

the world. Every medical officer of the Hospital received a small honorarium. The honorarium, he need not say, was in no proportion to the services rendered. It was impossible to exaggerate the value of these services. The greatest willingness and skill were shown. He congratulated the Senior Physician on the great honour which had fallen to his lot. To the Nursing Staff also they owed a great debt. They were always losing their nurses, some by marriage—and they had their best wishes,—some by promotion. They were sorry to lose them, but they would not stand in their way. Where ever they went they would always carry with them the *imprimatur* of the hospital training.

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THIS praise must be pleasant to a nursing staff, and we have no doubt it is well deserved in many instances; but the poor journalists observe in the reports of the speeches of hospital managers that they always remark that their own nurses "are the best in the world." It is good to know there are no second-rate nurses in our professional ranks—all the same, we hope the nurses will not be content, but be ever anxious to prove the kind words of their treasurers and medical staffs by attempting to become "the best."

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THE annual report of St. John's House, Norfolk Street, Strand, recently published, records the death of Nurse Leckie, who had been on pension since 1884, having worked for St. John's House since 1861. Nurse Leckie used to tell with some pride of having nursed small-pox in Westminster at a time when the black flag was flying to warn people of the danger.

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WE also learn from the report that the "Daily Visit" scheme started last year has been found to answer very well. One doctor spoke of the possibility of getting a nurse for daily visits for patients in hotels as "the greatest boon he had ever known in his medical career."

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WE have been gratified by receiving the thanks of Mrs. Currie, the President of the Midwives' Society of Manchester, for "so fairly representing the Society's affairs through the columns of the NURSING RECORD."

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MRS. CURRIE has received the following letter from Mr. E. F. G. Hatch, M.P. for Gorton:—"Your petition, as advised in your letter of the 28th March, from the members of the Midwives' Society, has been duly laid before the House of Commons. I shall be only too happy to promote the objects of your Society when opportunity offers." The Manchester midwives are strongly

opposed to the Bill for Licensing instead of Registering midwives, at present before Parliament, as they are of opinion that, professionally, and personally, it places them in an absolutely defenceless position in relation to the proposed control of the local medical practitioners.

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WE have already pointed out that the Bill proposes legislation tampering most dangerously with the liberty of the subject, and we hope it will be materially modified before it becomes law. No Board to control any class of women workers should be accepted by them unless members of their own sex and profession have seats thereon and share the control of their own affairs. The action of the General Medical Council which we report in another column is a great step in the right direction.

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THE Sub-Committee of the Peace Conference for adapting the Geneva Convention to maritime warfare has made some practical recommendations on this subject. Thus members were unanimous in holding that in all coming conflicts between two groups of sea Powers, the lines of hostile ironclads would be necessarily reinforced by large and well-equipped fleets of hospital ships for the treatment of the wounded. One delegate remarked that if after the bombardment of Alexandria, which was, comparatively speaking, child's play, the British squadron possessed hardly a single boat in a condition to devote itself to care of the injured, the state of things after really heavy fighting would be positively heartrending. Hence the imperative need of a hospital fleet.

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THE conditions suggested are that all hospital boats will be treated as neutral upon their fulfilling certain conditions. Their number and names must be announced beforehand to both belligerents, they must be attached to one fleet, with the consent of the admiral in command, and must have been inspected by the other side.

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HOSPITAL ships must not station themselves in the front line of battle, but remain well behind until the signal is hoisted for them to advance. If captured, they will continue their humane work as before under the protection of the captor.

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WELL worth recording is the observation made by several delegates that all the rules and regulations discussed by them originated in the unexpressed but deeply rooted belief that Continental sea Powers would draw their supply of floating hospitals mainly from various "societies of succour recognized by the signatory Governments," whereas Great Britain would equip herself

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