



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.

A STANDARD OF AGE FOR NURSES.

To the Editor of "The Nursing Record."

MADAM,—The question raised by your correspondents on the age of the employment of Nurses is an important one, and should, I think, occupy much more widely the attention of all who are interested in the Nursing profession.

It may not be generally understood, as regards the admission of Nurses over 40 years of age into workhouse infirmaries and workhouse sick wards, that the real objection is principally dependent on the question of early superannuation grants. Guardians are naturally, and quite properly, averse to laying upon the ratepayers a heavier charge than is needful for future pensions; it is perhaps insufficiently realised that the total superannuation allowance now paid to Poor Law officers amounts to about £30,000 per annum. Under the provision of the 27th and 28th Vic., c. 42, Poor Law officers (Nurses included) at present possess an equitable statutory claim to a superannuation allowance, after not less than ten years' service, upon becoming incapacitated by reason of mental or bodily infirmity, or of old age. That this grant is dependent on the discretion of Boards of Guardians has without doubt caused some cases of hardship to workers under the Poor Law, but there can be no question that a large number of Boards have acted in the spirit of justice and generosity in at least 75 per cent. of cases which have arisen, in providing for the future of Nurses incapacitated in their service.

There is, however, a fear of burdening the rates for possibly twenty or thirty years with pensions, and the many Guardians to whom I have spoken on the subject have informed me that for this reason Nurses under 40 were preferred. We must look to the Poor Law Officer Superannuation Bill introduced into the House of Commons last Session, and which will be re-introduced this year, to help the older Nurses by making their claim for superannuation a *certainty*, and under which contributions from two to three per cent. would be paid by all officers under the Poor Law. There are, however, many important points in this Bill that should interest Matrons and Nurses working under the Poor Law. The voluntary retiring age of 60 is, I think, too high; the fact that a Nurse cannot claim a superannuation allowance on the ground of old age until she is 60 is not and cannot be approved by the larger number of experienced workers; but the *principle* of the Bill is excellent, and follows upon the line of all other public services. Points such as the above must be debated at a later stage of the Bill.

For further information I should advise your readers to obtain a copy of the Bill from Messrs. Eyre and Spottiswoode, 22, Abingdon Street, price 1½d.

There is much to be said in favour of the employment of older Nurses in a large number of country workhouses, but it must be remembered that in the greater proportion a trained Nurse frequently succeeds a pauper or untrained woman, and that the work of improvement is one that requires great hopefulness and patience, and that a Nurse must not always expect to be welcomed by either the patients or the officials. Middle age should and does bring, as a rule, patience and forbearance with the foibles of old age, and

increased pity for the unnoticed sufferings of chronic disease, and these are the cases that largely fill smaller Infirmaries; but middle age should also bring a measure of rest, and many Nurses have told me that after ten or fifteen years' hard work they had not the necessary courage or hopefulness left for the arduous struggle and often depressing work of nursing our workhouse sick under the present conditions. When these conditions are in some important respects altered, I am certain that our workhouse wards will gain by the experience and the patience of the older Nurses, and that these Nurses themselves will often find a peaceful and useful sphere of work in the quiet country Unions where so many of the sick poor await their care.

I remain, yours faithfully,

J. WILSON, *Hon. Sec.*

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6, Adam Street, Strand.

LIVE AND LET LIVE.

To the Editor of "The Nursing Record."

MADAM,—I am not much given to airing my views in the public press, and in this I think I am wrong, and that we Nurses are much too apt to allow our affairs to be discussed, judged, and the verdict given without having a sufficient voice in the matter ourselves.

So I am going to turn over a new leaf, and will venture when I have some remarks to make, on any of the very interesting questions discussed in the RECORD, to submit my views to your kind editorial eye, so that the correspondence column may really become what we know you would like it to be—a Nurses' Parliament; a living expression of the aims and objects of the profession generally.

With regard to the letters on the subject of the best ages for Nurses, I notice that most of your correspondents are at one in the idea that a woman over forty is of very little use as a Nurse. Now, with this view I utterly disagree. I allow that, perhaps, for the active service of a large ward a younger Nurse may do better. But here again I would always be in favour of one older woman in every ward for the sake of the quieter influence she would bring, and for the moral effect. And I should be most emphatic in my conviction that a Nurse of from thirty to fifty is the most suitable person for private Nursing. In one of the letters a question was asked: "Why do the doctors prefer a younger Nurse?" The answer is that we believe too much to-day in the "smart Nurse," and that is the evil of modern Nursing. If there is any Nursing which is bad Nursing it is that performed by the so-called "smart Nurse"—from whom, were I ill, may Providence defend me! There is far too much interference with the patient on the part of this type of Nurse. She is constantly fussing about; her eagle eye is always on the watch for "interesting developments and symptoms." The patient feels more or less impaled, like the entomological specimen with a pin through him, and his natural emotions are frozen by the unsympathetic, scientific young person who poses as a Nurse. For my own part I would prefer the quiet, restful, motherly woman—even if she called me "dear"—and I should like to see her sitting quietly by my bedside, contemplative and silent, and by her restful presence helping nature to restore me and heal my pains. The "smart Nurse" is a martinet. She is a severe disciplinarian—especially when she is young. The older woman has learnt that law and order do not make up the needs of human life. I remember once being Nursed by a "smart" young Nurse who was very much in request in private practice. During my illness I always felt like a raw recruit under the stern eye of a commanding officer. Oh! how I longed for a stout, soothing, middle-aged person, with soft dumpling hands and an eye in which criticism had no part!

I do not mean to infer that all young Nurses are martinets and disciplinarians, but I do maintain that they cannot have

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