

the rank and file of workers, *i.e.*, the majority. They have had, or should have had, extended education, and in the case of nurses in most Irish hospitals will have paid a fee varying from £10 to £50. Some hospitals pay a salary from the beginning. Some do not pay any for two years. At any rate, the nurse is 25 before her salary leaves any margin at all, and then it is only the thrifty woman who can keep her margin, while, as most people know, there seems to be among nurses everywhere, what is almost a distaste for thrift, or at least for the self-denial it entails, and, perhaps, when one knows the conditions under which private nursing is done, one cannot wonder greatly if the temptation of a harmless pleasure procured at the cost of a few shillings be not overcome. But the few shillings are often all the margin. As my point tapers up from a base of actual experience, I shall ask your patience while I mention a few cases of extra work, believing them illustrative of what many nurses have done.

"1. Patient with enteritis lasting 10 months. For four months nurse got to bed only on alternate nights, always doing day duty besides. Tension very great. Doctor very remote.

"2. Patient with rapid consumption, very weak heart. Nurse's day duties extended over 15 hours. Doctor thought second nurse likely to excite patient; said death might ensue from the slightest exertion or provocation; required nurse to sleep in patient's room. This case lasted ten weeks.

"3. Patient with mitral disease in the last stages. Nurse never more than four hours in bed, and out of doors only seven times in five weeks; on duty remainder of time.

"4. Patient with cancer. Death from hæmorrhage feared. Nurse slept on army stretcher alongside patient's bed. Ten weeks.

These cases are from my own experiences. At the time I had no thoughts but the daily needs of my patients, but in after years, when I had to think for other and younger women than myself, women who at any time might have like service required of them, and who might not have the strong physique which had carried me through, I felt that no matter with what willingness and tender regard for suffering she was actuated, a woman might be acting without justice if she were to go on spending her powers of endurance so freely as to make her ultimately unable to support herself, and so be a burden on her relations or an object of what is called charity. When the nurse has to sleep in the patient's room, or where her duties extend beyond 12 hours, some additional fee seems to be simple honesty, since the additional strain and the disturbed

rest must inevitably, if continued, tax endurance, and shorten the working life. Some cautious consideration would be necessary in the case of nurses, who are attached to institutions paying them a fixed salary, and taking the risks of unemployed weeks. Since it is the nurse alone who has to endure the wear and tear it is she alone who would be entitled to extra payment for the extra endurance. It might also be necessary to provide arrangements which would effectually prevent any nurse from increasing her earnings by interfering with the employment of a second nurse. It might be that persons who are keen to have nursing regarded as a profession would object to a demand for payment for overtime services, but since the existing scale of remuneration is fixed according to a time measurement, such an objection would not be logical. It would be equally illogical to assume that because payment was made for overtime the humane elements of a nurse's work would be lessened. We do not consider that because a nurse receives payment for an incomplete week her humanity or devotion to her work is less than if she took payment only till the end of a completed week. Extra attention to cases not infrequently induces the patient or the patient's friends to make acknowledgment in some form which entails the outlay of money, and to me it seems that the receipt for overtime, of payment on a scale fixed by the general arrangements of the chief nursing institutions would be more dignified, and more worthy of high ideals of nursing, than the acceptance of a brooch or bangle, or tickets for the theatre, and the like."

Much animated discussion followed, and many and varied opinions were given. The general idea seemed to be that nurses should not be encouraged to remain on duty more than 12 hours at a time, and Miss Cherry and Miss Cunningham proposed that a nurse who sleeps in a patient's room should be paid at the rate charged for nursing an infectious case.

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Irish Matrons' Association.

THE CONVENTION AT SAN FRANCISCO

Opening on May 5th, the eleventh Annual Meeting of the Nurses' Associated Alumnae of the United States has been in progress during the week in Golden Gate Hall, San Francisco. Addresses of welcome were delivered by the Mayor of San Francisco and others, and Miss Annie Damer delivered the Presidential Address. The programme is a very full and interesting one, and we hope to refer to it again later.

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