defects in the nursing arrangements at the Western Infirmary, and also two or three points of hospital etiquette, which we consider of sufficient importance to discuss. In answer to the question, "Can you say anything in regard to the nursing difficulty?" Professor MacEwen replies:—

"I have seen the statement of the managers, and in answer I have to say that when I entered the Western Infirmary the nursing arrangements were very imperfect. In the first place, the nurses who had been on duty with the patients during the night were not present at the visit of the surgeons in the morning. We, therefore, could not receive at first hand any statement from the nurse about the condition of the patient. A written statement may supply a good deal of information, but everyone will understand that a few questions put to a nurse might elicit important facts which a written statement would be unlikely to contain. I tried to make arrangements to have the hours of the night nurses changed, so that I could have the opportunity of seeing them if the occasion arose; and after much trouble that was agreed to. With regard to the special difficulty which occasioned With regard to the special difficulty which occasioned my application to the Board, it arose from the fact that we had a series of very heavy cases which had been received in rapid succession, and in each of which operation was necessary. There were in my ward at the time, beside other patients, thirty-one patients who were absolutely helpless in bed, and required the constant attention of the nursing staff. In addition, I had occasion to demand special nurses. In addition, I had occasion to demand special nurses. In the first place, there was the case of a child on whom a serious operation had been performed. The child had a rash which resembled scarlet fever, but which none of the experts called in could definitely pronounce scarlet fever. In any case, the operation which had been performed rendered it impossible for the child to be removed without great risk. It was further stated that were the child transferred to Belvidere and it was afterwards found that she did not suffer from fever, the likelihood was that she would have taken fever and died. It was, therefore, absolutely necessary that the patient should be isolated, and she consequently required a night and a day Another case requiring special attention was one of gastrostomy—opening of the stomach. There were two cases of removal of the kidneys, one of strangulated hernia and delirium, a case of fracture of the skull and brain damage (for of fracture of the skull and brain damage (10) which an operation had to be performed), a case of internal wound of the lung and delirium, and a patient with severe wound of the knee joint, in a critical condition. All these were cases in which special nursing was required. There are many similar cases in which has such precessing or a property or the condition. in which no such necessity arises. Everything depends upon the nature of the case and the condition of the patient. But in all the cases I have enumerated special nursing was imperative. I found it impossible to get a sufficient number of nurses to look after these patients without overtaxing the staff. Two nurses were kept on duty practically for twenty-four hours, were kept on duty practically for twenty-four hours, with a break of two or three hours. The Sister had been on special duty for several days running, from 8 a.m., till 1 a.m. on the following day. The house surgeons, owing to the gravity of the cases, divided one of the nights between them, watching several of the patients who were in a serious condition. I myself remained for several hours with one of the patients. While we were in that position a case of intestinal

obstruction was operated upon, and although we had made application for another nurse, no nurse was forthcoming. The application was repeatedly made and steadily refused. The reply always was that there were no more nurses, that the accommodation was full, and that that must be the end of it. I asked if a nurse could not be got in from the outside if the house nurses were all engaged, and I was informed that that could not be allowed. Still I persisted, and I was directed by the superintendent to go to the managers if I was not satisfied. I accordingly saw several of the managers, and asked them to permit me to get in nurses from the outside for the time being, and I would pay them out of my own pocket, but the managers also declined to allow me to make any such arrangement. As a result of my complaint, however, I was called before the board and asked to submit my statement. Before I had got through my statement, I was stopped by the chairman, who said that really the time of the directors must be considered, and that they wished to hear the other side of the case from the superintendent. At that meeting I asked the question whether the superintendent believed it to be his duty to decide when a special nurse was required, or whether that should be left to the judgment of the surgeon. This question was objected to by a prominent medical member of the board. I put the question in another form, but the same gentleman interposed, and did not permit of a reply. I then asked the board if they would instruct reply. I then asked the board if they would instruct me whether it was my duty or the duty of the superintendent to say when a special nurse was required. That question was also objected to by the same member, and remains unanswered to the present day. Not a single member of the board made an attempt to assist me out of this difficulty. A committee was subsequently appointed to inquire into my complaint. The decision of that committee was embodied in the statement of the managers published the other day. I desire to reiterate that I was only permitted to lay half of my complaint before the board; and to state that while the sub-committee put many questions to other officials and to the superintendent, they never asked me a single question. Upon the data which they obtained in this way, they founded the reply which they sent to me. I thought it was usual, when a committee was appointed to make an inquiry, that they should take evidence from both sides. This subshould take evidence from both sides. committee failed to do so, and I cannot see how they can affirm that the supply of nurses was adequate. I repeat that it was inadequate, and that the well-being of the patients was endangered by the inadequacy. The necessity, as I have explained, was one of a special nature. An emergency had arisen, and I asked for nurses to meet the emergency. The directors, in their reply, made no reference to the emergency; they went off into the general question of how many nurses should be supplied for a certain number of patients. On that point it must be obvious to everyone that the question depends upon the condition of the patients, and not upon the mere number of the patients, and not upon the mere number of the patients, or even altogether upon the special diseases under which they suffer. One may have a ward full of patients that require very little attention; on the other hand, occasions may occur in which one might require a day and a nigh nurse for a large proportion of the patients on account of the gravity of the several cases. I have said that there were thirty-one patients in the wards who were utterly helpless, and if only the everyday needs of a patient so confined to bed are considered it will be previous page next page