

terested must apply, before 15th September, to the Chairman of the Commission, Mr. J. VAN DEVENTER, Sz., Senior Physician, Director of the Asylum for Lunatics, Meerenberg near Santpoort. After this a list of questions will be sent them, which they must fill up, personally, within a week and return to the Commission, VAN DEVENTER, Tellegen, Rulisch, Secretary."

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THE *Manchester Guardian* published the following important letter on Workhouse Nursing, on the 4th inst. :—

WORKHOUSE NURSES.

Sir,—The revelations that have taken place in regard to the treatment of the poor in some of our workhouses must have convinced a great many people that poor Tom Hood's poem containing the line "He's only a pauper whom nobody owns" is too true, not only as regards the dead, but unfortunately still more so as regards the living. The public conscience appears to have been aroused, and there is a strong desire that something should be done to make our workhouse infirmaries worthy of being what they really are—the State hospitals of England. The object of the Northern Workhouse Nursing Association is to attain this devoutly to be wished for consummation, and for several years they have been doing their best to improve the nursing in workhouses by providing trained Nurses thoroughly acquainted with the duties in a workhouse. It has been found by experience that Nurses trained in first-class workhouse hospitals like Birmingham, Chorlton, Manchester, Marylebone, and several other places are better suited for the work than those obtained from general hospitals. Already the Association has been able to provide 23 unions with Nurses, and in only one union has there been any friction between the Association and the guardians, and in that case we think the public will scarcely blame the Association when they know the manner in which the Nurses were treated. For instance, the stove upon which the Nurses cooked their food was in their bedroom, the paupers' bathroom answered a double purpose, serving as it did as a pantry in which to keep the Nurses' food, such as it was. The cleanliness of the institution can be judged from the fact that one Nurse was considered extravagant because she wanted the counterpanes in the lying-in ward to be washed at least once in three months, on hygienic grounds. Draw sheets were washed in the patients' lavatories and dried at night in the patients' day-room. Hot water was only available for the bathrooms once a week.

Not long since a very experienced union clerk expressed the opinion that the greatest impediments to the employment of trained Nurses in workhouses are the master and matron. In some of the large workhouses the persons occupying the positions named are ladies and gentlemen, but even then it is only in very rare cases that the Matron understands anything about really scientific nursing, and unfortunately they are too often ignorant of their own ignorance, and do very much less than they might do to make the Nurses comfortable. It is impossible to imagine a more short-sighted policy on the part of guardians than that of neglecting to make proper provision for the comfort of their officials. I remember Mr. Basil Caine once saying that "it pays the public to make their officials comfortable, because by so doing they attract the best class of officers, and therefore the work is better done." Now if we are to make our Nurses comfortable, it will be necessary to place the government of the sick wards on a basis similar to that in force in Scotland, where the Board of Supervision require one trained Nurse for every twenty cases, and if the number amounts to upwards of sixty a lady superintendent must be appointed in addition, and in these cases the matron has no authority or jurisdiction, and of course no responsibility. If the Local Government Board

would issue a similar order the work of the Northern Workhouse Nursing Association would be made much easier in one direction, and it would also be made much easier in another direction if the public would assist us financially. The Association is doing its best to assist alike the guardians, the nurses, and the sick poor, but funds are needed to carry on the work, as the training of each Nurse costs about £20. Knowing as we do the good work that has been accomplished we feel that we have a right to appeal to all sensible people to assist in doing our best to cause these horrible workhouse scandals to be only a sad memory of a melancholy past, and not a dreadful reality of the present.—Yours, &c.

JOHN MILSON RHODES, M.D.,

Chairman of the Northern Workhouse Nursing Association.
38, Barton Arcade, Manchester.

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THE necessity for some definite scheme of reform in Workhouse sick wards and Infirmaries is urgent, and we hope that, in due course, certain practical suggestions may be made. But it is plain that until public attention is sufficiently aroused to the crying scandals which at present exist, it would be only beating the air to propose reforms. We must first awaken the Guardians of the Poor to the evils perpetrated under their authority, and obtain the introduction of trained Nurses into every Workhouse Infirmary in the country—then the necessary reforms will follow in natural sequence.

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LAST week, two inquests were held on patients who died suddenly in the Oldham Infirmary. The first was on the body of a man who had jumped through the window, on the third storey, and received injuries from which he died shortly after. Strong comments were made at this inquest on the Nursing arrangements, there being only one night Nurse to three blocks of buildings, containing over 200 patients. The same day (at night) on which the injured man died, the night Nurse unfortunately gave a teaspoonful of atropine solution to a female patient in mistake for whisky. The doctor had informed the coroner that the patient was suffering from heart disease and general dropsy, and would probably soon have died; and also had stated that the Nurse was much distressed and harassed in consequence of the suicide of one of the patients under her charge. After evidence of identification, the Nurse, who was much affected, gave evidence, and stated that at midnight on Wednesday she was sent for to attend to the deceased, who was taken worse. Whisky had been prescribed for her, and it was kept in a bottle in the cupboard, where there was a bottle containing atropine. The bottles were of similar shape, and she gave what she thought was a teaspoonful of whisky. She found the mistake out after going off duty, through the day Nurse coming to her. She knew that poisons were kept in this cupboard, but she had not been herself since the suicide case occurred, and on Wednesday she felt very unwell. She had no sleep that day, and had no extra assistance at night.

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