

proposal, but it seems to be forgotten that it formed part of the excellent plans framed and adopted by the Act of 1867, by which the sick of the metropolitan district were placed in infirmaries separate from the workhouse; but though long deferred we may hope that the subject is not lost sight of. No other scheme for the careful and efficient treatment of the sick and aged seems to be practicable but to concentrate them in buildings where a suitable staff can be appointed under experienced supervision. In this way also the present half-empty workhouses could be utilised and filled. I have before me an instance of a country workhouse, built for 800, with 45 inmates, 70 being the highest number in the winter. I need hardly say how urgently separate buildings are required for imbecile children, where training and education could be carried out, while beyond the metropolitan district nothing is being done for them.

The separation from friends and home is the one argument urged against this plan, but this is already the case in the metropolis, and the means of transit and locomotion are continually increasing. Half empty workhouses are to be found all over the country, and I ask what better suggestion can be made for utilising them? Of the seven classes into which the inmates of workhouses have been placed (upon paper) only two are now partially separated, and this chiefly in the metropolitan district—the sick in hospitals and the children. All public opinion and experience is advancing to the conclusion that the latter ought to be entirely separated from all association with workhouses and adult paupers, and we may hope to see the result of this conviction carried out in practice. Those who have to engage in the work of supplying efficient Nurses for workhouse infirmaries know the difficulties there are to contend with when the seven classes of inmates are placed under the rule of the same officers. It is unreasonable to expect these persons to be equally qualified for the superintendence of the sick, the able-bodied, the children, the casual, and the vagrant; we ask too much in requiring such a diversity of gifts. For the latter we believe that a far more strict—even police—management is needed, and I will conclude by saying that in no other country in Europe is such an amalgamation of classes placed under one roof and one management as under our English Poor Law.”

It seems almost incredible that, in a rich place like Torquay, where there are so many wealthy residents and visitors, the District Nursing Association should be so badly in need of funds. It appears to be a rather difficult thing to persuade the rich of their responsibilities towards their poor, sick neighbours. People are too fond of saying “They can go to the Hospitals,” and at the same time they are just as apt to neglect to send their subscription to the Hospitals as to the Nursing Associations.

THE *Coventry Times* has been insisting on the importance and necessity of having a Trained Night Nurse appointed at the local workhouse, and in support of its arguments has a short leader on the subject as follows:—

“We drew attention last week to the importance of having a qualified night attendant in

the infirmary at Coventry Workhouse. We should not be again so soon recurring to the subject had not our remarks been so peculiarly borne out by a little incident that has recently occurred in Chelsea Poorhouse. It appears that there during the day the patients in the lying-in hospital are looked after by Nurse Evans, but at night they are in the charge of an inmate, much as is the case in our own workhouse infirmary. In the case of a child who died suddenly an inquest was held, when it was deposed that this woman, when the infant in question cried, ‘pressed its face against its mother’s breast for four or five minutes, after which the child was discovered to be dead from suffocation.’ The jury agreed that this deplorable result was due to the ignorance of the ‘night-attendant,’ and the coroner remarked on the ‘strangeness’ of someone of experience not being engaged. We do not, of course, suggest that anything like this could occur in the Coventry Poorhouse, but, at the same time, the case is one showing the importance of having a fully Trained Nurse to look after the sick and ailing, particularly in the night season, when such persons are least able to take care of themselves, and are more in requirement of intelligent handling and helpful attention.”

In a health newspaper which preaches the superlative advantages of hydropathic methods and ways, an amusing—although it is not intended to be funny—“Hydropathic Dietary” is given.

What is called the “Refrigerant Diet” is supposed to cool the blood and calm the mind, and we should think it would decidedly have that effect in a marked degree. Few people could maintain a boisterous condition of spirits on the following:—

Refrigerant Diet.—Roasted apple, eaten cold, without sugar; sop of toast and water, cold pieces of ice, iced fruity water without sugar, soda water or iced soda water, soda, or potash water with milk; sip cold water; the beaten up white of egg in cold water.

In the terror of the editors, lest anything of a stimulating or exciting nature might creep into the dietary, special, and one would think quite unnecessary, advice is given that the pieces of ice should be “cold.”

We now pass on to what is called “Unstimulating and Unexciting Diet,” which fully deserves its name. It would take a very full-blooded individual to develop much gaiety or excess of animal spirits on a diet of whiting and tripe.

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