observed, to superintend the serving of the meals, and see that there is no waste of food, and to report all irregularities to the Head Nurse; (4) to pay careful attention to the condition and symptoms of their patients and report the same to the Head Nurse."

DR. FULLER one of the inspectors sent lately by the Local Government Board to inspect the Bath Workhouse Infirmary—reports as follows:

"There are no night Nurses. The day Nursing staff is insufficient. The Nurses delegate too many duties connected with the care of the sick to the ward assistants, who are incapable of understanding even the common rudiments of sick Nursing. As a natural sequence, at night, poulticing where required, care and cleanliness of the helpless and bedridden, and the administration of food and medicine to acute cases in stated quantities at stated intervals, are entirely neglected. Bedridden cases were not sufficiently well cared for, and where beds were wet and dirty, the draw sheets were not changed sufficiently often; mackintoshes are of poor quality and not waterproof. There is not a sufficiency of movable washing basins, towels, brushes, and combs in any of the wards. There are no moveable baths for use for the bedridden cases: there should be one on each floor (male and female sides) where there are bedridden cases. There are no bathing regulations hung up anywhere. The wards are no bathing regulations hung up anywhere. The wards generally speaking were ill-kept and dirty, particularly on the male side. Most of the sick wards are wanting in that bright and cheery appearance, which adds so much to the comfort and convalescence of the sick. This I particularly remarked in the ward when I found acute cases such as rheumatic fever. In nearly all the wards the windows are too high from the floor and too small. Most of the wards to high from the floor and too small. Most of the wards to the wards to the same and require cleaning and remainting. I understood this was to require cleaning and repainting. I understood this was to be done. In my opinion spring mattress bedsteads should be universally adopted in the sick wards. There is not a sufficiency of cupboards, especially on the femaleside, in which to keep crockery-ware, which at present is frequently kept on the stairs or in other unsuitable places. There are no cupboards in which the patients' medicines, lotions, &c., could be kept under lock and key and only administered under the direct supervision of a trained Nurse. There is no hot water taid on to any of the bathrooms in the sick ward; it has all to be carried from the "copper" house on the ground floor. In my opinion the Guardians will be well advised if they lay on a hot water supply to all the wards. There are too few duty kitchens for the wards, and those that do exist are inconveniently placed, too small and unsuitable for keeping food in. These require cleaning and painting. A urinal should be provided in the men's airing yards. I condemn most unhesitatingly the practice of keeping milk anywhere in or out of the wards, as at present; the practice being unwholesome and unhealthy. A sufficient number of service kitchens should be made available, and some provision made in the should be made available, and some provision made in the shape of suitable lockers to keep the mugs and milk in after it has been served out to each patient. The midwifery ward is most unsatisfactory in all respects. There is no labour ward. There should be a labour ward and a lying-in-ward entirely separate, neither of which should be used for any ordinary sick cases. The Nurse in charge of these wards should not by any chance have charge of or attend upon any surgical, infectious, or contagious cases."

In the official letter accompanying the report the Local Government Board, through the assistant secretary, said :-

"The conclusion at which Dr. FULLER arrived is that the Nursing staff at the Workhouse should consist of a Superintendent Nurse and a minimum number of eight Nurses, one of whom should be fully certified in midwifery, two of the Nurses acting as night Nurses. The Board fully concur in the view that the Nursing Staff should be increased

as Dr. Fuller suggests; and they request the Guardians will give this matter their consideration, as well as the several other matters referred to in this communication, and inform the Board of the result. I am directed to add that it appears to the Board that the time which Mr. CRADDOCK has given to his duties as medical officer of the Workhouse cannot be regarded as adequate, and they must request that his attention may be directed to this matter. The Board also gather from their Inspector's observations that there has been a want of due care on the part of Mr. CRADDOCK in describing the diseases of the patients, and they request that his attention may be called to this matter also."

The Board referred the report to a special committee.

OLLENDORFF, the Parisian publisher, will soon issue "Souvenirs de Sebastopol, recueillis et redigés par S. M. T. Alexander III., Empereur de Russie." The Parisian journal, Revue Bleue, has had access to the advance sheets and publishes two stories from the forthcoming book, entitled "Recit d'un Officier" and "Recit d'une Sœur de Charité," the second of which has been translated as follows:

"For the first time in my life (says the Sister of Mercy), I assisted at an amputation. A soldier's leg was to be cut off. They gave him chloroform, but not enough. The surgeon was in a hurry; he had more arms and legs to cut off, yet he could not get through before the poor fellow revived and uttered an agonizing cry. I recited silently a prayer for him. Another Sister asked the surgeon to give some worse chloroform, but he refused to do it. Fortunately. prayer for him. Another Sister asked the surgeon to give some more chloroform, but he refused to do it. Fortunately the operation was soon finished. When the unfortunate soldier breathed freely he said to me: 'It was well that you prayed for me. I felt better for it. But how about my leg? They will dismiss me; how shall I get home? Wonder if I find any of my folks alive! I have now been sixteen years in the service; perhaps they are dead in the village. I left a wife and two children . . . fine boys they were . . .'

At this moment a bomb whistled through the air and exploded outside. Two officers were struck down and one badly wounded. He was carried into the operating room, but nothing could be done for him. He expired immediately.

In the night of March 24th, the evening's bombardment became so violent and uninterrupted that the shriek of the shrapnels, the whistling of the bombs, and the deafening noise of the bursting of shells furnished music as if from a cathedral organ. Every moment they carried in the wounded, most of them horribly mutilated, yet all quite composed and resigned. An officer whose skull was broken could yet speak. resigned. An officer whose skull was broken could yet speak. He asked for a cup of tea, which I gave him. He drank it and died.

I passed by many beds on which lay poor mutilated men. The most extraordinary sight I saw and ever expect to witness was this. A physician pointed me to a soldier on a bed from whom they had cut both arms and legs, and that without the use of chloroform. The man had his senses and was perfectly conscious. He had lost both arms in Bastion No. 3. When they had amputated them and were making his bed ready, a shell burst in the window, right over his couch, and tore off both his legs above the knee. He then passed

and tore on both his legs above the knee. He then passed through the second operation.

'Ah! my friend,' said the surgeon to him afterward, 'how do you do? Do you feel a little better?'

'This is bad business,' said the wounded man in a low voice, which clearly enough proved terrible sufferings.

'Pray to God,' said the physician, 'and may He have mercy upon you.'

previous page next page