

decline to allow our names to appear, as we feel strongly that it would injure us professionally and socially were we to allow our names and qualifications to be inserted in an *unofficial* directory."

THE Chelsea Guardians are progressive in theory, but easily influenced. It will be remembered they recently advertised for a second medical officer at the Infirmary, and distinctly stated that a woman would be eligible. Two admirable candidates applied—Miss Christie, M.B. London, and Miss Green, L.R.C.P. and S., Edinburgh, and L.M., Rotunda, Dublin. There was only one man among the applicants, and his degree was not so good as that of Miss Christie.

Miss Christie was called in, and said if appointed she would not leave within a year at least. She had friends at Kensington, so was near home. Mr. Guscott then asked: "Are you likely to soon get married?" (Laughter.) The Chairman: "That is a question that can hardly be allowed." The candidate blushed deeply at Mr. Guscott's query. Miss Green gave a similar undertaking with respect to staying. Mr. Brass moved that Miss Christie be appointed, as she had the highest degree. Mr. Doll moved that Mr. Charles Shaw Bond, the only other candidate, be appointed. Mr. Jeffery said in justice to the Nurses who were being trained at the Infirmary they should appoint a lady. It would redound to the Board's credit if the motion was carried, for Miss Christie was just the sort of woman they ought to have. Mr. Roddis said he had asked the Nurses if they would like a lady, and they said No, they would prefer a man. (Loud laughter.) The amendment was then put. The voting was even—8 to 8. The Chairman said the invidious duty was cast on him of giving the casting vote. Mr. Jeffery appealed to him sincerely to consider his vote. The Chairman said he was opposed to lady doctors in this case, and would, therefore, give his casting vote in favour of Mr. Bond.

It appears to us that the Nurses of the Chelsea Infirmary should be afforded an opportunity of saying whether the feeling against a medical woman was unanimous on their part or not. It is incredible that all the Nurses should show such antipathy to one of their own sex, and we are strongly of opinion that it exhibits a painful want of discipline in the Nursing department of the Chelsea Infirmary, that Nurses should venture to influence the Guardians concerning the appointment of a medical officer. Information has reached us for some time past concerning

the internal organisation of the Chelsea Infirmary, and it seems to be well known that on all Nursing questions the Guardians are "lobbied" and influenced long before the meetings, at which these subjects are to be decided. The Guardians should look to it that they are not made puppets of. And the Nurses should pause before they are persuaded to adopt the most unprofessional attitude of interference in purely medical matters. Such action can only recoil on themselves, and cause every medical man and well-trained Nurse to condemn them.

AT the last meeting of the Grimsby Hospital it was announced that one Nurse was down with typhoid, another with diphtheria, and a third with scarlet fever. Later on, the serious state of the Hospital drainage was brought out—so cause and effect are shown together.

ST. PATRICK'S Day was celebrated in many Hospitals where Irish Nurses are among the staff by the "wearing of the green" shamrock, tied up with narrow emerald ribbon. Among the navy and docker patients in the East End of London were many patriotic sons of the Green Isle, who did not forget to nail their colours to the mast, or rather, to pin them to their bed-jackets! It is not common in the Hospitals, as in some Army regiments, to forbid the pretty little emblem of patriotic feeling to be displayed, and certainly no harm has ever been known to result from so innocent a custom.

A SCOTCH correspondent writes expressing disapproval of the County Nursing Scheme inaugurated in Sutherlandshire—stating that these so-called Nurses "have absolutely no Hospital training," and only from three to six months' maternity and district training, and she considers it very undesirable that these inexperienced Nurses should be sent to a County where "doctors are few and far between."

The fact is that we Scotch people, if slow, are thorough, and we do not like makeshifts. The Scottish Branch of the Queen Victoria Jubilee Institute has, from its inception, consistently progressed on the most conscientious lines, until at present, but little remains to do to make the "Queen's Nurses" in Scotland synonymous with a "thoroughly-trained" Nurse. This great work, starting as it did from a somewhat low standard in England, has not been accomplished without incessant labour and devotion to a high ideal of what a "Queen's Nurse" should mean, by those who have organised the Scottish Branch. We can but hope

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