

been placed there at all has already been proved by the results of the removal. The children were in this block of buildings a little over three weeks. During that time there were actually fifteen deaths among thirty-two patients—an appalling rate of mortality when it is remembered that the normal mortality from measles is only from two to twelve per cent. The children were removed in consequence of an urgent report by the medical superintendent; and since that time the mortality has fallen to ten per cent. In the face of this fact, can it be denied that the deaths of a large number of the children lie at the door of their so-called 'Guardians'?"

There must be no shilly-shallying by the Local Government Board over this matter, and nothing will satisfy the public conscience but a thorough investigation into the management of the Camberwell Infirmary.

It is inevitable that, before the new order of the Local Government Board with regard to the appointment of trained superintendent nurses in workhouse infirmaries comes into force, there must be a certain amount of friction entailed in carrying out this wise and necessary regulation. Quite half of the newspapers we take up at the present time contain paragraphs dealing with one or another instance of this difficulty, and many Boards of Guardians are struggling for the old bad system of allowing an untrained matron to supervise trained nurses. Obviously, if Guardians desire one person to combine the office of matron and superintendent of nursing, they should appoint a trained nurse as matron of the workhouse; but, failing this qualification, it is quite as much out of place to make the matron of the workhouse responsible for the nursing department as it would be to appoint the master as medical superintendent. Setting aside the incongruity and unsuitability of the arrangement, and the fact that the best class of nurses will never place themselves in such an invidious position, the condition is one which invariably lends itself to friction, and in the interests of all concerned we hope that the Local Government Board will resolutely enforce the order with regard to trained superintendent nurses.

As an instance of the difficulties which arise between an untrained matron and a trained nurse we may mention that a Local Government Board inquiry is already being held into the relations between the matron of the Conway Workhouse and the newly appointed nurse. The nurse on being sworn gave evidence that the matron told her she must have her meals with the porter and the servants, that she had given an old woman some sewing to do, and that the matron shouted, so that all the inmates could hear, "You go and nurse the sick—that is your work—and leave me to employ the women." The nurse also described how a woman suffering from chronic rheumatism and confined entirely to bed, was ordered up by the matron and scolded for not complying; and that on a cold night

the matron had caused a blind woman, very scantily clad, to be carried downstairs by a woman, also scantily clad, whose temperature at the time was 102°. The matron complained that the nurse had insulted her about "wearing fine feathers," that she interfered with the management of the non-sick inmates; and annoyed and ignored her as matron of the house.

As we surmised the key-note of the Glasgow Western Infirmary dispute resounds on the question of nursing, and it is in the satisfactory solution of the nursing question that harmony will be regained. At the annual meeting of qualified contributors held last Friday, the Managers, according to the local press, triumphed all along the line; their balance-sheet was satisfactory, and their nominees were elected, but no satisfactory settlement of the questions under dispute were proposed. The fact is, that in depriving Professor MacEwen of one ward, the Managers have made a false step, as they thus interfere with the arrangements for efficient surgical treatment upon the part of the *Surgeon responsible for the lives of the patients*, by leaving him only one ward for all classes of male surgical patients. It is thus impossible that serious operation cases can obtain the necessary quiet, without which they are not placed in the best possible position for recovery. Accident and Operation Wards should be quite distinct. The sooner, therefore, Professor MacEwen states officially that under the present arrangements he cannot be responsible for the lives of the patients the better. In justice to himself he has a right to disclaim responsibility for a course of action upon the part of the Directors, which is unjust both to the patients and himself.

THE *Glasgow Herald* teems with correspondence in reference to the dispute in question, and referring to the fact that the large majority of the medical staff have failed to support their colleague Professor MacEwen, we consider the opinions of "Cynicus" on their letter to the Directors pertinent to the occasion:—

"Surely"—he writes—"the certificate of good conduct awarded the managers and superintendent of above institution must be regarded as one of the most curious, if not the most satisfying documents which the dispute with Professor MacEwen has brought out. But I must confess being struck with amazement at the singular want of dignity displayed by the management in accepting, possibly also after solicitation, such a testimonial from members of their staff. "*Qui s'excuse s'accuse*," and it can only be from a felt need of exculpation they could humiliate themselves to seek and publish, as they have done through their secretary, anything of the kind. But of what value is it? Those signing are all interested parties, and gratitude has been described as a lively sense of favours to come. And even eminent physicians and surgeons have been known to act not quite disinterestedly. Those certifying may not be bad boys, like Professor MacEwen, and may wish to dissociate themselves from

[previous page](#)

[next page](#)