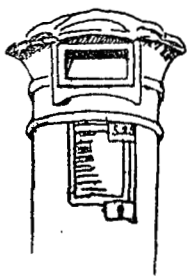


information concerning this or the other similar and valuable manufactures of the same firm, can obtain price lists and all particulars by writing to Mr. E. Pither, at 36 and 38, Mortimer Street, London, W.



Letters to the Editor.

(Notes, Queries, &c.)

Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in any way hold ourselves responsible for the opinions expressed by our correspondents.

CHRISTMAS TREATS.

To the Editor of "The Nursing Record."

MADAM,—Will any of your readers give me some fresh ideas for a Christmas Entertainment? We shall have, as usual, a large tree; but this always seems to me to afford a very short entertainment after an immense amount of preparation. I want to make a pleasant evening for visitors as well as patients and staff.—Yours faithfully,

MATRON.

"TIPPING."

To the Editor of "The Nursing Record."

MADAM,—In answer to the letter on "Tipping," in last week's RECORD, I should like to say a word. I have been a Private Nurse for some years now, and have made it an invariable rule never to tip the servants, and I have never found that they in any way expected it. A hand-shake and a "thank you" have always been enough in my experience. I do not think it matters one little bit if servants do look upon Private Nurses as "sort of servants." It is only what we are, and ought to be proud of being, if we do our work as we ought. The word servant means one who serves another, and surely we can serve our patients without feeling slighted by being looked upon as a servant. I am afraid "L.B." will not have much left of her salary if she has to tip fourteen servants, unless she has far larger fees than—Yours truly,

E. S., Brighton.

UNIFORMITY OF NURSING EDUCATION.

To the Editor of "The Nursing Record."

DEAR MADAM,—If you are disposed to open your columns to any further discussion on the subject of Mrs. Strong's paper, I should like to contribute the following observations;—I quite agree with Mr. Walsham that the question, whether Nurses will be able to pay the fees for the preliminary instruction, depends chiefly on the class from which the Nurses of the future are to be drawn. If they are only to come from the cultured classes, then I do not see any reason why the money should not be forthcoming, as I agree with Miss Kenealy in thinking it is time it should be recognised that daughters, equally with sons, have a claim on their parents, for money to advance them in life. Where there is a medical school, I can quite see that this preliminary instruction will enable a Nurse at once to profit from what she hears at the bedside, instead of being to her as at first it must be without that instruction, somewhat like Greek and Latin. But if the Nurses are, as now, to come partly from the lower middle class, then I feel sure that not only will the money for the instruction not be forthcoming, but that the syllabus of this instruction will deter most of this class from entering; whereas they can take in and understand as much of the teaching as they practically need, if given to them in the course of their training, side by side with their work in

the wards. What I fear, if this system becomes general and compulsory, is that a great deal of good material will be lost to the Nursing profession. That I feel very strongly is a thing to be guarded against. My experience of twenty years teaches me that, notwithstanding all the training, there is to-day no larger percentage of good Nurses than there was formerly, and why? because under all the training, to make a good Nurse, you need a combination of qualities, which is by no means common, natural qualities which cannot be given by training, though without the training they will not make a Nurse, but simply a good woman. Of course there are more good Nurses now than there were, because more women are trained, but there is not, I think, a larger percentage. A great many of our best Nurses come from this lower middle class, and if they are improved off the face of the earth, I think it will be a great calamity. For private Nursing, I feel sure that in the majority of cases, a Nurse of this class is more useful, adapts herself better, and is preferred to a lady as a Nurse. As Matrons and Sisters, ladies are very desirable; but for the rank and file, the lower middle class, with few exceptions, does better. From my work, having been chiefly amongst patients of a better class than the usual Hospital patients, I am, perhaps, better able to gauge what private patients like, than even the Matrons of large Hospitals, with whom rests the training of Nurses both for public and private work. I think if by this system Nurses of the lower middle-class are deterred from coming forward, and we are landed in the future with only lady Nurses, instead of "revolting daughters," we shall have "revolting patients," and, as a consequence, we shall have a class of Nurses springing up, somewhat analogous to the gamp of the past—unable to get training, but supplying a demand for Nurses from a lower class. This would be a grievous result of all the valuable advance made of late years. If there is a sufficient demand for this preliminary instruction, and a sufficient number of Nurses who can afford to pay for it, I do not see why it should not be provided for them; but do not let us lose the valuable material to be found in the lower middle-class, by requiring all candidates for training to pass an examination in medical subjects, before they are admitted as Probationers. To go to another subject that was brought forward by Miss Wingfield, viz., the danger arising to the public from the present practice in the smaller provincial Hospitals, of taking Probationers from an Institution, giving them six months' training, and then returning them to the Institution to be sent out for private work. I most cordially endorse all she said against this practice. The danger of this system is much greater than it was in the old days. Much more is now expected from, and trusted to, a trained Nurse. A woman, after six months, is very far from being a "trained" Nurse; but she poses as one, and is sent out as one; the public is deceived, for it knows enough to wish to have a trained Nurse, but not enough to judge of the quality or extent of training. I think it would be a great work if the Association could initiate any plan for putting an end to this practice, so fraught with danger to the unsuspecting public, and the much smaller matter of a uniformity of uniforms may well stand over till these graver questions are settled.—Yours faithfully,

FLORENCE MEYRICK.

Lady Superintendent Nursing Hostel.

Comments and Replies.

REPLIES.

Sister Alice.—Address Mrs. Andrews, 22, Cheyne Gardens, Chelsea. She will give you full particulars concerning the Matrons' Council. It is probable that the Council will have under its consideration the scheme of a curriculum of Nurse training; but much thought and discussion must be devoted to such an important subject before definite opinions can be formulated.

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