

mercy; our contention being that a maternity nurse should be taught her work in the wards of a lying-in hospital, under the constant supervision of the trained Sister and medical man, and that no woman, who is not so trained, should be permitted to attend the poor in their own homes, any more than they should attend the rich.

BUT, unless Mr. Pepyat Evans can prove that the nurses sent to attend on cases of diphtheria, pneumonia, bronchitis, typhoid fever, and surgical cases, have been trained in general hospitals, he has made a very serious admission concerning the management of the Plaistow Maternity Home, and one concerning which the public has a right to still further information.

WE cull the following paragraph from *Reynold's Newspaper*:—"A deputation of ladies interested in nursing is about to wait on Princess Christian, requesting her to address a circular to the matrons of all the principal hospitals, asking nurses to discard their uniform when not on duty. It is about time something of the kind was done. At the present moment, the character of the hospital nurse is seriously at stake, simply because a number of women, other than nurses, adopt the uniform for its becoming nature. Thus it is a common thing to hear the hospital nurse referred to in anything but flattering terms, with the result that the profession suffers."

WE own that it is very annoying to find nursing uniform adopted by untrained women, and we fear for questionable purposes. But no man of the world mistakes a modest woman for a woman on the streets. The remedy remains with the nursing profession. If trained nurses appear neat and clean in nursing uniform, avoiding odds and ends, such as coloured shoes and white veils, open-work stockings, and flaring white aprons (we have seen these incongruities in conjunction with a nurse's cloak and bonnet) and also if they would be careful to brush their cloaks and bonnets, occasionally, we feel sure they would pass along the street unobserved. We should be very sorry to see the day when trained nurses discard their neat costume to arrive at private houses in sailor hats and blouses.

WE constantly receive information of difficulties in arranging for the nursing of monthly cases—as in nine cases out of ten the little stranger does not make its appearance just at the convenient time—and under these circumstances monthly nurses find themselves in financial difficulties.

For instance, a nurse is engaged from the 1st October, having arranged to leave her former case in the third week in September, when she receives

an unwelcome summons to case number two before the expiration of the term agreed upon with number one. She is unable to take the second case in time, another nurse is called in, and the patient refuses to pay the first nurse her fee, so that the latter is very often out of work for several weeks, and is consequently at very serious loss.

WHAT should be done under these circumstances, is a question often asked, and it is very difficult to answer. It appears to us most fair, for both patient and nurse, that the engagement should be made in writing, including a clause that, should it become necessary to engage another nurse, a certain sum will be given to the nurse first engaged, so that she should not suffer serious financial loss. We have known many excellent nurses give up monthly nursing because of the constant worry and uncertainty in connection with lying-in cases.

WE are not surprised that the rules which have been recently enforced, with regard to the Nursing Sisters attending plague patients in Calcutta, have been somewhat severely commented upon by the press. We quite agree with our correspondent, whose letter we publish in another column, that it is very difficult for those at home to understand the peculiar circumstances for which regulations have to be made in other countries. At the same time, we think, the principle of placing the Nursing Sisters under the control of the doctor (whether male or female) a wrong one. The trained Superintendent, who should always be responsible for the discipline of any body of nurses, is ignored by this arrangement, and the Sisters, who are responsible to the doctor for the care of the sick, are also held accountable to her for their personal conduct, giving her, therefore, a position of almost absolute control with regard to them. We suggested, when nurses were first sent out to India on plague duty, that a Superintendent of nurses, should be appointed. The Sisters in all well-managed hospitals, at home, are responsible to such a Superintendent on all matters, not relating to the carrying out of medical orders with regard to the sick. No hospital could be efficiently conducted on any other lines. We are still of opinion that it would make for discipline, and consequently for the reputation of the India Office with regard to its nursing staff, that a Superintendent of Nursing Sisters on plague duty should be appointed in each Presidency, as in the case in the Indian Army Service, and that the Sisters should hold themselves responsible to these Superintendents. This is an arrangement which the Sisters would understand and appreciate, for, after all, most nurses prefer discipline to latitude.

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