

confident, however, that when we have examined, as we now propose to do, the various aspects of the matter to which we have alluded, we shall find that there is a novel, and at the same time, we hope, a practicable solution of the problem possible, in the direction which we fully agree with Miss Dannatt to be most highly desirable—the supply of Private Nurses, to the “middle and lower middle classes,” at considerably lower charges than those which are at present demanded.

But now we will consider, one by one, and from week to week, till the subject has been fully discussed, the various interests involved, and which we have above enumerated. Firstly, then, as to the importance to any Institution, of this question of the charges to be levied upon the public for the services of its Private Nurses. Remembering, as we showed last week, that the system of Hospitals supplying such Nurses to the outside public is one of quite recent development, it becomes evident at once that the establishment of such a system will be to the minds of the governing body of such an Institution simply and solely a pecuniary question—one in which sentiment is conspicuous by its absence. The Matron and the members of the Medical Staff recommend that a Private Nursing Institution shall be organised and carried on by the managers of the Hospital. No accommodation for a separate and distinct Staff of Nurses exists in the already overcrowded buildings of the Institution. The first thing, therefore, the Committee have to face is the provision of such new dwelling-rooms. New buildings, therefore, have to be erected, or an ordinary house has to be leased. In either case, there must be a considerable expenditure for furniture, if not for bricks and mortar in addition. Then a Lady Superintendent has to be appointed to supervise the new Nursing Home, and a Staff of Nurses has to be set apart for the new work; and, whether the scheme is financially successful or not, the salaries of all these officials has to be guaranteed to them. In other words, the inception of a Private Nursing Home means that a larger or smaller, but in any case a considerable, amount of money has to be expended to begin with, by the Institution undertaking the new department.

When it is remembered how few Hospitals have any spare funds, how few even have any adequate endowments, how most find the greatest difficulty in making their ordinary income balance their expenditure, it becomes abundantly plain, that any Hospital which determines to start a Private Nursing Home of its own, is not only entering into a commercial undertaking, and one which is often decidedly speculative in character, but is doing so with funds entrusted to it by the charitable public

to be expended in curing the sick within its walls. Two facts, therefore, become apparent. No Committee of an unendowed or poor Hospital—and the sufficiently endowed ones in this country can be counted on the fingers of one hand—could consider itself justified in sanctioning the preliminary expenditure necessary to start a Private Nursing Home, unless it were clearly proved to them, as business men, that it would—once fairly floated—be completely self-supporting, and in addition would be able, either to pay a fair interest on the capital expended in its initiation, or would, within a reasonable time, be able to pay back the capital to the funds of the Hospital.

Consequently, not only have the weekly expenses of the Home to be defrayed, not only have the salaries of the workers to be met month by month, but beyond all this, out of the income of the business—for such, of course, in plain language, it will necessarily become—a certain amount has also to be provided and set aside to repay the initial expenses of the scheme. It needs, therefore, no great arithmetical skill to calculate—given the expenses per annum, and the number of Nurses the Home will accommodate—how much each Nurse must earn per week in order that, at the end of the year, there shall be no deficit. And, naturally, in its honourable anxiety that the Home shall be no burden upon the Charity to which it is attached, the Committee will feel bound, at first, to make a weekly charge for its Private Nurses, which the experience of similar Institutions has shown will not only cover all the necessary expenses, but if of average success will probably produce a profit.

Let us reiterate this. The Committee, in establishing a Private Nursing Home, is employing money given by the charitable public for an altogether different purpose. Events have justified this use of Hospital funds in many places, but in one or two instances within our knowledge the scheme has proved a complete failure—the Home has been unable to compete with existing Nursing Institutions, and after a time has had to be closed, leaving a considerable loss to be paid from monies subscribed for the care of the sick poor. Therefore, the responsible governing body are in honour bound to provide, so far as is humanly possible, for the financial success of the undertaking they thus establish by charitable funds entrusted to them.

Looked at in this light, then, we see how immensely important this question of the charges for its Private Nurses is to any Hospital undertaking to supply such to the general public. We see, moreover, that it would be morally indefensible for the Committee of a Hospital—supported, say, by voluntary contributions—authorising the initia-

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