

arranged upon an equitable basis, so soon did gentlewomen in ever-increasing numbers come forward to undertake the duties of a profession for which they were pre-eminently fitted; but from which, under the previous conditions of the work, they were, by their early training and education, entirely debarred. So it is easy to see that the same reform, having been successfully initiated in the Poor Law Institutions—the great principle having been recognised that the poor deserve as careful Nursing as the rich, and, indeed, that in the case of sick paupers the most efficient, is really the most economical, Nursing—it only remains for time to conclude the due development of the movement, and to provide probably an even greater supply of educated workers than will be required to fulfil the demand which has thus been created.

Now, on the very threshold of this movement, there has been an obstruction met with, which is the more difficult to overcome because it is sanctioned—nay, even buttressed and strengthened—by the force of law. It is the very first essential, in the organisation of a Nursing School, that the head of that body should be a thoroughly skilled and experienced professional woman. From this, it follows that in order to obtain such a worker the conditions of her work must be fair and just. Any regulation, therefore, which tends to limit the numbers of those who are willing to undertake this office, must inevitably tend to retard the whole movement, and, therefore, to prevent all reforms and improvements. It is, as the old French proverb would say, in this, as in most other things, the first step which costs.

It appears to us that the Local Government Board, who have on many occasions shown a most exemplary anxiety to improve the conditions under which Workhouse Infirmaries are nursed, have scarcely realised the importance of this initial step, and we would, therefore, express our opinion that, before any reforms can be expected in this direction, it will be necessary for the entire system of the management of the Nursing department of the Poor Law Infirmaries to be entirely revised, on the basis of that adopted in General Hospitals—a system which has worked smoothly, efficiently, and economically. It appears to us to be necessary that the reforms should be radical; that it should be recognised that with the complete re-modelling of the Poor Law Infirmary, with the development, in fact, of the old-fashioned Workhouse sick wards into the palatial modern Institution, has come the necessity for a change in organisation from that typified by the occasional "pauper help" to that of the modern Nurse Training School; and, just as the new Infirmaries in many cases surpass both in efficiency and completeness of scientific appliances even some of the best General Hospitals, so the

Nursing and Medical departments of the Infirmaries should, at any rate, be re-modelled on the basis of the system which has been found to work so well in the older Medical Charities. And we, therefore, believe that, in future, each Infirmary will be provided with its regular visiting staff of physicians and surgeons, and with its resident officers, who may probably retain the title of Medical Superintendent which they now hold, probably also as now retaining their appointments for life. The medical side would be responsible to the Board of Guardians, by whom they were appointed, and should certainly be paid upon an adequate scale for their services. The Nursing department, then, would be a distinct entity in itself. The Matron would have the complete control of the female workers on the establishment and would be responsible for their acts of commission or omission, so far as medical treatment went, to the various medical officers, and as far as the discipline was concerned, to the Board of Guardians. Then, as in the General Hospitals now, the Matron and the visiting or resident staff would each know precisely the limit and the extent of their powers and their responsibilities. With this clear division would disappear the doubts and uncertainties from which at present spring, nearly, if not all, the friction and petty disputes which unhappily so frequently occur in Poor Law Infirmaries—which do good to no one, and which do harm to all.

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#### THE DANGER OF OVER-WORK.

An inquest, held last week, upon a patient who committed suicide at the Camberwell Infirmary by jumping from a verandah, elicited facts of great Nursing importance. It was stated that the Nurse in charge had two wards to look after, one above the other, and containing together fifty patients; that her hours of duty were from 7.30 p.m. to 8 a.m. A jurymen put the case into a nutshell when he said that "fifty patients want a lot of attention, and I do not see how the authorities can expect you to do your duty. You have too many hours and too many patients." And the jury adopted the same view when they added a rider to their verdict that the Infirmary was "not under proper supervision if the Nurses had to work thirteen hours right off, and had fifty patients to attend to." It is time indeed that the public, which realises that railway signalmen cannot fulfil their responsible duties if they are over-worked, should also comprehend that the work of Nurses being equally responsible and considerably more arduous, requires that these workers should be treated with equal consideration and be allowed proper rest, sleep, and regular meals if they are to perform their duties conscientiously and efficiently. Cases of accidental poisoning, which have of late years become far too frequent in our Hospitals and Infirmaries, may be traced to over-work and over-strain, much more frequently than to carelessness or ignorance.

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