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at that time. Knowing the danger of interfering with the dietary of the sick, she had always been most careful in this matter, and consulted the nurses and the diet sheet.

"THE SURGEON-GENERAL BE BLOWED."

Then there came an amusing episode in reference to tobacco. Had not the P.M.O. forbidden her to give tobacco to the sick? "Well! no, not exactly. She had supplies of tobacco and cigarettes. On one occasion he expressed, through the second-in-command, his wish to distribute her supplies. She preferred to distribute them herself, and wrote to this effect." Here the President cruelly unpinned a letter from his papers, handed it across to Mrs. Chamberlain, who read it, smiled, and owned it was "an exact copy of a private letter." "Then you did write," put in the President, with evident satisfaction, "the Surgeon-General be blowed—I am going to give cigarettes to the men on Sunday." The reporters tittered.

"And did she not persist in visiting the hospital after she had been forbidden to do so?" "On three occasions only when specially

"On three occasions only, when specially sent for by certain patients. This, she considered she had a right to do, especially taking into consideration the condition of the night nursing. A very painful circumstance had occurred, which had never been cleared up, where an officer was reported to have died of hæmorrhage and *alone* in the night."

Finally the President made it clear that an order had been obtained from Lord Roberts forbidding Mrs. Chamberlain to enter the hospital.

THE REASONS WHY.

Mrs. Chamberlain then criticised the management—or, rather, the mismanagement—of No. 1 Hospital, Wynberg, under various headings—its general state of disorganization—classification of patients—lack of appliances—nursing—housekeeping—sanitary arrangements—opposition to recreation for convalescents—and the treatment of lunatics.

DISORGANIZATION.

Mrs. Chamberlain said the "whole place was in a horrible muddle, and there was neither method nor organization. Both the wards and beds were very dirty, and it was infested with vermin, especially bugs, every bed having its little 'bug-catcher' underneath."

THE CONVOYS.

The diseases of sick men coming down from the front in convoys were not sufficiently classified before they were placed in bed. This could easily have been done at the station—the result being that cases of dysentery, enteric and wounds were placed in the same ambulance, and were not placed in the right wards at once, with the result that in many instances the patients had to be removed from bed to bed, which was highly improper treatment for enteric cases.

LACK OF APPLIANCES.

The hospital authorities were short of all necessary utensils; and appliances such as splints were not prepared in anticipation. When questioned how she knew the supply was short, she replied, "Because I saw makeshifts used." Cups and saucers, feeders and bed-pans, aircushions, water-beds and hot-water bottles, sheets, pillows, wraps, etc., were terribly short. She had spent \pounds 500 in supplying water-beds, cushions, hot-water bottles, etc. This lack of necessaries went on for months. There was a hopeless insufficiency until she provided them. Everything was short excepting stimulants and drugs.

We may here remark that goods to the value of $\pounds 40,000$, and $\pounds 5,000$ in cash, were contributed by Mrs. Chamberlain and her friends to the relief of suffering in South Africa.

NURSING.

The chief deficiency in the whole organization was the need of nurses. She believed at one time that there was only one Nursing Sister to about 175 patients, and this was the more deplorable because Cape Town was full of certificated nurses ready and willing to work. No woman can do more than a certain amount of nursing well, and the fact that the Superintendent Sister, whose time should have been employed supervising was deputed to take charge of a large ward, and thus could not superintend, was a very serious matter.

THE ORDERLIES.

Mrs. Chamberlain considered there was an ample supply of orderlies—had they been working on a sensible system—but she condemned the "posting" of orderlies on a two hours' shift on night duty. Patients could not receive systematic attention, under the two-hours' "posting" system. The men, moreover, being weary with day duty, were only half awake, and could give no consecutive report of the treatment to the medical officer; and "had she been running the hospital, she would have had the orderlies on alternate day or night duty for at least six hours at a stretch."



