

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 WAX hold ourselves responsible for the opinions expressed by our correspondents.

THE REPORT OF THE SELECT COMMITTEE.

To the Editor of the "British Journal of Nursing." DEAR MADAN,—May I say how much I am in sym-pathy with the views of your valuable paper on the Central Uniform Examination. We must have that, or Registration will be no use at all. Why are the general nurses of the United Kingdom to be the only nurses in the world who are to "muddle on" through 500 portals to their profession, when Americans, Colonials, Hollanders, Germans, and the nurses of every other country are to submit only to the just test of a Central Examining Body? I, for one, am quite weary of the twaddle talked in this country about nurses, as if we were something quite inferior intellectually to our colleagues all over the world. What is good for one nurse is good for all, and we have just got to go on until the laws which govern us are as just and liberal as those in our Colonies and the States. It is also nonsense Sir Henry Burdett stating we cannot, once in a lifetime, pay £5 5s. for pro-fessional status and privileges, when just a few nurses tessional status and privileges, when just a low nurses have in a few years put nearly a million into his Pension Fund. We can pay, and shall do so willingly when the quid pro quo is worth having. Yours truly, ALICE ELLABY.

RURAL NURSING.

To the Editor of the "British Journal of Nursing." DEAR MADAN, —Your correspondent "E. R." has raised an interesting point in discussing the difficulties connected with the provision of nursing care in scattered rural districts. It seems obvious that in the neighbourhood which she describes, in which there are only six maternity cases annually, and probably a correspondingly small amount of sickness, there is no scope for the employment of a nurse all the year round. What, then, is to be done? Are the few cases which do occur to be left without assistance? Not if it can by any means be afforded.

The first idea which suggests itself to me is to make arrangements with a Central County Association for the supply of a certified midwife or a fully-trained the supply of a certified midwife of a fully-trained nurse when cases do crop up, needing attention. If she must stay in the patient's house, why she must, necessity has no law; but she should *not* be expected to do all the housework, and whoever is responsible for her employment should ensure that the sleeping arrangements are adequate, and that proper food is provided for her. To expect her to share the food of a labourer's family, or to go without it as the case may be because there is not enough to go round is inevitbe, because there is not enough to go round, is inevitably to break down her health.

Another alternative, however, may be feasible. There are generally on a countryside, such as that described, some better-class spinsters, with very little

to fill their days, and with benevolent intentions to their poorer neighbours which find expression by the orthodox and time-honoured methods of sending beeftea and jelly to them in sickness, and in offering a liberal amount of advice of more or less value in health. Could not one of these estimable ladies be persuaded that she would be bestowing an even greater benefit if she were able to render trained assistance, and that it would be worth while for her to obtain the certificate of the Central Midwives' Board ? Six cases to attend in the course of the year could fall heavily on no one, and the problem of the maternity cases, and of some slight aid in cases of general illness, would be solved.

I commend the spinster of leisure to your correspon-dent as a practical alternative for the Holt-Ockley atrocity .- I am, dear Madam, yours faithfully,

COUNTRYWOMAN.

HOURS OF DUTY IN PRIVATE HOUSES. To the Editor of the "British Journal of Nursing."

DEAR MADAM,---I have found 11 a.m. and 11 p.m. good hours for changing duty in private houses; the day nurse can then breakfast at a convenient hour to the family--eight to nine-and go out for a walk before going on duty, and be ready for the physician's morning visit. She can thus remain with her patient

till 11 p.m., until he has quite settled for the night. The night nurse can go for her walk between 11 a.m. and 1, have dinner at a convenient hour to the family, and go to bed from two to ten.

In cases where two nurses are necessary for making the patient's bed, the hours of duty must overlap for half an hour in the morning.

The convenience of the family must most certainly be considered, but the family is usually grateful to have an organised plan of arrangement to follow, which should be kept strictly as to hours by the nurses for the convenience of domestic matters.

During my long experience of private nursing, I must own to a preference of working single-handed, simply because so many private nurses are so tiresome and unpunctual. Many think they may do without the necessary hours of rest in the day when on night duty, they go out much more than is good for their health ; it is no uncommon thing for them to make and keep numerous afternoon and evening engagements when working in London. As they are not actually on duty the family does not interfere, and so the loss of nervous force is made up by either sleeping on duty, or they become nervous and irritable and find "they

can't do night duty." This may be denied, but I speak from personal experience.—Yours truly,

A PRIVATE NURSE."

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

DEAR MADAM,—At whatever hour nurses on private duty change over, they should work together in making the patient's bed and preparing him for the day and night. People do not pay for two nurses to have the patient, who presumably is very ill, left to be handled by one; to change duty at 11 a.m. and 11 p.m. would make this impossible. The day nurse should go to the patient's room for the morning toilet, and the night nurse should do likewise in the evening, and let them get their walk and off-duty time, so that neither the patient nor the household is inconvenienced. Of course, nurses must get fresh air and plenty of sleep o keep them in health, but this can always be arranged



