

situation. A resolution was sent forward to Headquarters. Having recently attended the Association meeting in London, I realise that the resolution will probably die there.

I enclose a list of those members of the Profession who sent you a telegraphic resolution from the North of England.

I also enclose a copy of one of the many letters I have received showing that my apprehension is not ill founded.

Yours faithfully,  
(Signed) G. G. GOODCHILD.

Miss Goodchild greatly values support from some of her colleagues. We publish one of these:—

Dear Miss Goodchild,

Having read about your campaign to protect the interests of the Nursing Profession, and thereby to help those likely to be in need of nursing care, I wanted to wish you every possible success in your endeavours to ensure that a professional status in nursing will receive its just reward and a full share of dignity.

It is very gratifying to read that a Matron has at last taken up the cudgels to fight the evils which are besetting the profession. I do not think people realise how serious they are. Only when people of your rank in the profession take up these matters will anything be done. I only hope that more responsible people will assist you to voice the state of affairs.

Perhaps my own experience will encourage you even further in your convictions. They are so right.

I was unfortunate enough to be stricken with tuberculosis whilst in the Navy, and very fortunately for me I was treated at Brompton Hospital where I found hospital was all that it should be in dealing with disease. I did not know what it was to lack confidence either in the medical men or the nursing staff.

Unfortunately, the disease attacked my spine, and I was sent to a small orthopaedic hospital in my own home county. I was utterly shocked at the state of affairs that prevailed there, and from what I have since heard there are other similar places up and down the country. The "Cinderella" hospitals just cannot obtain the required standards in their staff.

These are an existing example of the menace of the system which does not include the recognised entry of nurses into hospital and subsequent training.

My disease did not distress me half so much as the hell of being at the mercy of such very undesirable people. For the most part the staff consisted of orderlies, untrained nurses, part time assistant nurses; male nurses occasionally came on duty to help on the women's block.

The orderlies could scarcely have been worse. Many were shiftless and idle and dirty. Working with them discouraged young cadet nurses and student nurses, many of whom left the profession and were lost to it for good.

There were eternal arguments mainly arising out of what one could well name "differentials." A patient would ask for a bedpan and a nurse would probably walk all along the block to tell an orderly, in turn, the orderly would say it was not in her list of duties to give bedpans. The nurse would argue that the orderly was paid to do that task. I use this as a simple illustration of the indiscipline which can arise.

We had one orderly, a male, who had been a mental patient, and was entirely misplaced on the ward. I do not need to describe the annoyances we suffered from him.

Another female orderly was so filthy she would go ahead to the preparation of food in the midst of giving urinals or bedpans. Her hands had to be seen to be believed.

I cannot describe the misery of such a place, and there are many who share my views.

At all costs this element should be kept out of the hospitals or in their proper perspective—doing merely domestic work. I for one would rejoice if nurses were given the pay the orderlies get and the latter reduced to a bare minimum.

When one meets a good orderly they usually are good, but alas the shiftless ones outnumber these.

By and large, my experience was that many of them were not even clean in their persons and the language they resorted to to the younger nursing staff was not calculated to encourage good relations.

My two years on my back was a nightmare to me because I had to suffer such things. In the middle of it all I had to have my gall bladder removed and was sent to the nearby infirmary. That was a pleasure in the midst of pain—the clean wards, the efficient kind sister, and staff nurse, were wonderful after my past experience and I hated to go back to the orthopaedic hospital.

Because some of these people had no knowledge of the proper serving of food to patients meal times were often revolting.

Dirty cutlery, crockery, and the food thrown on, any old how. (I may tell you that we hadn't even a ward Sister at this hospital for three months, a young student nurse was trying to administer the ward.)

I have since told professional friends and they can hardly believe what I tell them, except those who came and saw for themselves.

I know many fine women who uphold the best traditions of nursing who have been horrified at what I tell them.

There are many "Therapy" careers which now attract those girls who would normally have gone in for nursing. With County Council grants, and local educational grants these careers are becoming available to all of intelligence. Nursing should not be dragged down by the inception of this new scheme which you are fighting; or it will not attract even the numbers it does now.

If only the wives of people in authority or the relatives of such people could have a glimpse of the second era of "Dickens" characters which have already got into some of the hospitals something would be done. Ignorance I feel is the cause and the fact that many Sisters and Matrons will not rise up in protest but "make do" with this very poor material.

A patient who complains is very often unpopular. I complained loudly and many things were altered but the situation was so bad nothing short of dismissing the entire staff and recruiting a new one would have righted matters.

Nobody takes much notice of "difficult tubercular" patients as you probably know, as we are notoriously temperamental, so the weapons left to fight with were few. I may say my nervous state was infinitely worse than any physical ills at the end of two years.

I may say I know hospitals very well having worked as a V.A.D. in the Royal Navy during the war, and training as an Occupational Therapist afterwards. These posts enabled me to see the best in the service to patients. Our discipline was strict and work hard in the Navy—I was appalled at the laziness of the people I met when I was ill with my spinal ailment. Their lack of medical ethics was terrible. One heard of night staff orderlies talking loudly on buses of patients' private affairs and as they had access to the records of patients a great deal of discussion went on which was highly irregular.

I'm afraid I have been very long winded. I wanted you to know what a grand thing you will be doing if you succeed in your endeavours. My experience is one of many and it was most bitter.

I wish you the very best of luck in your crusade. I was delighted to learn that you are trying to effect these very necessary reforms.

(Signed) S. W.

I'll speak to it, though hell itself should gape,  
And bid me hold my peace.

SHAKESPEARE *Hamlet* Act 1, 2.

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