

in serious or lengthy illnesses. Competent nurses can always be obtained from a good nursing Staff, Hospital, or Institution, on terms to suit almost everyone. The *trained* nurse possesses a calmness of mind and a knowledge of detail which wives, mothers, and others not professionally engaged in nursing can rarely possess; and moreover, the trained nurse, although not devoid of proper sympathy with her charge, is not generally overcome (as are intimate relations or friends) with the gravity of the case. To nurses, as to medical men, it becomes a habit to view suffering calmly, while doing their utmost to relieve it, and to bring a clear and undistracted mind to bear upon every detail of their duty.

Let full reliance be placed in the nurse, who should also possess the confidence of the patient; if mutual good feeling does not exist, the sooner relations are terminated the better for all parties concerned. Treat a nurse well, give her plenty of good and wholesome food, let her have an apartment which she can call her own during the time she is in the house, and where she can retire for plenty of rest, permit her to take outdoor exercise and to have amusements at frequent intervals, pay her reasonably and ungrudgingly, relieve her as much as possible from menial duties, let her receive her instructions solely from the medical attendant, and don't worry or hamper her in any way. Such considerations as these are never lost upon honourable and rightly dispositioned nurses, and generally the patients will be the considerable gainers in obtaining the efficient assistance of a sympathetic nurse. We are not by any means as thankful to nurses as we might be. A willing band of noble women—many of whom are of gentle birth and culture—always ready to undertake arduous duties, and to undergo many personal risks—lending their time, their energies, and even their lives—for the relief of others, witnessing weary scenes of sickness and distress, watching patiently through dreary days and still more dreary nights, listening to oft repeated cries for help, soothing the pains and smoothing the tossed pillows of the suffering, performing oftentimes a thankless office for a still more thankless acknowledgment, sacrificing themselves to one of the most glorious of martyrdoms, and yearning for—not merely yielding to—a duty which is almost divine. Surely, in the knowledge of all this, it ought not to be necessary to have to appeal on their behalf for better treatment?

If possible, arrangements should be made for the assistance of a strong willing person to help in moving the patient, to perform the menial and heavy duties of the sick-room, to carry coals and water, and to be ready at all times to give the nurse any assistance she may require.

If the patient requires *constant* watching, two nurses will be necessary, one for day and the other for night.

Where, from force of circumstances or position, the nursing has to be done by relatives or friends, the work should only be entrusted to those who can thoroughly be depended upon, and the duties ought to be parcelled out systematically and in a business-like manner, each bearing a share (*receiving instructions from ONE only*), but in an orderly and quiet manner, bearing in mind that it is not advisable to let the wife or the mother have much of the *actual work* to do. Such are ill-qualified to bear the strain of both physical and mental wear and tear, and therefore as much freedom from stated duties should be given to them as is possible. To nurses themselves are suggested the methodical arrangement of their rooms, their persons, and their work; avoid hurry—haste is unseemly at the best of times, in a sick-room it is particularly so (bustle and noise being almost sacrilege); strive by all means after cheerfulness—not levity; be at least *one* bright object for the patient's eyes to look upon; speak distinctly and kindly—but firmly; have tact and decision; do all that you possibly can to gain the confidence of the patient and the medical attendant; make friends, but do not provoke familiarity with the others of the household. Endeavour conscientiously to obtain the possession of these qualifications, and nurses will then find their duties run much more smoothly.

BIOGRAPHICAL.

MISS FLORENCE NIGHTINGALE.

IN giving our readers this biographical notice, we feel sure that we could not have secured a subject more likely to be acceptable than that of this illustrious and amiable lady. Miss Nightingale is the younger daughter of Mr. W. S. Nightingale, of Embley Park, Hampshire, and Leahurst, Derbyshire. She was born at Florence, in May, 1820. Very early in life she developed those instincts of philanthropy which have made her name honoured in every class of society. She has been associated with innumerable works, promoting many institutions, advocating considerable reforms, and, what must be more than gratifying to the lady herself, seeing her efforts crowned with success during her own lifetime.

Miss Nightingale, at the commencement of her noble work, expressed considerable dissatisfaction at the condition of our schools, hospitals, and reformatory institutions; and in 1851 she spent some time at Kewerswerth, on the Rhine, in one of the institutions devoted to the Protestant sisters of mercy.

Her first practical work, we believe, was in Harley Street, in connection with the Governesses' Sanatorium, which, for want of supervision and support, had fallen into a woefully sad condition. To its re-organisation and restoration Miss Nightingale

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