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Editorial.

THE PUBLIC AND PRIVATE NURSES.

The nursing profession at the present day is subjected to considerable criticism from the public, who appear to regard the assistance of trained nurses in times of serious illness as a necessity indeed, but rather in the light of a necessary evil than as a real boon. It is evident that the public must form its opinion of nurses mainly from those with whom it is brought into direct contact—namely, those who undertake private nursing. It is therefore well to consider whether the fault lies in ourselves or in the public that complaints are so frequently heard.

In the first place it is obvious that it is unfair to judge a profession, except by its duly accredited members. Are the employers of nurses always careful to require that the nurses they employ shall hold the certificates of good general training schools? By no means. On the contrary, they frequently employ those who can show no such professional credentials, and whose training would be held by any well-trained nurse a wholly inadequate qualification for the responsibilities undertaken. It is surely unfair, therefore, when a woman so employed proves unsatisfactory, to blame, for her shortcomings, a profession which does not recognise her credentials. But again, the public may plead that in the stress of acute illness it cannot spend time in investigating credentials, but must accept nurses recommended to it on what appears to be a reliable authority. There is a certain amount of justification in this plea. But, what does the public do, when no such stress exists, to ensure that in the future it may be possessed of an official list of all nurses who have passed through a minimum curriculum, and have been judged worthy of certification by the school which trained them after years of residence—during which time

their professional knowledge has been tested, and their personal qualities appraised? To the credit of nurses, it must be said that the campaign to protect the public from unqualified women has been originated and carried on by nurses themselves, while, with some notable exceptions, the public in time of health has shown itself indifferent to the need for the issue of a legal Register which would at once afford information as to all nurses holding a recognised qualification, and from which the untrained would be excluded. It is well also to consider whether, at the present time, the conditions under which private nurses work are such as to attract the best stamp of nurse to their ranks. There can be no question that, whilst on carefully-selected private nursing staffs admirable women, competent professionally, and personally unselfish, high-minded, and devoted, are to be found; yet with many well-trained nurses private nursing work is unpopular. We do not believe the reason for this is to be found in the longer and more irregular hours which are the rule in this branch of work, or in the preference of nurses to look after many patients instead of one, although after the active life of a hospital ward the practical confinement to one room, inseparable from private nursing, is trying to many nurses. But what does make this branch of work unpopular is that comparatively so few members of the public appreciate the professional side of nursing; or the professional position of the nurse. In a public institution a nurse has a definite status, and work well done is understood and appreciated. In a private house, on the other hand, her best work is often unrecognised and her position ill-defined. To a great extent the public have the remedy for the ills of which they complain in their own hands. If the conditions under which they work are congenial to them as professional women, the best class of nurses will increasingly undertake private nursing work.

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