



## 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.*

### SISTERS' SITTING ROOMS.

*To the Editor of "The Nursing Record."*

MADAM,—The question that Miss Mollett has raised must be interesting to all those of us where a re-building scheme is under consideration.

I agree with the views expressed in Sister Agnes Collett's letter, published in your issue of November 23rd, and I would add another reason for providing the Sisters with sitting-rooms adjoining the wards to those given by her, namely, the uncertainty of the hours of the visiting staff in the smaller hospitals. The Sister can be immediately summoned from her lunch or tea to attend the Physicians, if her room adjoins the ward.

I do not share Miss Mocatta's view that a naturally unpunctual Sister would become more punctual, or that a Sister who is unfair to her Nurses from any cause, would be more fair if her sitting room was apart from her wards. The Sisters' bed-rooms I would have as far removed from the wards as possible.

The Sisters here agree with me on these points.

Yours truly,

H. F. INGALL,  
Matron.

London Fever Hospital.  
November 26th.

*To the Editor of "The Nursing Record."*

DEAR EDITOR,—Miss Mollett's query concerning Sisters' Sitting Rooms is one of interest, and as she wishes to hear our views, I will with all deference state mine. I decidedly think a "Sister" ought to have a room to herself, but as far removed from the ward as the Hospital arrangements will permit. Firstly, on account of her own health, for when a Sister is off duty she ought to have entire rest and change, both for mind and body, and not be within the hearing or sight of suffering. She will thus return to her ward much more refreshed and better able to train her Probationers. Again, when her sitting room is attached to her ward, my experience is that she is never *really off duty*, for if she hears a strange footstep she feels she must open her door and see who is coming, or if a patient is unusually restless and noisy, the Sister naturally, from habit, cannot sit still, but *must* go out and try what she can do to soothe and comfort that patient, and so her time for recreation slips by, and she returns to her work only half refreshed and without any change of idea.

I think also that Sisters should be provided with a general dining room, where *all* their meals should be nicely and temptingly prepared at the expense of the Hospital, and *not* at their own, and I wish most sincerely that my dear Alma Mater, St. Bart.'s, with all its riches, thought the same.

From the Staff Nurse's view I think the Sister's room ought to be away from her ward, because the Staff Nurse cannot feel the responsibility of being in full charge if the Sister is always on the spot, and I think it is as much a part of a Nurse's training to fit her for the post of Sister or Matron to make her really feel responsibility as to make her clean brasses and scrub lockers; and besides, a trained Nurse likes to feel that she is trusted, and does not care for such constant supervision.

I also think Miss Grace Kerr gives most excellent reasons why a Sister's room should be away from her ward, but let us hope that nowadays there are few Sisters who would so abuse the trust placed in them by setting such an example as Miss Kerr mentions, to her Probationers, and also let us hope there are few Probationers who would follow such an example, for there is no work more noble than that of a Nurse if it is done from the highest motives.

Yours truly,

CHARLOTTE OKELL,  
Matron.

The Infirmary,  
Bridgwater.

*To the Editor of "The Nursing Record."*

MADAM,—I would like to say a few words on the subject of a "Ward Sister" having a room attached to the ward, as I am very decidedly in favour of it. "Sister Agnes Collett," in her letter last week, has set forth most of my arguments for it, so I need not repeat them. I have had to try both plans when I was Sister, and can say from personal experience that I think it a very great advantage to have a room attached to the ward, which should be a sitting-room *only*, not a bed-room. I would only add that a Sister who would in any way abuse the privilege of having such a room is not fit to be a Sister, and would find some other way of evading rules, &c., if she had not a room. There must of necessity be many times when a Sister could not conscientiously be beyond call, and yet might not be required for actual work, and could have, at least, partial rest in her room.

Yours faithfully,

M. H. FROST,  
Matron.

Willesden Cottage Hospital.

*To the Editor of "The Nursing Record."*

DEAR MADAM,—Having held the position of Sister of a ward of upwards of sixty beds for many years at the London Hospital, I should like to say a few words in reply to Miss Mary Mocatta on the subject of Sisters' sitting rooms. This lady condemns them, owning at the same time that she has never, as Sister, tried the possession of a room off the ward. Now I think we must look at this question from various points of view. The organisation required for a small Hospital of from twenty to fifty beds, where the Matron is the acting Superintendent of Nursing, cannot be put on a par with the position which a Sister must hold in a big Hospital containing hundreds of beds, and where the Matron is necessarily an administrative head only. From past personal experience I should say it was quite impossible for any Sister to perform her duty of supervising the Nursing of sixty patients—many of them acute cases—and at the same time attempt to train constant relays of probationers, attend upon half a dozen surgeons and house surgeons, one after the other, making rounds of the various wards from 9.30 a.m. until 10 p.m., unless she had a room into which she could retire for ten minutes' rest now and then between her various duties. The thought, the care and responsibility are enormous; the books and lists for office, Matron, stores and dispensary, must be accurate and detailed, and to perform all these duties in the publicity of a ward, in the presence of patients, Nurses, students, visitors, cleaners, &c., would be an impossibility. It is just these few minutes' rest now and again, during the long hours of duty, which keep a Sister going, otherwise her health would inevitably break down, and the arrangement at the London, by which each Sister has both a sitting and bedroom off the central lobby, is the very best arrangement for a large Hospital. If a Sister performs her duty conscientiously, she must be on duty by 8 a.m., breakfast over, or her work cannot be done to time. The reasons advanced by Miss Grace Kerr for depriving Sisters of their sitting rooms, I hope need not be seriously taken into consideration, and is a question of discipline. I see no reason why the House Surgeon may not have a cup of tea in the Sister's room, nor is it likely to lead to the Nurses enter-

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