

Surely the Guardians did not appoint a nurse without having obtained these credentials.

As a nation, expensive materials, extravagant use of them, and indifferent results are characteristic of our attempts at cooking. Even the cook who asks and obtains high wages frequently sends up a dinner deficient in the application of the most elementary principles of the science and art of cooking. Invalids, to whom nourishing and appetising food is of the utmost importance, are frequently supplied with viands which are neither one nor the other. Hence the need for an organised system of invalid kitchens, such as exists in Berlin and, according to a contemporary, delivers by motor-car hot soups, beef-tea, meat jellies, cooling drinks, milk puddings, fish, and other light and appetising dishes, at prices which bring them within the reach of the poorest of the community. The scheme was inaugurated by Frau von Rath, who, a little over three years ago, opened the first Krankenküche, or kitchen for invalids, at 10, Brüderstrasse. Anything, from a new-laid egg to the wing of a chicken, may be obtained for invalids from the kitchen. Sixteen branch depôts have been organised to cope with the demand for invalid cookery, the supplies being carried to them from the central kitchen by motor-cars. So great has been the success of the kitchen that similar establishments have been opened at Aix-la-Chapelle, Bonn, Vienna, and elsewhere.

A writer in the *Cape Times*, while appreciating the excellent work done at the New Somerset Hospital by the resident surgeon, Dr. Moffat, and the Matron, Miss Child, regrets that the long leave of the nurses on Sunday from 2 p.m. to 10 p.m. should have been stopped, the reason given being "that a nurse must not be on duty alone in a ward."

The reason appears to us to be an excellent one, as it is a cardinal rule of good nursing that one nurse should not be left on duty alone, with no one to help with helpless patients or to summon medical assistance if necessary. No doubt when the present Matron has had more time to re-organise the nursing department, and gains the confidence of the Committee, she may find it necessary and possible to increase the nursing staff, and once more grant long leave. Meanwhile, the nurses should put the welfare of the patients first and accept the present regulation in a cheerful spirit.

Miss Mary M. Riddle, for seventeen years connected with the Boston City Hospital, U.S.A., and recently Matron of South Department, has resigned to accept the position made vacant by the resignation of Miss McDowell at the Newton Hospital, Mass. Both Miss Riddle and Miss McDowell, who was trained at the London Hospital, took a prominent part in the Nursing Congress at Buffalo.

The Hospital World.

THE REBUILDING OF BART'S.

Of the making of plans for the rebuilding of "Bart's" there is no end; indeed, we hear that already more than a dozen sets of plans have been drawn by all and sundry—lay, medical, and other persons, who seemingly consider themselves quite qualified to give "expert" advice on this question.

St. Bartholomew's Hospital Journal for the current month reproduces no less than nine of these plans—all, as far as we can gather, more or less defective from an unprejudiced point of view. But for absolute inefficiency commend us to those "fathered" by Sir Henry Burdett in his paper, and reproduced with his consent.

To prove our contention. Take Plan 8, which shows the fan-shaped piece of ground now available for building purposes, and it will be at once observed that the five blocks of ward buildings are all crammed into the least airy part of the ground, jutting out to within 15 ft. of the boundary between the hospital and the land bought by the Post Office for erecting new blocks, presumably 80 ft. high, as are those already built.

Sir Henry proposes to build the hospital blocks 75 ft. high, and only 95 ft. apart (the ideal standard being twice the width between pavilions of their height). Balconies are placed on the extreme end of the pavilions, presumably for the patients to enjoy light and air; it would be interesting to know how much sunlight and air they will find at their disposal, say on the lower floors, chock-a-block of Post Office masonry 80 ft. high! The result of this plan would be to create well-like apertures in which the stagnant air would speedily become pestilential.

Then, how about the Isolation Block, plumped down just inside the present Little Britain gate, and only 30 ft. away from the windows of the operating theatre! How is that for sanitation? Again, the Out-Patient Department is placed so that it comes within 25 ft. of the present North Wing, containing the Great Hall, and by this proximity and by junction of the Library and Pathological Block entrance of fresh air from the open space in Smithfield, the most valuable asset the hospital now has, is effectually prevented.

Moreover, there is no extension of the Administrative Block, so much needed at St. Bartholomew's, and *absolutely no provision for the nursing and domestic staffs*. In fact, it is a fabulous plan, over which, we hear, a good deal of merriment has arisen "within the gates," and the sooner it is relegated to the waste-paper basket the better.

[previous page](#)

[next page](#)