

## The King's Sanatorium.

We should advise all nurses to read the three essays on the erection of a Sanatorium in England for Tuberculosis which gained the prizes of £500, £200 and £100 respectively, offered by the approval of the King, for the best essays and plans sent in to His Majesty's Advisory Committee appointed to deal with the erection in England of a Sanatorium for 100 tuberculous patients.

The essays which were sent in to the Advisory Committee numbered 180. Those which secured the prizes were written by:—

1. Dr. Arthur Latham, Assistant Physician at St. George's Hospital, and at the Brompton Hospital for Consumption and Diseases of the Chest; with whom is associated as architect Mr. A. William West, Deputy Treasurer of St. George's Hospital.

2. Dr. F. J. Wethered, Assistant Physician at the Middlesex Hospital, and at the Brompton Hospital for Consumption, with whom are associated as architects, Messrs. Law and Allen; and

3. Dr. E. C. Morland, late Assistant Medical Officer Alderney Manor Sanatorium, and House Physician St. Bartholomew's Hospital, with whom is associated as architect Mr. Geoffrey Morland.

These three essays are published in full in the *Lancet* of January 3rd, and nurses will do well to procure and study this number. It is quite impossible in the space at our command to do more than direct the most cursory notice to the many points raised. Dr. Latham's essay, from a medical point of view, is of extreme brilliance. The historical introduction shows that twenty-five centuries ago Hippocrates wrote that tuberculosis was a curable affection, and details how contumely and persecution were meted out by their professional brethren to those practitioners who, in the last century, in advance of their day, endeavoured to introduce methods now universally accepted in the treatment of tuberculosis. But, exceedingly interesting as it is, from a nursing point of view we must own that we find the essay very disappointing. Skilled nursing is so important an agent in the cure of tuberculosis that it is greatly to be regretted that the terms governing the competition did not provide that the writer of the essay should associate with himself a trained nurse as well as an architect, and the same defect is observable in the composition of the Advisory Committee which adjudicated the prizes. We do not hesitate to say that from a nursing point of view all the essays are wanting. As Dr. Latham points out, the number of nurses required depends largely on the character of the cases admitted. At the same time we cannot consider that ten nurses (including the Matron) are a sufficient ordinary staff

for a hundred patients at any stage of the disease. It must be remembered that the patients are all in separate rooms, that sudden emergencies are very liable to occur, and that the staff is needed for night as well as day duty.

Neither can we approve Dr. Latham's suggestion that the nurses should dine with the convalescent cases, to "ensure the necessary discipline being maintained." Certainly they should supervise the patients' meals, but, for the short time devoted to their own, they should be away from duty; moreover, surely the crockery, cutlery, and plate used by the nurses should be absolutely distinct from that used by patients suffering from an infectious disease, even if they are convalescent. The last reason advocated by Dr. Latham for this plan is one which fails to carry conviction, namely, that the nurses "can relieve the servants of a considerable amount of work." It is a pity that so able an essay should be marred by the insufficiency of the suggested nursing arrangements.

But the glaring inadequacy of the nursing arrangements proposed by Dr. Wethered, of Middlesex Hospital, would certainly, had there been a trained nurse on the Advisory Committee, have gone far to disqualify his essay and plans. He proposes as a nursing staff for this hospital of one hundred beds, for night and day duty, a Matron and six nurses, and provides extra sleeping accommodation for only one nurse. The total insufficiency of such a staff is at once apparent to anyone who understands what is involved in modern nursing. Further, we must own to some surprise that the architects with whom Dr. Wethered associated himself permitted him to place the nurses' sitting-room just opposite the common kitchen, in the domestic block, and their dining-room door directly opposite that of the lavatory. In his plans for the accommodation of the Matron, Dr. Wethered provides her with no office in the administrative block in which she can discharge her official duties, and places her residential rooms on the first floor next to the patients' bedrooms, her dining room being just opposite the lavatory annexe for the well-to-do patients.

Dr. Morland, we are glad to note, provides for the accommodation of the Matron in the administrative block, and also arranges a Nurses' Home. He suggests that the regular nursing staff should be ten in number, including a Sister, "who will be responsible for the nursing generally," assist at operations, and accompany the Superintendent on his rounds; six day nurses, two for each wing, one for the annexe, and one for special surgical work; three night nurses; and, in addition, accommodation must, he says, be provided for one or two special nurses for bad cases, and a nurse may be required for the isolation block. These suggestions show some appreciation of the value of trained nursing;

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