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Editorial.

FEES ON THE BRAIN.

The question of the fees which a trained nurse shall receive for her services is one which is of considerable interest, as there is at present no uniform scale conformed to by the various institutions sending out private nurses, although the £2 2s. fee per week is the usual charge, while in certain cases demanding special knowledge and skill, and in which the nursing duties are of an arduous nature, £3 3s. is sometimes asked.

We heartily sympathise with nurses in thinking that their skilled and responsible work merits, and should receive, an adequate fee. But the patient's point of view needs consideration also, and a £2 2s. fee, in addition to providing the nurse with board, lodging, and washing, is, we believe, as much as most people can afford, especially in the case of a prolonged illness.

Take a case of typhoid fever, for instance, which is often cited as belonging to the class for which a £3 3s. fee should The patient needs constant be charged. nursing care for six or eight weeks. Night and day he must be incessantly If he can afford watched and nursed. it, it is certainly both to his interest, as well as that of the nurse, that a second nurse should be engaged, for how can one, working single handed, take any real rest during the critical period of the illness. But few patients could afford to engage two nurses if the fee paid to each were £3 3s. a week and for this reason it seems most desirable that £2 2s. should be charged, and that in cases where it is for the benefit of the patient that he should have uniform attention during the twenty-four hours a second nurse should be engaged.

The point, however, is one which might

with benefit be discussed between associations of private nurses, and on which the opinion of experienced nurses would be welcome

Another point is the tendency observable amongst nurses to think that the fee should be raised when their patients are wealthy. It would, however, be almost impossible for an institution, or co-operative society. to arrange fees on this basis. A scale of charges must be adopted, and the employer informed as to what that scale is. At the same time we must own to a feeling of strong sympathy with nurses when a surgeon who takes a hundred or two hundred guinea fee for an operation states that he considers the nurse employed overpaid at £2 2s. a This is the sort of thing to make a woman wonder of what use are her days and nights of anxiety, skilled service and arduous

Perhaps, in operation cases, an ideal state of things would be for the fee charged by the nurse to bear a fixed proportion to that of the surgeon, but as this is a matter of private arrangement between the surgeon and patient it does not seem possible to carry into effect.

The whole question of fees is one which at the present time is very much alive, and those who have much to do with sending out private nurses are apt to get "fees on the brain" in their desire to do what is just between patient and nurse.

One point in connection with fees should be taken into consideration, namely, whether they should always be arranged on a strictly commercial basis, or whether, in common with other professions, there should be some elasticity in the amount charged. The difficulty with nurses is that they are not like lawyers and doctors, attending to many cases at the same time. Their entire attention is given to one, previous page next page