

the unhappy people were only dragged to suffer every torture that could be inflicted by callous indifference and ignorance. It is stated that in the Hotel Dieu only one bed was provided for every eight patients, of whom four were laid on the floor and four in a bed. Every six hours those on the floor changed places with those in the bed. What wonder that Hospital fevers and pyæmia raged in these Wards, that they became a nidus for epidemics, and that the very word Hospital came into such disrepute, that the men of the Revolution proscribed it and substituted that of "Hospice."

(To be continued.)

THE CHARGES FOR PRIVATE NURSES.

By MISS ALICE DANNATT,

Late Lady Superintendent, Manchester Royal Infirmary.

I DESIRE to make a few remarks about a subject in which I feel great interest, namely, the fees charged by our Hospitals for the services of their private Nurses. First, let me say that if I plead for a somewhat low rate of charges, I do not therefore value the services and skill of the Nurses at a low rate. I cannot help regretting the, in some cases, increased rate of charges, because I think the first idea of extending the usefulness of the Hospitals, by making it possible for the middle and lower middle class to receive help at a reasonable rate, has been lost sight of in the desire to make money for the Hospitals. The middle class, sometimes by their large sums, more constantly by their "many littles," are the main support of our Hospitals, but they are not eligible for admittance as patients, nor can the majority afford the high fee now charged by some Hospitals; therefore they are worse off than either the rich or the poor. The rich can secure all they wish for of scientific knowledge and trained skill; the poor also have all this help in our Hospitals, and often too the poor have district Nurses sent to them.

The old charge for private Nurses, of a guinea a week, and washing and travelling expenses, and one guinea extra when the illness was infectious, was more than enough to cover all the expenses of the Nurses' salaries, their uniform, their holidays, extra rest when it was needed, and also any extra appliances they might need for themselves; it supplied, too, various useful articles private Nurses require for their patients, and still left a surplus.

The charge at some Hospitals (not at all, I am glad to say) has been raised to thirty shillings per week; and I am told that at some Hospitals, where a staff for private work is comparatively new,

the charge is higher still. Let the rich pay such charges, and more if they can and will. I hope, when the legal Registration of Nurses is accomplished, there will also be a legal scale of charges for their services. It is obviously unfair that the rich man and the comparatively poor man should be charged at the same rate.

The great founders of our Hospitals wished, and the generous supporters wish, to give help where help is really needed. In theory, we all admit that a respectable man, bringing up his family on about thirty shillings a week, asking help from nobody, doing his duty manfully, is the right sort of person to give help to when illness overtakes him, his wife, or his family; but in how many cases is it given? The Doctor says, "You must get a Trained Nurse, or you will lose your wife." The man goes to the nearest Hospital, and he finds the charge for a Nurse is thirty shillings, two pounds, or even more, per week. He has put by a little money; not much—how could he? He does not hesitate; his wife's life, he is told, is at stake, so he engages the Nurse. Think of the large fee for the Nurse, and the other expenses she entails, the Doctor's fees, the many extra and expensive things that are needed for the sick wife. The many expenses far exceed the weekly income, and soon the money that has been saved is gone. Then debt, this respectable man's horror, begins to be incurred, and still the wife's life is in the balance.

It has been said to me that if people cannot afford to pay for Nurses, they must not expect to have them, their friends must nurse them, and so on; and when I argued that if skilled Nursing were absolutely necessary to save life, what then? the answer was, "They must get workhouse Nurses." I say *no*; and that the charge for our Hospital Nurses should be within the means of all, except the poorest, who have the best of Nurses, and the best of everything else, provided for them in our Hospitals.

Would it be too much to ask the Boards of Hospitals that have private Nurses who pay their way, to allow one or two Nurses to work at small charges as district Nurses—not amongst the poor, who are eligible for admittance, but amongst the class just above those who come into Hospitals? And would the loan of a Nurse, at a time of emergency and great distress, be too much? It would be a great extending of the Hospitals' usefulness, and need not be difficult to arrange and manage. There might be a form to fill up, and the Board would decide how long the help should be given. A separate register could be kept for such cases, and the number of such patients, without stating their names, could be given in the annual report, shewing increased usefulness to a

[previous page](#)

[next page](#)