

the Nurses be kept apart as far as possible (save at meals), and a night Sister allowed to go straight from the erysipelas to an operation ward? The Nurses' food was not good when I was at the London Hospital; some of the materials may have been, but, if so, they were spoiled in the cooking. The night Nurse's food was often insufficient, supper sometimes consisting of sago pudding, bread and cheese; another night a herring or sometimes soup, and this at 9.30 p.m., dinner having been at 12.45 or 1.15. Nurses were allowed to make tea for themselves if they had time; if not they went without.

I was there at the time of the Metropolitan Hospitals Inquiry. On the first day a paper was made out thanking Miss Lücke for her kindness, and saying the charges brought against the Hospital were unfounded. We had not heard what the charges were, but that mattered nothing; we were told to sign the paper, and many did, without one thought as to whether it were true or not, simply because it was wanted at headquarters, and they were afraid not to sign because of getting into trouble. We were told that if the charges were not contradicted, no one would employ London Hospital Nurses. One Nurse, within a week of completing her training was told her certificate depended on her signing; she refused for some days, but at last gave in. She was poor, and going abroad to work, and her certificate was everything to her. That nothing can be done to reform the internal working of the London or any other Hospital until a regular record is kept of each Probationer and submitted regularly to a Nursing Committee is the opinion of—Yours faithfully,
M. E.

NO IMPROVEMENT SINCE '88.

To the EDITOR of the PALL MALL GAZETTE.

DEAR SIR,—From the experience of your Special Commissioner at the London Hospital, I see that it is much in the same state as when I was a Probationer there in 1888-1889. It seems no use pointing out to the Committee, Doctors, and Matron that there is need for altering the whole system. The charges so often brought against the Hospital are ignored or contradicted but not disproved. Take, for instance, the long hours Nurses are on duty—12 hours always on night duty, and occasionally, when changing from night to day duty, a Nurse was kept on duty from 9.20 p.m. to 9.20 a.m. and was on again from 2 p.m. to 9.20 p.m., making 19½ hours out of 24! I was in the ward on one occasion when a Nurse nearly fainted while making the beds at about 6 p.m., having been *on duty all night and most of the day*. Every one knows these things—who cares to alter them? Nobody apparently, or they would long since have been put to an end. Again, Nurses sometimes faint at the evening lecture. Why? Because they have gone down to a crowded room to sit for an hour on a hard, uncomfortable bench, when exhausted by a long day's work. Or else it is a Night Nurse who has gone to bed at 1 p.m., been called at 7 p.m., and gone fasting to the lecture at 3 o'clock, unless she has by good luck been able to make a cup of tea in her bedroom. In my time, too, the food of the Nurses was very bad: stale eggs, bad butter, sour milk, and tough meat were of constant occurrence. Tinned beef, known as "buffalo," was a common Night Nurse's meal. I believe it still forms a favourite ar-

ticle of diet under the title now of "tinned tiger." To have "tinned tiger" as your ward meal is trying, because Night Nurses breakfast at 8.50 p.m., and dine like the "Snark" on the following day at 10 a.m. The number of patients a Nurse has to attend to is often far too great. I was on night duty in the ward known as "Queen," where there were fifty-three cots for children under seven, and often we have worked steadily from 1.30 a.m. to 9.30 a.m., only sitting down for ten minutes at about four o'clock for some tea. The first part of the night was busy enough, but from 1.30, or even earlier, we generally worked without a pause. No time to nurse the children if they cried—No, "You should manage them properly and do the work." Again, how often has attention been called to the fact that Probationers of no experience are sent out to private cases, that they are appointed Sisters over wards when completely ignorant of the work, that they are put into the position of Staff Nurses when they should be learning the rudiments of Nursing! Who will stir a finger to give the Probationers a systematic training? Doctors? They know less than any one else of what goes on in the wards. Every one knew Mr. A. had sworn at Miss B. in the operating theatre. No doubt she was aggravating, but she had never been there before the time when she went as Sister of the Operation and Cotton Wards. I don't suppose Mr. A. knew this; anyhow, he evidently did not care, or had no power to change matters, for Miss B. still kept her post as Sister Cotton, being the responsible head of the Operating Ward, and no doubt "training" the Probationers. It is even worse when one of the two night Sisters is an inexperienced Probationer, for they superintend 800 beds. If people would realize what an amount of suffering these things entail on patients and Nurses, there would be some hope of a change for the better. I have heard it said, "Why do Nurses at the London Hospital submit to be thus treated?" What else can they do? It is only by getting some sort of Hospital training that a woman can become a Nurse. If she complains, she is soon got rid of, and plenty more can be found to supply her place. If she is poor and friendless—as many are—who will help her to get work? Not the Matron, whom she has offended; not the Committee, who do not believe her; not the Doctors, who refer to the Matron for her character. A Probationer at the London Hospital is professionally ruined if she gets out of favour with the Matron, and so she struggles on, hoping to get through her training without breaking down. She shuts her eyes to the evils she cannot remedy, slurs over the work—which is too much to do thoroughly—adopts the Hospital standard of truth and honour, and gets away as soon as possible from the place where she is treated so unjustly and trained so badly.—Yours faithfully,
O. O. P.

These letters are sufficiently explanatory in themselves. I have the names and addresses of both Nurses, one of whom is certificated by the London Hospital, and am assured of their ability to prove each and all statements made herein, and of their willingness to supply trustworthy evidence in support of such statements if required. Perhaps it is superfluous to mention the fact that these letters largely conform to the previous charges I have made in the *Pall Mall*."

S. G.

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