once and atoned for by a half laughing apology as soon as the request could be complied with.

Patients themselves understand this. I have not infrequently heard one expostulate with another less reasonable, for unnecessarily hindering a nurse already too busy to get all her work done "to time."

I think that if this were the only known instance of the nurse's very human frailty, it might have been condoned by those in whose power it lay to make or mar her life as a trained nurse. If on the other hand, it was universally acknowledged by all who had worked with her, that her conduct was unsuitable, it would naturally rest with the authorities to deal with her as they did. Her ward reports during the whole of her three years' work would doubtless explain their action in the matter, but if based on the one recorded incident, then I would unhesitatingly say that the certificate should not have been withheld without any chance of gaining it later on.

Guildford. I am, yours truly EMILIE M

Emilie M. WAIND.

[We regret we have not space to publish all the correspondence *in extenso* which this question has called forth, and with our correspondents' permission, will give pertinent extracts.]

A Matron writes: "One of a Matron's most difficult duties is to relieve a hospital of second-rate probationers, these indifferent workers do not commit crimes, or violent breaches of discipline, they just manage to get through their work, indifferently. This may go on for months, and then after much trouble they do something a little more carelessly than usual, and one is thankful for sufficient cause to get rid of them. The profession, however, is seldom relieved, as there are always agencies through which they can continue to victimise the sick."

An Infirmary Nurse writes :---"The Board of Management was wrong for an act of injustice. The nurse had only one pair of hands, and no doubt her daily tasks would have been performed with lessfriction had she been endowed with two pairs, to relieve duty; also, considering the everlasting going to and fro in long wards, a second pair of feet might have come in useful. The truth is in the majority of hospitals a nurse has far too much to do, her nervous system is always on the rack, and her temper suffers. Would that hospital chairmen might be compelled to serve a novitiate in the wards on day and night duty, we should hear no more of 'sacking' the nursing staff."

Certificated Nurse writes :--"There must be something wrong in a system which keeps women working in a hospital for three years and at the last moment deprives them of their payment, the certificate being in fact the bulk of their remuneration, as without it nurses cannot compete for good posts. I left one London Hospital because I was liable to instant dismissal at the will of the Matron. A friend got 'sacked' because she happened to have a mind, and it was too dangerous an experiment as I had my living to earn. Since my time the Committee of this 'leading training school' have thought fit to realise their responsibility for the nursing staff, and they now retain power to 'sack.' It is high time probationers were treated like other pupils, and also like women instead of children. I blame the present hospital system."

An American nurse writes : "In the United States an inefficient person is called a 'Smudger,' that means a person who is never on time. Many women are smudgers; they don't grip things, and fail. In a sick ward the smudger cannot be tolerated, she is always flying after a lost psychological moment, and sick people cannot wait. But why allow the smudger a three years' term of grace? There should be methods of firing her out long before the expiration of all those months. There must be a screw loose in the management of that hospital somewhere. I think the Chairman real nice, we don't have them around that way in America."

## PRIVATE NURSING IN SOUTH AFRICA.

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

DEAR MADAM,—I have read with considerable indignation those most uncalled criticisms passed upon Australian nurses by Miss Kenealy in a recent letter to the BRITISH JOURNAL OF NURSING, and which, naturally, every Australian nurse must resent.

Miss Kenealy's opinion of us would be a matter of very little importance, but for the fact that she has voiced that opinion in a paper so widely read, and which may serve to convey such a false impression to the readers of the Journal of Nursing of the training and work of Australian nurses.

That Miss Kenealy has been remarkably unfortunate in regard to those nurses she has met with, is a thing to regret, but after reading her letter, which has been reprinted in the paper of the "Royal Victorian Trained Nurses' Association," it seems to me that the tone of the letters has been caused by the fact that (to quote from Miss Kenealy's letter) "Australian nurses are apt to cut the ground from under English feet," a fact which I should fancy would speak for itself, for even a "colonial public" prefer good to indifferent services, and it is probably very likely that, whilst no more used to "roughing it" than English nurses, "inconveniences" are accepted in a more cheerful spirit by the adaptable Australian nurse.

I do not think that I require to contradict the statement that our nurses who went out to South Africa "during and after the war" went out to the detriment of that place, for I know that those nurses who were sent out to assist in nursing the sick and wounded were carefully chosen, and their work will be remembered by many a grateful "Tommy."

In regard to the remark that "Australian nurses have gone out there because Australia must be a gran' place to live out of," may I venture to wonder



