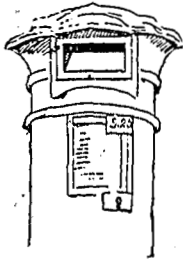


**Letters to the Editor.**

NOTES, QUERIES. &c.



*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in any way hold ourselves responsible for the opinions expressed by our correspondents*

**SECT OR FAITH.**

*To the Editor of the "Nursing Record."*

DEAR MADAM,—I have before me Application Forms issued by several hospitals to would-be Probationers, and in every one a question asking to what religious denomination the candidate belongs is inserted. As all these institutions pose as non-sectarian, and accept money from persons of every sect of faith, is it necessary that such an inquiry should be made in the Form—and why is it done?

Yours truly,  
APPLICANT.

[We are aware that such a question will be found in most nurses' application forms, and no doubt it is a survival of the time when many hospitals were decidedly sectarian. Moreover, as there are usually regulations about forms and times of prayer in hospitals the answer enables the authorities to acquaint applicants who are Roman Catholics with such rules, so that they may decide for themselves if they can conform to them. This difficulty does not arise in Roman Catholic Hospitals because women of other sects are disqualified for admission.—ED.]

**PRIVATE NURSES IN THE WARDS.**

*To the Editor of the "Nursing Record."*

MADAM,—The letter from "Pillar to Post" brought out points interesting to many private nurses attached to hospitals, where they are utilised for ward work between their cases. It appears to me, and I speak from personal experience, an entirely wrong system, and one open to many abuses, the question of over-tiring the private nurse being the most important, as she should be sent quite fresh and well rested to a paying patient. It is not fair to send a woman to a critical private case who has done a long tiring day's work in the wards, and this happened in my own case times without number. It was no uncommon thing for a nurse to work in the general ward from 7 a.m. to 9.20 p.m. (with two hours off), and then to be ordered off to an urgent private case. The nurse arrives, and has, of course, to sit up all night, and often to prepare for an operation to take place next morning, and, as we all know, the days and nights following she gets little rest or sleep. If hospitals use the private nurses for ward work between cases there should be a strict rule that no nurse should be sent out without a night in bed; it is neither just to nurse nor private case. But as you know, nurses who have the courage to object to these sorts of arrangements are written down as selfish and difficult, and are sure to suffer for it one way or another. This is a matter Committees should enquire into, and if a table of the

private nurses' work was kept, and submitted weekly to the board, such things might be discontinued.

Yours faithfully,  
Co-op.

**BOARD LADIES.**

*To the Editor of the "Nursing Record."*

DEAR MADAM,—I do hope that there will be a wide expression of opinion upon the part of the RECORD readers on the question of "Board Ladies." Mrs. Robb's paper is full of interest, but it appears to me, from all I hear, that the position of Matrons in England is a very different one to that of a Superintendent of Nurses in the States. I cannot agree with Mrs. Robb that a Matron requires "board ladies" to help her with the details of her work—surely such help must be interference—and must weaken the Matron's authority in the Hospital and Home. At the same time I am fully in sympathy with placing sensible women on Hospital Boards *with men*. They have a right to be there, and could do no end of good—women are much more progressive than men—and the work of Miss Louisa Stevenson, in Edinburgh, proves that women grasp nursing organisation, and nurses' professional matters, much more clearly than the majority of men. What male director on the Board of Management of the Royal Infirmary, Edinburgh, has mastered the State Registration question as Miss Stevenson has done? Not one! Therefore give women authority on the general boards of management with men, but don't permit them to do the Matron's work, or we shall have confusion worst confounded. British temperaments are not so suave as American.

Yours,  
A SCOTCH MATRON.

**THE MATRON-IN-CHIEF.**

*To the Editor of the "Nursing Record."*

DEAR MADAM,—I have read with interest for years all that has appeared in THE NURSING RECORD in reference to Army Nursing Reform, and the future workers in the proposed New Imperial Army Nursing Service owe you an immense debt of gratitude for the dogged persistence with which you have kept the need of such reform before the public. The proposal to have a Matron-in-Chief with a seat on the Advisory Board of the Army Medical Service, seems such an immense step forward that one can hardly realise its significance when first reading over the report. It is the biggest concession we nurses have ever had granted us, and now that we are to have so much responsibility for the new system of Army nursing, it is sincerely to be hoped that the women selected to represent our interests will really grasp the situation and rise to the occasion. It is no good having timorous women like those who sold us over the new Bye Laws at medical dictation in the Royal British Nurses' Association. There are several items in the new programme which require modification, and should be put straight before the new order of things is inaugurated.

Yours very truly,  
A MEMBER OF THE ARMY NURSING RESERVE.

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