

Well, I started from my Leicestershire home, about 4.30, the morning after the wire arrived, and I secured another Leicester trained nurse who would come in a few days. I was very young at the time, and shall never forget the impression that the enormous size of Guy's Hospital made on me. I was sent at once to the Matron's office, and so great was Miss Burt's charm of manner and sure appeal to one's loyalty and devotion, that in five minutes there was no hardship too great to be borne gladly. Miss Burt told me that she, and all the staff whom she was collecting as quickly as possible, would have to bear anything that the few remnants of the old staff left might inflict upon them; in brief, our orders were to "turn the other cheek" all the time, and keep on turning it! It was a difficult position, no one knows how difficult, who does not know the bitterness of feeling aroused by a new matron coming to Guy's and bringing new ideas, new ideals, new ways of doing everything. I feel that I can never make you realise how things were—the night Nurse in my Ward, for example, had been on continuous night duty for 14 years, and that was no isolated instance. The Medical Staff, also, resented the fact that their old and well-tried Nurses should be superseded. We, the new staff, were nicknamed "Miss Burt's lambs."

One never-to-be-forgotten morning, about 300 students assembled in Guy's quadrangle to hiss Miss Burt as she walked across from the Nurses' Home to the Hospital. One of the officials came to beg her to remain at the Home as one never quite knew what the students of those early days would do when roused. Our gallant Matron proudly refused this advice, and, so impressed were the students by her bravery, and her truly regal air, that a storm of cheering broke out in place of hissing, and the battle was won, and our place secured.

Forgive, Nurses, my lack of skill in presenting this sketch of a former life, and believe that we pioneers all felt that everything was worth while if we could carve the stages by which others would carry our profession to nobler heights."

We are glad to note the List of Members of the Royal Infirmary Nurses' League increases year by year—it has always been affiliated to the National Council of Nurses of Great Britain, and taken keen interest in the progress of the International Council of Nurses, thus helping to make it the wonderful success it now is.

FEVER NURSES' ASSOCIATION.

Meetings of the Executive Committee and of the Council of this Association were held at the Head Offices of the Metropolitan Asylums Board, Victoria Embankment, on November 14th, when the following business was transacted:—

(1) A scale of salaries submitted by the Executive Committee was approved by the Council and recommended as the minimum remuneration that could be considered adequate for the nursing staffs of fever hospitals. It was decided to bring this scale to the notice of the various authorities having control of fever hospitals.

(2) Since the Association has ceased to function as an examining body it had become necessary to alter the Bye-Laws at the last Annual General Meeting, in order to admit probationers in fever hospitals as "*Student Members*" and nurses who had passed the final State examination in fevers as "*Full Members*." The Council approved new Application Forms and new Certificates for this purpose; and as the Association is the only organisation solely representative of fever nurses, efforts are being made to make its aims and objects more widely known to the staffs of fever hospitals.

(3) The Council considered the case of a fever hospital which had been refused registration as a training school by the General Nursing Council on the grounds that the average number of patients per day, over a period of three years, was only fifteen; and a report that the Ministry of Health authorised the registration of that hospital. It was the unanimous opinion of the Council that a hospital with such a small number of patients could not act as a complete training school for admission to the Supplementary State

Register for fever nurses, and a resolution was passed protesting against the action of the Ministry in this matter.

(4) It was proposed to hold a Social Meeting in the second week of February, when Miss A. Stewart Bryson will give an Address, with lantern slides, on the International Nurses' Congress at Geneva in 1927. Full particulars will be communicated later, when arrangements have been completed.

(5) Dr. D. MacIntyre (Medical Superintendent of Plais-tow Fever Hospital), was nominated President for the ensuing year.

THE AUSTRALIAN NURSES' FEDERATION.

The Australian Nurses' Federation met in Adelaide, South Australia, in September last, and Miss Mann, the Secretary of the South Australian Branch, was heartily thanked for her kindness and consideration to members of the Council during their stay in that charming city.

AFFILIATION WITH THE INTERNATIONAL COUNCIL OF NURSES.

We note in a report of the proceedings published in *Una* that the question of affiliation with the International Council of Nurses was one that was very carefully considered in view of the fact that such affiliation would require that all members of the Council should be nurse members. A suggestion was made that members of the medical, legal, banking and other professions might be permitted as members of the Council, but without voting power. It was doubted whether this would be acceptable to the International Council of Nurses, and it was therefore decided that the matter be referred back to the Branch Councils after the Secretary has obtained the fullest information as to the alterations to the Constitution that would be necessary and the probable expense of such affiliation.

Every time we attend an International Meeting we miss the representation of Australian Nurses. It is the only Dominion outside the International, and it is high time, well meaning as they may be, that members of other professions retired from membership and government of the nursing profession, should encourage Australian nurses to stand on their own feet and manage their own affairs. Once self-governing, a warm welcome awaits our colleagues from the great Commonwealth into International Federation. We need them and they need us.

ADULT NURSING TRAINING FOR TRAINEES OF CHILDREN'S HOSPITALS.

The Australian Nursing Federation also agreed that it is desirable that a nurse trained in a Children's Hospital should receive a further training of not less than twelve months in a general hospital for adults of both sexes, but it was realised that considerable difficulty would be experienced in arranging this. It was decided to refer the matter to the Branches for discussion and suggestions.

ADVISORY COMMITTEE ON THE WELFARE OF THE BLIND.

In view of the continued development in the work among the Blind owing to the operation of the Blind Persons Act, 1920, and the new problems constantly arising in connection with this service, the Minister of Health has re-appointed the Advisory Committee on the Welfare of the Blind for a further period of office. The Committee has been constituted with the Rt Hon. G. H. Roberts, P.C. J.P. (Chairman).

The Committee will advise the Minister on matters relating to the care and supervision of the blind, including any question that may be specially referred to them by the Minister. Mr. F. M. Chapman, of the Ministry of Health, will act as Secretary.

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