

sickness are falling heavily upon them, there can be no reason why the nurse should not do the grate, sweep and dust the room, &c., these being no more menial than the necessary work about the sick, and it may be an easement to the sick man's mind. The same applies to fetching and carrying, though, as this involves absence from the sick room, it must depend entirely upon the severity of the case.

Another ground of dispute is the amount of rest that a sick-nurse can claim. In this particular employers are seriously at fault. They forget, in their eagerness for the recovery of their relative, that the nurse is made of flesh and blood, needing proper rest and refreshment. They give her as few hours of sleep as possible; these they interrupt by needless alarms and disturbances. They grudge her church-going or short breaths of fresh air. Her working day is to be twenty-four hours long, whatever theirs may be. It sometimes occurs that nurses are wanting in thought in the amount of relaxation they claim; but as a rule the fault is on the other side, and the injustice is borne uncomplainingly, until exhausted nature breaks down under the strain. It is hard for the nurse to plead her own cause, especially as she may be accused of caring too much for her own comfort; so that the medical attendant must stand her friend, and see that justice is done all round. It has come within the knowledge of the writer that a nurse has been kept three days and nights on duty at a stretch, to the manifest disadvantage of herself and patient. This ought to be impossible; and, though we can understand and sympathise with the professional zeal of the nurse, keen to do her utmost at a severe crisis—and with the friends, unwilling to lose, even for a few hours, the services of the one person who was able to help their sick one,—still it is a fault all round, and the independent authority of the doctor would come as a valuable aid to put things straight.

With the doctor the nurse stands on a different footing. To a certain extent she shares his professional standing, and is there as his representative and assistant, *but* his subordinate; and these are the relations that will secure the most harmonious working. When the medical attendant finds that the nurse is thoroughly true to him, that his instructions are scrupulously carried out, he will rely upon her and leave more and more to her discretion. He may ask her opinion, make use of her experience, trust her judgment; but in all these instances it is for him to seek, not for her to offer, for the responsibilities are his and his only. But if the nurse obtrudes her opinion, criticises his course of treatment, either to him or, worse still, to the friends, then farewell to all confidence or harmony!

It is a mischievous habit on the part of some nurses to be always quoting their hospital, or swearing faith by one physician only, and it is treacherous in the extreme when they abuse their position of

confidence to weaken the trust of the patient in his physician. It is a most true proverb "that doctors differ," but the hospital nurse has the opportunity of seeing that the differences of doctors lead to the healing of the sick. So it is not for her to stir up the differences; the rather let her loyally carry out all orders given and hold her peace.

It is hardly possible to over-rate the importance of the nurse's work. It is full of responsibility and full of possibilities. On the accuracy of her report and on the truthfulness with which she has noted symptoms will depend very much the line of treatment that is pursued. Her observation must be educated to overlook no point, however minute it may seem to her; her care and vigilance must be unremitting, and it will rest in her hands to educate her assistants from among the likely members of the family.

The temptations to scamp the work must be manifold, for the nurse is doing her work away from the skilled supervision under which she has been trained, and now she has to rely upon her own resources in time of emergency. In the silent hours of the night there is no one on the watch to catch her sleeping, or making an improper use of narcotics or stimulants; her patient may reach the morning light enfeebled and depressed, but there is no one to say that it is caused by the nurse's neglect to feed. Her plausible tale will excuse herself. Surely conscience will rise up and accuse her of neglecting a solemn trust? But, unfortunately, conscience and rectitude are sometimes absent, and if professional pride is not on the alert there is nothing else left to which to appeal. This, however, is the dark side of the picture, and one over which we hope a brighter light will fall day by day. For such results we work and wait.

C. J. WOOD.

NATIONAL PENSION FUND FOR NURSES.

HAVING received and perused the prospectus and tables of this institution, we shall proceed, in accordance with the intention expressed in our last issue, to examine closely the basis of the administration, and the benefits intended to be conferred by the scheme which has just been put forth. We shall entirely dismiss from our minds any feeling but that of a purely *commercial* nature—that is the feeling in which we shall, to our utmost endeavours, look at the matters *pro* and *con.*, and, purely and simply from the nurses' point of view, regarding it merely as an investment for the nurses' savings. Space prevents us from dealing fully with the matter in *one* article, and we shall therefore perhaps extend the criticisms over several weeks, for the present confining ourselves to the examination of the reasons upon which the fund is established, and we thus quote from the prospectus the following:—

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