medical and surgical cases to which every Hospital is always liable, might cause all the beds to be occupied, and might find too few Nurses to attend to their occupants. The average number of patients last year, always in the Wards, was seventy-six, but as we have pointed out, the law of averages is valueless in this matter. If, therefore, only enough Nurses be provided in this Hospital to nurse seventy-six cases, and at any one day — say through a terrible railway accident—every bed is filled, what will be done for the extra twenty-four patients? Either they must be neglected, or the ordinary Nursing Staff must be greatly overworked. We do not for a moment desire to criticise the Nursing at the From all we hear, what there is, is Infirmary. very good. Our contention is that any Hospital must be provided with Nurses in strict proportion to its available beds, and not upon the average number of patients admitted in any particular year. Our correspondents do not inform us how the Wards are arranged at the Carlisle Infirmary, and of course this is an important point in estimating the number of Nurses required for the work; but we shall be within the usual margin when we say that no woman can efficiently nurse more than six or seven patients, even if they be all in one Ward, during the day-time, nor more than fourteen, at night.

Then, on the lowest, and, as we have shown, upon an unwise, scale, an average of seventy-six patients require eleven Day Nurses and at least five Night Nurses. Sixteen Nurses, then, we may safely say, would be the very minimum number requisite for the work at the Carlisle Infirmary. But we learn that there are only nine, altogether. We will not repeat the number gravely stated to us as being on night duty, and in responsible charge, therefore, of seventy-six human beings, all more or less ill and requiring attention, because it is almost incredible. But the mere fact—which we have verified by referring to page 37 of the last Report—that there are only nine Nurses in the Infirmary, proves that it is lamentably under-nursed.

In the next place, the sleeping accommodation for the Nurses is, we are led to understand, in immediate connection with the Wards, a system discarded six years ago by most modernised Hospitals, and which cannot, upon every ground, be too emphatically condemned. We need not lay any special stress upon the necessity for alteration in this respect, because it is officially stated to be the earnest wish of the Medical Staff and

the Committee that better bed-rooms should be provided, as soon as possible, for the Nurses.

But this most essential reform has, we regret to learn, been obscured, and to some extent retarded, by an attempt to combine with it a new scheme—the provision of Private and District Nurses for the richer and poorer classes outside the walls of the Infirmary. Nay, more, we are even informed that this latter scheme is being so eagerly advocated as, in a large measure, to thwart the efforts of those who are desirous to make reforms which are necessary in the present organisation, before attempting to carry out any fresh measure. Now we yield to no one in our admiration of the useful work which District Nurses perform for the community, and we strongly approve of Private Nursing Institutions being affiliated with the local Hospital, because we believe that such a course is advantageous, both to Nurses and to the public. But, in the present case, there appears, to our minds, to be the gravest objections to the scheme in question, and these are strengthened by the very arguments employed by its promoters.

The first duty of the Carlisle Infirmary is towards the sick poor admitted into its Wards, but it also has obligations to its employées. present, as we have shown, its Nursing Staff is far too small. Either its patients, therefore, do not receive all the care and attention which should be bestowed upon them, or its Nurses are completely overworked. Indeed, we fail to understand what happens to the patients when the Nurses are off duty, for we presume they are absent from their Wards for meals and recreation during certain hours every day. The primary need, therefore, is for an increase in the number of the Nursing Staff, especially in the number placed upon night duty. Justice before generosity is an accepted aphorism, and we cannot understand how the Committee of the Carlisle Infirmary can hesitate for a moment as to the clear path which lies before them. They plead that an increase in the number of Nurses means increased bedroom accommodation, and both mean greater funds than they possess. They plead that some of their most influential subscribers are actively advocating the establishment of a Private Nursing Staff for the richer classes, but cannot be brought to see the necessity of increasing the attendants for the sick poor inside the Hospital. With all due deference to the Committee, we consider that their duty is simple and very easily defined. If the Bishop of Carlisle

Loeflund's Alpine Milk Rusks (ground) ensure the most perfect development of bone and muscle in growing children from 6 months to 2 years of age. Prevents rickets, sourry, and ensures healthy progress at the most critical period. Invaluable to total part of the control of t in teething. 1s. 6d. R. Baelz and Co., 14-20, St. Mary Axe, E.C.

Loeflund's Hordeum Compounds.—C. Pepsin (in dyspepsia), c. iron in chlorosis, anaemia, jaundice, pleasant and digestible for ladies and children), c. Quinine (an excellent tonic in neumalgia, nervous headache, and debility), C. Lime (—hypophosphit, in rickets, scrofulosis, very digestible). 3s. 6d. R. Baelz and Co., 14·20, St. Mary Axe, E.C.

previous page next page