

domestic friction, and that the Sisters would probably soon be at daggers drawn; while the Matron would either be at war with both, or an absolute nonentity in the Hospital which she was presumed to superintend. And this seems to have been the case. One of the Medical Staff is reported in the local papers to have said that "the Hospital was not carried on harmoniously under the 1887 arrangement. Nurses would sit at table without speaking to each other, and sided with the different 'Sisters' in their feuds." And so things went on from bad to worse until, as our contemporary, *The Lowestoft Journal*, neatly puts it: "The President was jealous of the Committee, the Committee was jealous of the Matron, the Medical Staff was jealous of the Matron, the Matron was jealous of the Committee and the Medical Staff, the Sisters were jealous of each other and of the Matron, and the Nurses to keep the pot boiling were jealous of each other, of the opposition Sister, and the Matron." Now, the initial mistake is quite evident to any unprejudiced observer. In every Hospital there must be one responsible head, and in a small Institution there is even a greater necessity for this than in a large one. It is an accepted aphorism that a woman must be placed in control of the female Staff, and, at this date, there is no necessity to quote Miss NIGHTINGALE'S well-known words on the subject. In a Hospital of thirty beds, the Matron must either be the Head Nurse or a mere figure-head. If she is to be the latter, we say, without hesitation, that it is a waste of public money to appoint a Matron at all.

But, so far as we can learn, such was the position of affairs when a new Matron was appointed in November, 1890—a lady who, we find, has had wide experience, and earned golden opinions from those with whom she had previously worked. She took office under the Rules of the Hospital, one of which distinctly states that the control of the Nursing Department is committed entirely to the Matron, subject, of course, to the approval of the Committee. It appears that she was never told of the Regulation passed in 1887, as to the two Sisters, and it is manifest that, if this be so, she was bound by the Hospital Rules alone. After a few months' experience of the Nursing volcano, it seems that the Matron proposed a radical re-organisation by abolishing one of the Sister's posts, and thus removing the probability of future jealousy and discord. To this, how-

ever, the Committee and two of the Medical Staff objected, and the consideration and discussion seem to have been continuing for some months. Finally, the Matron took her stand on the grounds that she was appointed by the Committee under the Rules of the Hospital; that those Rules distinctly gave her the full control of the female Staff, and that if her hands were tied by abstract Regulations which, in practice, she believed to be detrimental to her department, she could not be responsible for its efficient working. She therefore offered her resignation, and this was accepted by the Committee. Thereupon, the President resigned his post on the ground that the Committee had no right to over-ride the Bye-laws of the Institution by Regulations of their own. The Governors met, and in the result requested the President to withdraw his resignation, and expressed their opinion that there was no necessity to alter the Bye-laws relating to the Matron's duties. In other words, the Governors hold that the Matron should have the entire control of the Nursing Staff, which it is quite evident she has not had under the Regulation passed by the Committee in 1887.

Now, it is clear to us that the President and the Matron were entirely justified in their action on the cardinal ground that the Bye-laws of the Institution gave her an authority which was nullified by the Regulation of the Committee. It is equally clear that the Committee, who have full control over the Matron, were quite justified in passing Resolutions concerning her duties so long as they did not thereby stultify the integrity of the Bye-laws; but it is certain that neither they nor the two members of the Medical Staff realised the inherent difficulties of working a small Hospital with the least division of authority over the small female staff. Finally, there is no doubt that, in theory, and in a large Hospital, the Doctors' demand for a trained Sister in charge of each Ward was excellent, and would have been conducive to discipline also, if each Sister had had fifty patients, four Staff Nurses, and six Probationers on day duty, under her charge; and had, moreover, had a Matron who could only visit the Wards for five minutes each day. Under the existing conditions at the Lowestoft Hospital, we feel confident that the scheme was, and always will be, doomed to fail.

We would suggest that Lowestoft, and, indeed most Hospitals would gain greatly by forming a Nursing Committee on which the Medical Staff, the Matron, and three or four of the Committee

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