Nurse has to depend so much upon her own resources, she has few of the usual Hospital appliances at hand and no House Surgeon to fly to when in perplexity; she often finds her instructions neglected, and the whole sur roundings against her carrying out her duties; she has to contrive, suggest and also to try and keep up obedience to her orders, and she has to be present at operations, often performed in small cottages, where the patient has all the disadvantages of want of space and air.

Without doubt at first a District Nurse must have a great

feeling of personal isolation and individual responsibility, but the Nurse who can win her way is encouraged by the gratitude of the patients. Some have collecting cards; several subscribe regularly their four shillings and fourpence a year, whilst our richer folk subscribe annual 1,3 and the parishioners each year get up some sort of entertainment on behalf of the funds. The clergy give us an annual offertory, and so by one way and the other we get the sum we require, which is little short of £100. Our Nurse wears the ordinary Hospital uniform, and of course has to have special waterproof clothing as well as her salary, board, firing and cottage. This last is far better than lodgings; the patients prefer it, and the Nurse has the privacy which is so essential. Practically here a cottage is cheaper than lodgings would be. This last year she has paid three thousand three hundred and eighty-two visits to patients in their own homes, besides receiving visits too many to keep a record of at her own house. The aggregate population of the districts visited by her is five thousand. We laboured at first under many difficulties, and we had much prejudice to combat with, but those days have passed, and if our parish were deprived of its District Nurse I believe we should have We have a financial committee of ladies, but the a rebellion. Nurse sends a list of cases visited weekly to the clergyman.

I must apologise for the space I have occupied, but I desire that other parishes may benefit as we have done.—I am, Sir, MARY BLISS DAVIES. vours truly.

Hon. Sec. St. Mary Extra Nurse's Home, Pear Tree Green, near Southampton.

## THE GIFT OF A HUNDRED THOUSAND POUNDS. To the Editor of "The Nursing Record."

-The magnificent gift of £100,000 for a Convalescent Home induces me to ask you to find space for the following remarks on Convalescent Homes, which are the truest and most valuable of the charities, and less open to abuse. There is really not so much need of a new home as of an organisation of existing ones, as I hope to be able to show. The supply is for the present sufficient, and if the Metropolitan Asylums Board would have a Convalescent Home system added to their Hospitals for the pauper class, there would be almost a plethora of these Institutions. It is a question of great importance, however, whether large homes are as good as small ones—homely homes instead of barracks. It would seem as if there should be no difficulty in obtaining plenty of cases from the Hospitals, whose officers must be well able to judge, but in a recent inquiry amongst the Hospitals as to their use of existing convalescent establishments and the needs for organisation, it was found that some of the large, as well as some of the smaller, had made themselves masters of the subject, and had no need for more assistance. Some of the other Hospitals found the greatest difficulty in obtaining Homes for their in-patients, and it was under these circumstances that the Charity Organisation Society established their special committee on Convalescent Homes, one of the main sources of supply being, it was hoped, the out-patients of any of the London Hospitals. It was found that there was really a sufficient supply of homes for the in-patients. On opening the question of sending out-patients, very little assistance was rendered by the Hospitals. Some of them indeed, and especially one of the large Hospitals, absolutely refused to avail themselves of the good offices of the C.O.S. Through several years this has been the case, and the convalescent committee of the C.O.S. has had to obtain patients in other quarters. For some years it has sent to Homes nearly two thousand cases in one year. There is an objectionable system in many of the Homes of giving subscribers' letters, which, if they were all used, would ruin the Homes, which really have to live upon the unused letters. The C.O.S. has collected these letters, and has been most chary in using them, preferring, when their funds would allow, to pay the Homes the Were it not for want of funds it could full cost of each case. send many more. One of its first objects was to ascertain the number of Homes, and to the surprise of all connected with the subject it was found that there are about two hundred and fifty Homes already. The committee has entered into relations with all these Homes, and by its organisation it has been able to classify and send its cases to either sea-side or rural Homes, as might be recommended by the Doctors. also been done without any delay, as it has returns from each Home as to its vacancies. In no case is there a delay of more than a week, whereas the subscribers to Homes find it often six weeks before they can get a case in. It has also encouraged some Homes in suitable places, as at Brighton, to make large use of the boarding out system, which enlarges greatly their usefulness. In this way the plethora of cases in the summer is modified at the time when most wanted, and additional building is therefore not required.

A large addition to the working power of the C.O.S. would do more good than adding another large Home too full in summer and not so much wanted in winter, and it is to be hoped that it is not too late to influence the anonymous donor to make enquiries in that direction .- Your obedient servant,

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