they all state either that it is a rule never to inquire into the religious persuasion of their officers, or that the fact of a Nurse being a Roman Catholic would be no objection or obstacle to being a Roman Catholic would be no objection or obstacle to her appointment. Several mention that there are Nurses of that faith on their staff. It may interest Miss Wilson to have the names of these twenty-four unions which are thus free from religious bigotry:—Stepney, Hampstead, Lewisham, Mile End, Strand, City of London, Wandsworth, Whitechapel, Woolwich, Bethnal-Green, Chelsea, Fulham, St. George's-in-the East, St. George's, Hanover Square, St. Giles-in-the-Fields, Greenwich, Islington, Kensington, Lambeth St. Olave's Paddington, St. Pancras, Poplar, and beth, St. Olave's, Paddington, St. Pancras, Poplar, and Shoredith.

"In view of this long list of London Unions which impose no religious test, I think the Nursing Association would do well to withdraw, or at any rate relax, their rule against the training of Roman Catholic Nurses. It is possible, of course, that in practice some of the Boards will prove less tolerant than they represent themselves to be. If however, the Association meets with any case in which a Roman Catholic candidate for an appointment is rejected on the ground of her religion, I shall be very glad to call attention to it, and a little wholesome public criticism will doubtless bring the offending Bumbles to a more reasonable state of mind." offending Bumbles to a more reasonable state of mind.

Miss Emily Aston, who has now completed her first year's superintendence of the Strangers' Hospital, at Rio de Janeiro, lately presented the following report to the Directors. It will be read with interest by fellow-members of the R.B.N.A.:-

"Gentlemen,—I have the honour to present the following report as to the work and general condition of the Nursing Staff of the Hospital.

From November 1893 to January 1894, the staff consisted of seven members, a Matron and six Sisters.

Towards the end of January one sister resigned and re-

turned to England.

During these months there were very few applications from outside for Nurses.

Four cases only were nursed in their own home. the epidemic of yellow-fever began to be felt it was doubtless realized that the staff would be fully occupied, and could not be spared for duties apart from the Hospital.

As may be supposed, the staff I have mentioned, seven members, is too many for the usual work of the Hospital, but in the fever season it is hardly adequate to the needs of

For fever nursing the modern theory is that the Nurses so employed should have short hours on duty, and much outdoor exercise. This, during the months of the epidemic, was not possible, for the difficulty, always present in places where Training Schools for Nurses do not exist, maintained here, and competent help could not be obtained when here, and competent help could not be obtained when needed. But as the majority of the patients were attached to the Mercantile Marine, and had contracted yellow-fever under conditions not likely to be repeated, the same experience may not arise, and therefore need not be provided for.

During the epidemic much useful work was done by our own household staff.

Without the aid of some members, who undertook in the most kindly spirit various additional duties, the work generally could not have been efficiently carried through by the Nursing Staff.

Between February and April there were six cases of illness amongst the staff, of which two proved fatal, one, unfor-tunately, being Miss Clayton, a most valued and efficient

Towards the end of March a Sister, whose health had suffered from the long tropical summer, was recommended to return to England.

Later, another Sister resigned her appointment and left to be married.

The Staff now consists of the Matron and two Sisters. As you are aware, it is proposed that four Sisters should be chosen through the instrumentality of an influential member

of the Royal British Nurses' Association.

These ladies should leave England as soon as the necessary preliminaries are arranged, and should, in any case, be ready for the season when, according to previous experience, an increased number of patients may be expected, and when additional help will therefore be acceptable.

It would be unfitting to close this report without an expression of gratitude to the Physician-in-Charge, Dr. Pandeira for the assiduous attention he has bestowed upon

Bandeira, for the assiduous attention he has bestowed upon the Hospital generally, and for the courteous manner in which he has assisted the administration.

WE have lately received a letter from an experienced Nurse from Calcutta. She says, referring to the letter we published some time ago from a lady in Bombay:

"The letter written by the Nurse in Bombay, saying in her opinion Nurses were not required, was a great mistake if referring to the whole of India, which is a very large place. My experience in Calcutta is that good Nurses are greatly needed, and very much in the tea gardens up by Darjeeling and in the indigo districts. But they must be able to go out for Rs. 100 or Rs. 150 a month. I have no difficulty in certain my Rs. 200 a month, and from seven to ten runees a day for short periods; the ladies out here are only too thankful to get a lady Nurse, who at the same time is a companion to them. I have worked so hard that I have been forced to take a holiday from time to time; for when I am working, I do not get the chance of 12 hours' rest before I am taken I do not get the chance of 12 hours' rest before I am taken for another case; and, indeed, it often happens that when your patient is getting convalescent, the doctor comes and borrows you for another case for the night, who is in high fever and requires constant sponging. I was at a case from Thursday noon until Monday night 10 p.m., on duty the whole time, no sleep to speak of as there was no lady in the house to take duty during the day, and with the greatest difficulty I got a Nurse for Monday night, and was able to go to bed and take the rest I sadly needed. There are a few good Nurses out here; but the generality of them are not very satisfactory. One patient of mine told me, 'I don't like being washed by the other Nurse (who was my help); she dabs the sponge about you in an aimless sort of way, gives like being washed by the other Nurse (who was my help); she dabs the sponge about you in an aimless sort of way, gives a few strokes, and it is finished. The wash does not comfort one, and one has to bear all the discomfort of going through the proceeding.' She is one of the conscientious ones. The Nurses out here have a great dislike—or it may be from a sense of modesty—to wash a male patient; and as to the examination of the excretions, they never think of doing it, and can only give a brief account of it by saying it is 'copious' or 'small.' I read with intense interest the Nursing Record, and note the improvements which are going on, and often wish I were at Home to help in the great work and take an active I were at Home to help in the great work and take an active part in it. I am glad the R.B.N.A. bazaar is not to be held until December, as my box of contributions will thus arrive in time."

Reduction of Munson Typewriter prices from £21 to £12 12s., our Odell Typewriter reduced to 63s., particulars of both free.—LINK SHELL TRUSS Co., Surgical Instrument Makers,

The Link Shell Truss Co., 17x, Wardour Street, London, W., have a new truss; it is claimed that by this method of manufacture a truss is provided which will be more comfortable than the one in ordinary use and better able to adapt itself to the various movements of the body, especially if these are of a sudden character. The truss is fitted with a hip-joint regulator by means of which the pressure is increased or diminished as required and with a soft hollow shell pad perforated for ventilation. The Truss as thus completed is an efficient one.—Lancet, August 4th, 1804. ventilation. The August 4th, 1894.

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