



## 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.*

### IDLE THOUGHTS.

*To the Editor of the "British Journal of Nursing."*

DEAR MADAM,—I do hope that Miss Mollett will let us have a few more of her idle thoughts, they are those of many of us who are unable to express them. The brass fetish is responsible for no end of hustling in the wards in the early morning, and woe betide the unfortunate "pro." who does not worship at its shrine. Why, if we must have brass fittings in hospitals, cannot they be painted; but, of course, if they were, white would be the colour chosen, and every piggy finger-mark would need washing off. How many tired nurses sigh for a hospital architect with a "utilitarian soul." It is a fallacy to suppose, because nurses in these days do not scrub floors and clean grates, that "ward work" is a thing of the past. Half my training time in the wards was spent in cleaning, and if I had not hurried up with the patients, do you suppose the Sisters would ever have given me a good report? Of course not. The work had to be done. Where I was trained, on night duty we began hustling at 5 a.m., and although it is against the rules, it is done in many hospitals, as the Night Sisters know. A hospital ward is the most *unrestful* place I ever was in, and the good, patient, poor sick people who are treated in them take all the hurry as they take life—with resignation.

"Sorry to wake you, Mrs. One; but it's breakfast time," I have said.

"Thank yer, Nuss; a cup o' ten's a rare sup o' comfort. Many's the time I've gone out to work without it. I'm a tidy a-living 'ere, being waited on 'and and foot—don't you make no mistake," or some such reply has been made.

When will someone teach us to judge things from a non-personal point of view? Of course I would not have nurses think that measured and reposeful methods are not right. But custom has much to do with things, and many poor hospital patients are so used to noise and close quarters with their kind that they do not mind a bit of a rush, as more fortunate and better off people do. I think the *bed* fetish is worse than brass worship. Immaculate beds mean cramped feet and shivers, and yet to go as you please with the bed clothes would give a ward a most slovenly appearance. I remember an irascible old Sister flying at me in my salad days, after sweeping the beds with angry eyes:

"Now Praw, where's that pitch-fork as you've tossed up these beds with? Make 'em all over again, every one, and pin 'em tight, as will keep these 'ere patients horizontal!"

Yours,  
A HOSPITAL SISTER.

### POST-GRADUATE TRAINING FOR NURSES.

*To the Editor of the "British Journal of Nursing."*

DEAR MADAM,—I have read with much interest "E. E.'s" letter in your issue of this week, and as an ex-nurse cordially endorse her plea for post graduate training. Not ten years have elapsed since I was in a London hospital, but during that period aseptic treatment has superseded anti-septic, and the nursing of many classes of illness has been totally reversed, so much so that I should expect to be hounded from the wards to-day for obeying what one learnt as one's A B C then; while many remedial agencies, such as Finsen lamps, high frequency treatment, inoculation for diphtheria, &c., which a nurse is expected to understand now, were then unknown.

The same thing applies to midwifery. During this period internal examination has, to a very large extent, given way to external, while there has been a revolution in the views taken—to cite two instances only—with regard to administration of douches and ergot. Now, given that we are progressing, and that modern treatment is an improvement on that of ten years ago, the nurse in country districts who is out of reach of the advancing tide, and who is conscientiously following the past teaching of her training-school is, presumably, not doing the best that may be done for her patient, and is also—to take it from the lowest standpoint—suffering a serious professional injury; for should she wish at any time to enter another sphere of work, where up-to-date knowledge is required, she will be hopelessly handicapped and will most probably be rejected as incompetent; and this, perchance, is her reward for having devoted some of the best years of her life to the work that demands the highest type of woman and nurse—the tending of the sick poor in lonely country districts. Now, surely this is a defect in our national system of training that could be easily remedied. If a nurse is never allowed to grow rusty the trouble of post-graduate training would be largely reduced. Lectures are of great use, but without practical work they do not really meet the case, and if nurses were allowed to go back to the wards of the larger hospitals or district training-schools every two or three years for periods of three months they might combine instruction in both theory and practice, and not having got out of touch with the routine of the establishment, they might be a real asset to the staff, and give the help that is always needed during holiday time, &c. Guy's Hospital has already moved a step in the right direction by providing courses of post-graduate lectures for its nurses. Why should not this example be followed and amplified. The matter assumes the greater importance in view of the proposed Registration of Nurses. I take it that some way will have to be found of ensuring that a registered nurse maintains the high level of efficiency it implies, and some such scheme as I have mooted would be a means of ensuring it, and should, I venture to think, be made compulsory for nurses who desire the blue riband of their order,

I am, yours faithfully,  
F. C. J.

*To the Editor of the "British Journal of Nursing."*

DEAR MADAM,—I am so pleased to see in the BRITISH JOURNAL OF NURSING, for November 19th, there are other nurses besides myself who feel the necessity of going into a hospital again, after several

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