

Women's Work as Members of Hospital Boards.*

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It is generally recognised that there is no work to which a woman's duty points more clearly than that of succouring the sick and helping those who have for the time being fallen out of the race. But we hardly realise how short a time it is since that duty was made largely a woman's, and with what immense advantage. My own first experience of hospital visiting was in the eighties, and at that time the male ward of the hospital in London which we visited was entirely nursed by men. It seems strange to think that this important national hospital was then overrun by rats who partook freely of the patients' food, becoming thereby marvellously tame and friendly. The hospital was soon afterwards demolished, and the present building erected in its place. As one looks down the wards, gaily decorated with flowers, the patients tended by nurses of the modern type, strict cleanliness reigning everywhere, one feels that one has in a true sense lived through a generation. Men and women have their respective gifts, and no one who has seen a male-nursed hospital—or sees—as we may, alas, still see in Scotland—a male pauper-nursed poorhouse ward, will ever wish to return to the good old days in hospital management.

But it is not about nursing that I want to speak. It is rather about the necessity that certainly exists for women to extend their efforts as far as the hospital is concerned, and apply themselves also to its management and direction. As regards the nursing staff, here also we are in this country fortunately agreed. In Great Britain the head of the nursing and domestic staff is always a woman. In this matter we are ahead of many other countries where the nurses are directed by the medical administrative staff, and I think all unprejudiced observers will allow with very great advantage. But beyond this staff, there is a board of management, or governors, house committee, or whatever the ultimate authority may be called, which is created by Act of Parliament, elected by subscribers or brought into being in some composite manner combining these methods. It is on this board, which directs the policy of the institution as a whole, that woman's help would often be desirable, and it is on it that women interested in hospital work should surely endeavour to obtain representation. I do not, of course, mean by this that the hospital governor's work is not usually satisfactorily performed, and that he does not devote in many cases infinite time and trouble to its performance. There are few posts in which more willing service is given than in that of managing our great voluntary institutions—service in which there is not any ulterior profit to be derived. We have men distinguished in commerce, law, and medicine, freely devoting their best talents and

scanty leisure to this great cause. Certainly we could not hope, in the present generation at least, to find women who could deal with the intricate legal and financial problems that present themselves in a great institution with large accumulated funds, in the same efficient way as is done by those who have the benefit of experience and much expert knowledge. But then this is but one side—a very important side, I admit, of hospital work. There is the other, the control through the proper intermediaries of a large nursing staff—nearly wholly composed of women—and the responsibility for what may be an immense staff of servants, the majority of whom are female. In addition to this there is the work of the house committee in so far as it concerns the ordering of supplies, the contracts for linen, and the selection and making up the garments requisite for the patients and staff. There is the laundry administration which should involve some knowledge of the various systems of washing and dressing linen, and the most economical methods of doing this. There is the kitchen where the rival claims of imported and home-fed meat have to be considered, where new modes of cooking and preparing have to be thought of, where the disposal of the so-called waste products which frequently amount in value to large sums of money, must be carefully thought out. There is the question of storage, of proper accommodation for milk and other such foods. Besides this there are constant structural alterations and additions to be made in a large hospital, and in these the nurses' accommodation and arrangements for their convenience are often woefully overlooked. Everyone who has worked in an hospital knows the difference it makes to have things ready to hand and conveniently arranged. Economy again often seems the last thing thought of by a modern hospital architect, even although the money has to be collected with infinite toil and trouble. Each great new hospital seems to out-rival another, so far as outward appearance goes. And in respect of internal fittings it is the same. The most expensive kind of materials are often preferred to those less expensive and as efficient. The most careful attention is devoted to rounding off the lintels of the doors, and providing special sorts of hinges, while the hot air or water pipes are so disposed that by no means can the dust be dislodged from their intricacies. Such anomalies are constantly visible to any observant eye, more especially to those who are trained to think about the practical points of cleaning. Some years ago I visited an hospital in a foreign country that seemed to outdo all others I had previously seen in ingenuity of arrangement as well as in architectural magnificence. Every possible contingency was prepared for. The only defect to be observed was that there was not a single patient visible, although the hospital had been completed for years. We naturally asked when the patients were expected, and were told that none could be received until money had accumulated, owing to the excessive cost of building. This was, of course, an extreme instance of a general tendency.

But it may be argued, is it at all likely that

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