In comparing the Nun and the Nurse, Lady Priestley writes:

"Her duties in this, our Protestant country, are no less serious with us than they are in those countries where the 'Sisters' are celibates, and bound by their religion to take the vows of chastity and obedience, with the one great objective ever before them, the Cross of Jesus Christ. Darkly robed in saintly garb, the Fille-dieu visits the homes of the sick, and performs her duties in deep humility and faith. If she does not enjoy the high training of our aspirations she at least carries out the doctor's orders, does all the work required of her, however menial, and having secured the gratitude of her patient, she subsides once more into the sacred privacy and silence of the cloisters. No gossip attends her ministrations, and where she herself is so guarded no breach of confidence takes place. Her person and her office are alike sacred."

Lady Priestley's picture of the Nun Nurse is alluring—on paper—but then, what are the results of her ministrations in practice. In spite of her many personal virtues, has not the Nun's lack of "high training" been recorded against her by those in charge of the sick in Roman Catholic countries, in the public Hospitals in France, by the Local Government Board in Ireland, and is there not a movement even in Italy Public Hospitals?

The "saintly garb" of the Fille-dieu is oftentimes woollen, stuffy and insanitary, and this "garb" is symbolical of her lack of professional progress, and proves her unprepared to "carry out the doctor's orders" when those orders are based on scientific

DISCIPLINE.

Lady Priestley remarks: "With our Nurses—or shall we call them 'Sisters'?—things are not the same. There is not the same respect for privacy, silence, obedience, and even the discipline which was so marked a feature under the régime of Florence Nightingale is conspicuous now only by its absence."

We cannot think these remarks altogether just to the trained Nurse, and again we would point out that Florence Nightingale's regime enforced for its pupils a five years' connection with the St. Thomas' Training School—the whole term of which the pupil was under supervision and was held responsible for her work and conduct to the Nightingale Fund Committee—and we would here lay great stress upon the deplorable facility provided in modern times for short terms of training by Hospital authorities, by which the spurious imitation of the trained Nurse is let loose upon the public—devoid together of knowledge and professional discipline—competing with her professional sister in the labour market, and smirching her professional reputation by her irresponsible frivolity of manner and ignorance of method. Miss Nightingale has said "discipline is the essence of training"—and discipline can only be salutary when systematic."

VULGARITY.

We live in a vulgar and ostentatious age, and in the medical and Nursing worlds we see the signs of the times, although both professions stand higher than formerly in the social scale. Personally we have no great admiration for the flash young medico à la mode,

the prancing steeds and scarlet wheels of whose chariot often give the cachet to the "consultation," which a more thorough knowledge of humanity and its manifold diseases should inspire, and Frau docterien à la mode, with her craving after social distinction, her extravagant ménage, her Parisian "confections," and her "provincialism," is not altogether to our taste, but, like the modish Nurse of the "chaise longue" to whom Lady Priestley alludes, they are merely the bubbles on the waves of deep waters, and are, doubtless, of those who resent that their working sister "is no longer content to fraternise with the servants of the house and take her meals with them when convenient." But the world does not estimate the worth and the magnificent solidarity of the great profession of medicine by the fripperies of the few. Of the causes celèbre quoted by Lady Priestley, in proof of the matrimonial designs by which the modish Nurse is invariably inspired when in attendance on the defenceless male patient, we prefer not to touch, and will pass on therefore to the consideration of more professional and less repulsive questions.

EDUCATION AND TACT.

Lady Priestley's argument, from which we gather that she opines that the lengthy training, comprising, as it does, both theory and practice, advocated in all the well-organised Nurse Training Schools, is responsible for the lack of tact sometimes displayed by Nurses in private houses, is fundamentally wrong. The more thorough, lengthy, and well disciplined the training the more efficient and obedient to medical authority the Nurse becomes. Take the relative positions of the doctor and nurse in our leading Hospitals; what relations could be more satisfactory than those existing between these two classes of officials. Who is more considerate, courteous and kindly than the Visiting Staff, and who more alert, obedient and appreciative than the Ward Sister and her subordinate Nurses? The well-trained Nurse "knows her place" in relation to her superior officer, the medical man in charge of the patient, and invariably keeps it; the ill-trained Nurse never acquires the ethics of professional etiquette, and consequently "presumes."

Lady Priestley complains that the official relations between the doctor and nurse are not harmonious in the private house, and deprecates that Nursing Institutions use little power of selection in sending out private Nurses. If this be so, the fact remains that the doctor may not have demanded the professional credentials of the nurse whom he employs from a reliable source.

We Nurses have been inveighing against the "Nurse farm" for the last decade, and still it flourishes gaily. Why? Because medical men employ the Nurses recommended from Institutions instituted for personal gain, and not on strictly co-operative principles. Much has been done of late years to combat this evil, and the raison d'être of the Registered Nurses' Society is that thoroughly trained Nurses of good character, working under a professional committee and professional officials, should be available for medical men and the public, without any pecuniary advantage to those in authority. Medical men should be as particular concerning the qualifications, efficiency and character of the Nurse they recommend to a private patient, as they are concerning the professional qualifications of the colleague called into consultation. The speedy reform of this very real

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