

Nursing Echoes.

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We note with satisfaction that the unanimous report of the Special Committee of the Hampstead Guardians on the nursing department recommends that the administration of the Infirmary should be placed in the hands of the Medical Officer, and the Nursing Superintendent, thereby raising the status of these officers and relieving the Master of a great deal of responsibility. The report was approved, so we may hope that the nursing arrangements at Hampstead will shortly be reconstructed on this basis.

Lord Lindley, Judge of Appeal and late Master of the Rolls, has been advocating, at a meeting held at Hillington, Norfolk, the employment of young women with six months' training as cottage nurses. He said that "to train a young woman as a cottage nurse was not easy. The difficulty lay in the fact that as she was trained her expectations and her standard of living rose; and there was a danger that she might become 'too big for her shoes.' Having found a likely person—if she had been out to service and knew a little of housemaid's work so much the better—she had to be trained, and experience showed that at least six months training was required. Less was useless, and if she had more there was a danger that she would not settle to the work of a 'cottage help' which was what a cottage nurse was, and it was, he thought, a better description. A certain amount of midwifery training was necessary, but care must be taken to impress upon the nurses that they must not act without medical superintendence and to see that they did not set themselves up as midwives."

With Lord Lindley's remarks as to "cottage helps" we are in cordial agreement, for the rest they appear to us an apt illustration of the proverb "cobbler stick to thy last," and to prove that even learned judges may be hopelessly ignorant on nursing matters. Would Lord Lindley trust himself to the nursing care of a woman who "knew a little of housemaid's work," and whose nursing knowledge was confined to the smattering of general and midwifery nursing which she had picked up in six months? Why should well-

meaning philanthropists offer to the poor an article which they would not accept themselves? And how can they justify themselves in flooding the country with ignorant "nurses"? Those who realize the grave responsibilities which devolve upon the nursing profession are striving to organize methods of education which shall produce nurses equally efficient both for the rich and the poor.

In view of the pious hope expressed by the Rev. Dr. Delaney, S.J., at the 66th Session of St. Vincent's Hospital, Stephen's Green, Dublin, that the "trained nurse would never supersede the religious nurse at the bedside of the patient," it seems pertinent to enquire whether this gentleman considers the word trained is synonymous with that of irreligious. There are many trained nurses who are essentially religious women, and while taking up the work of their profession from the highest motives, conscientiously qualify themselves by an arduous training for its great responsibilities. The so-called "religious" nurse, on the contrary, not unfrequently assumes that the fact of her religion dispenses her from the obligation of undergoing the necessary training. This has always appeared to us, as it must, indeed, do to all unbiased persons to be a most arrogant and unwarrantable assumption. No amount of "religion" will nullify the harm done by a cold poultice, or save the life which is ebbing from a bleeding artery which only skilled fingers can compress. Let women cease once and for all to demand a right to care for the sick because they are religious, and urge their claim only on the score of professional fitness. A religious character will then, in many instances, be deeply appreciated.

The Parliamentary Blue Book for the Dominion of Canada containing the supplementary Report on the organization, equipment, despatch, and service of the Canadian Contingent during the war in South Africa, includes two most interesting reports from the head nurses of the two Canadian contingents, Miss Georgina F. Pope, and Miss D. Harcomb, of the work performed by these contingents. We wish our space would permit us to publish these reports in full, but we must content ourselves giving some extracts from the one made by Miss Pope.

Miss Pope reports that the first contingent arrived at Cape Town in November, 1899, and was welcomed by a committee of the Red Cross, and the Surgeon-in-Chief of the New Somerset Hospital, Cape Town. The latter brought an invitation to the Sisters from the Matron of the

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