

The resignation of Dr. Calder Leith, the Hon. Secretary of the non-existent Scottish Branch, was reported, after holding office for six years, during which period he failed to gather in half-a-dozen nurse members, for which we learn that:—"The cordial thanks of the Association are due to Dr. Calder Leith for the services rendered by him in this connection"! His successor was *not* appointed.

A Sub-Committee, formed to consider the question of admitting attendants trained in institutions for the insane to registration and membership, have met on several occasions, but have not yet completed a full report. It is to be laid before the General Council in April. We doubt if even the oligarchy at the Royal British Nurses' Association will again dare to suggest to place persons who are not trained nurses on the roll of members, with full privileges, for the sake of augmenting their dwindling income; but as the best class of certificated nurses have ceased to associate themselves with the Royal British Nurses' Association, it is not of much consequence to the profession what is done now. No doubt the whirligig of time will bring round its own revenges, and the Royal Charter, granted upon the earnest plea of trained nurses, will be used by them for the purpose for which it was given.

It is an open secret that most determined efforts have, of late, been made *sub rosa*, by the Hon. Officers of the Royal British Nurses' Association, to repair some of their unpopularity and loss of prestige at home, by absorbing, by means of affiliation, the Colonial Associations of Nurses, notably the Australasian Association. For this purpose, new and more elastic Regulations have been drawn up for Colonial Branches, granting some amount of Home Rule, but still retaining a large percentage of the fees. Somehow, in this arrangement, the reciprocity appears to us "all on one side," and as the Australasian Association has been founded on a basis of complete self-government, we have no doubt it will be found necessary to retain the fees available to prosecute the admirable aims of the Society.

So long as the Heads of leading Training Schools, and our certificated graduates at home, decline to support the present management of the Royal British Nurses' Association, we should strongly advise Colonial Nurses not to be persuaded to bolster up the discredited oligarchy which at present governs the Royal British Nurses' Association with whip and spur.

To quote again from the official organ, during the last three months only 25 new members have

joined the Association, but 15 have withdrawn, so that, with two deaths, the nett gain of membership is 8 for the quarter, or at the rate of 32 a year! In the first four years of its inception, nearly 3,000 members joined, and we well remember one day in which 80 applications for membership were received.

If the nursing profession is true to itself, we shall see again the same enthusiasm.

The Domestic Department.

LETTERS in the daily press still show that the untrained, as well as the trained, women of England are desirous of proceeding to South Africa to take their share in nursing back to health those of our soldiers who have been incapacitated by wounds or disease during the present war. The desire is patriotic and laudable, but the fact that women whose only qualification is their wish to make themselves useful to the Sisters, and carry out their instructions with regard to the care of the sick, can suppose that services of this kind are what are required in the stress and strain of the present time, shows how little the public have as yet grasped what a highly specialized calling nursing is, and how essential is a thorough training in order to qualify a person to render effective service. What is needed in the Army Hospitals at the present time is, not willing and untrained persons—for it would take the Sisters quite as long to teach them to do the work as to do it themselves—but qualified women who will work under them as staff nurses, and form the link which is at present missing between the Ward Sister, and the orderly who should hold the position of probationer.

There is a department in the Army Hospitals, it is true, which might well be filled by practical women with a knowledge of domestic management—that is the care of the linen and domestic department. In all large hospitals at home there is an Assistant Matron, or Home Sister—often both—whose work it is to supervise and keep in order the large and valuable stocks of linen necessary for the use of a large institution, and to maintain efficiently the domestic department of the Nurses' Home. Besides these officials, several linen-room maids are, as a rule, employed. In this department, for which we see no provision made, either in the General Hospitals of 500 beds, or on the staff of the Yeomanry Hospital, practical women might find most useful occupation, but the care of the sick must be left to those whose knowledge qualifies them to undertake this serious responsibility.

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