

Some ten or twelve years ago, a member of this Council first drew public attention to the need of an Army Nursing Reserve, and the present scheme, though radically altered, is the outcome of it. The first step in its reconstruction, if it is to be of any value on future occasions, is to transfer it into a branch of the Army Medical Department, with a Nurse Superintendent at its head, and the responsibility, as in the case of the Army Nursing Service, in the hands of the Government.

A lay Committee may work with all the will in the world according to its lights, but in time of war all nursing effort must be under the control of the War Office, and to ensure peaceful and orderly working this must also be so in time of peace. The change cannot suddenly be made in a moment when feelings are excited, and the country in a ferment; the scheme must be calmly and professionally thought out and organized in time of peace, and then, in time of stress, we shall have an efficient, well disciplined, and workable body to put in the field.

Until the last week we heard, on all sides, the comfortable assurance, "The sick have never been so well attended to in any previous war." I would have replied then, as I do now, they *should* have been attended to far better.

The devotion of the nurses has been beyond all praise, but they are woefully understaffed, and lamentably handicapped by want of order and discipline. In London Hospitals where the nursing is really well done, the proportion of nurses to patients is, one nurse to $2\frac{3}{4}$ patients. In South Africa there are now 22,000 sick and 600 nurses, viz., one nurse to $32\frac{3}{4}$ patients, and the most of them enterics! Now, I do not for a moment suggest that in war, Field and Base Hospitals should have a staff comparable to a Civil Hospital, but surely the difference between 3 and 36 is rather too much!

Had the scene of war been divided into districts, each in charge of a competent Nurse Superintendent, she would have been able to more accurately estimate the number required, to more adequately arrange for necessary conveniences in the execution of their work, and being herself responsible, would promptly have returned to their former sphere of usefulness, any, and in a large community there must of necessity be some, who, by their conduct or incapacity, seemed unlikely to uphold the honour of their profession.

In conclusion, the point I wish to bring before you strongly is that, in all Institutions where the different departments are carried on satisfactorily and efficiently, the head of each department is in direct communication, and is responsible to

the Governing Body. But to do this effectually, the representative of each department *must* be an *expert* in that department, and must be entrusted with sufficient authority to give effect to her position. I therefore beg to move the following Resolution:—

"That this meeting considers that all Government offices dealing with the nursing of the sick should be organized on an efficient professional basis, and should include a nursing department, the management of which should be under the direction of a trained and certificated nurse. Further, that a curriculum of education and standard of proficiency should be defined for members of the Army Nursing Service."

DISCUSSION.

The resolution proposed by Mrs. Andrews was seconded by Miss Emmie Lofts, Matron, Lewisham Infirmary.

MISS MOLLETT: I should like to ask if the figures which Mrs. Andrews has given us include the male orderlies, or if they refer only to the female nursing staff.

MRS. ANDREWS: They refer only to the female nurses. The male orderlies, as training is understood nowadays, cannot be considered "trained nurses."

MISS MOLLETT: I am quite of opinion that the men should be thoroughly trained, but I think it will always be a necessity to have a certain proportion of men in army hospitals.

MRS. BEDFORD FENWICK: In supporting the resolution proposed by Mrs. Andrews, I heartily endorse the principle of professional representation for nurses in all Government offices dealing with the sick, and the time has come when some trained and experienced woman should be appointed as an Executive Head, with power to organize the Nursing Department. Army nursing affairs at the front have brought the urgent necessity of such a reform clearly before us, and it is deeply to be deplored that the organization of the Army Nursing Service Reserve, chiefly through the influence of a medical man, who knows nothing of military nursing affairs, was instrumental in excluding the trained Matrons who brought the necessity for such a service before the British Nurses Association, from all participation in its organization. The expert knowledge and help of these Matrons was necessary for the formation of a successful scheme of Army Nursing Reform, and the country is now suffering from amateur control of professional affairs in the nursing of our sick and wounded soldiers.

If the suggestion made by Mrs. Andrews is carried out, the great principle will be admitted by Governmental Departments dealing with the sick, that nurses have a right to participate in the management of their own professional affairs. And this is what we need, and ask for. It is this efficient professional organization and control which is wanted in South Africa at the present time, and which I have no hesitation in saying, would, if it had been utilised prior to the war, have been the means of saving hundreds of valuable lives, and also untold suffering amongst our brave troops.

Moreover in selecting persons for the Commission of Investigation now under consideration by the Government, into the statements made by Mr. Burdett-Coutts,

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