

to save time; when a man is ill, you cannot wait for routine; as a matter of fact, I was expressly told they had the drugs in store in the hospitals, but they could not be got at."

Mr. Kipling gathered the impression that dysentery and enteric patients were not so welcome in the military hospitals as the wounded—there was no enthusiasm about nursing enterics. They were long and troublesome cases. "There was not much heroism about enterics."

When Mr. Kipling went back to the Cape, "There were more and more enterics, the hospitals were clean, and every one was working very hard; but there was always this quiet complaint about the excessive slowness of getting at anything in the stores."

Mr. Kipling gave a parting shot in answer to the question, "You did not go to Woodstock Hospital?" "No. The air was foul and the place was simply unspeakable. The drains ran out there, and the place stank."

Colonel Mulcahy, who is in charge of the Royal Army Clothing Department, said, in a lordly fashion, that "pyjamas are not recognised in the Army. A flannel shirt and a pair of drawers were used instead of pyjamas for walking about in. There were no deficiencies in these things. The pyjamas were not approved by the medical authorities at home."

We wonder upon what grounds. From personal experience of military nursing, we consider them absolutely indispensable for the maintenance of decency.

Lieut.-Col. F. Barrow, principal medical officer of No. 9 General Hospital at Bloemfontein, was lost in admiration of the arrangements made for the sick and wounded. "He never saw a thing more splendidly done by the Government, and goodness knew what the bill would be—it would be a big bill." We tax-payers know that, and are naturally anxious to know that our money has been spent to the best advantage.

Lieut.-Col. Barrow did not see Mr. Burdett-Coutts at No. 9 Hospital. If he had—well, from the tone of his answer, it is not improbable that the Member for Westminster would never have lived "to tell the tale."

We gather one thing from the evidence already before the Commission, and that is the triumph through good and evil report of the trained female nurse in military nursing.

## Nursing Echoes.

\* \* \* *All communications must be duly authenticated with name and address, not for publication, but as evidence of good faith, and should be addressed to the Editor, 20, Upper Wimpole Street, W.*



IN Dr. Toogood's able paper, read at the Matrons' Council Conference, and which we publish in full in this issue, the statement is made that there is a tendency, on the part of the leaders of the nursing world, to encourage insubordination to medical authority, and in support of this assertion Dr. Toogood quotes the NURSING RECORD.

WE must point out that this is entirely a misconception. We have invariably upheld the absolute responsibility and, therefore, authority of the medical man in relation to all matters affecting the treatment of the sick. As the Superintendent of Nursing of one of our largest training schools, we always insisted upon medical directions being carried out to the letter, and this attitude we have consistently maintained ever since. But when the personal discipline and control of nurses is assumed by medical men, it is a different matter. We do not believe that they should be invested with this power, and we have not hesitated to say so. These should be in the hands of the trained Superintendent of Nursing, and it has been abundantly proved that where this is the rule, both in institutions where this official is held directly responsible to the Committee for the discipline of the nurses and the efficiency of the nursing, and in those Poor Law Infirmaries where she holds this position by the courtesy of the Medical Superintendent—who relegates to her his undoubted rights in this respect, under the present Local Government Board regulations—there the nursing is best performed. We hold that, as there can be no responsibility without adequate authority, the power necessary to secure the efficient nursing of the sick should be vested in the Superintendent of Nurses. We further hold that, in their professional associations, nurses should have the right and the power to discuss and adjudicate upon their own affairs. The authority of the medical man ceases, or should cease outside the door of the sick room. Inside the responsibility is his and the nurse is there to carry out his instructions. The better trained the nurse, the more faithfully she does so. It is the half-trained and ignorant

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