

PACKING THE COUNCIL.

WE intend to deal with the proposed constitution of the General Council of the Royal British Nurses' Association at an early date, as it will be gathered from the report printed in our issue of last week, of the proceedings of the General Council Meeting, that it is proposed to pack the governing body still further with members of the medical and nursing staffs attached to Middlesex Hospital. We are of opinion that it is quite unjustifiable for the officials of public institutions to utilise their subordinates in those institutions for the purpose of supporting their policy in any outside organisation, especially when that policy is extremely repugnant to all honourable and independent members. The relative representation upon the General Council given to the Metropolitan Nurse Training Schools, which support the Association, upon the recommendation of a sub-committee nominated by and including Mr. Fardon, is as follows. The figures are significant:—

Hospitals.	Medical men.	Matrons and Nurses.	Total.
Middlesex ...	7	18	25
St. Bartholomew's	6	3	9
St. Mary's ...	2	3	5
St. George's ...	4	5	9
Royal Free ...	3	2	5

PAUPER NURSING.

A PARLIAMENTARY return has recently been issued concerning the number of sick, bedridden, and aged and infirm paupers in each workhouse, and separate workhouse infirmary, in England and Wales. Information as to the character of the nursing arrangements is also given. An interesting point which is brought out in the paper is the large number of paid officers acting as nurses. The Local Government Board, some time ago, called the attention of Boards of Guardians to the fact that there were still many workhouses where the nursing arrangements were not in conformity with modern requirements. It was pointed out that the office of nurse required to be filled by a person of experience in the treatment of the sick, of great respectability of character, and of diligent and decorous habits; and further that the Guardians would, by appointing paid assistants, have an opportunity of selecting persons with proper qualifications, and be able to hold them responsible in case of neglect of duty or misconduct. Where pauper inmates were employed the Local Government Board was of opinion that there was no stimulus to exertion, no test of capacity, and no responsibility for negligence. It therefore recommended the Guardians to discontinue, so far as

possible, the appointment of paupers as assistant nurses. The present Parliamentary return shows that in London this advice has been largely acted upon, and at the date when the figures were taken there were 1,514 paid officers acting as nurses in the workhouses of the thirty unions, and 848 of these had received previous training. The number of pauper inmates employed as assistant nurses was 349. In many of the London Unions no pauper assistance was employed, but in some the Guardians still supported the system. In Paddington there were 38 pauper assistants to 34 paid nurses; in the Strand there were 41 to 16 paid officers; in Greenwich, 46 pauper assistants to 66 paid nurses; in Stepney, 25 pauper assistants to ten paid officers; at West Ham there were 36 paid nurses to two pauper assistants. In the divisions outside London there were 2,201 paid officers, and 3,094 pauper assistants. In Liverpool, Birmingham, and Sheffield, pauper help was not employed at all. Many of the rural Boards, however, still countenanced pauper assistance

IN-PATIENTS.

THE press has lately drawn attention to the fact that the in-patient, as well as the out-patient departments of hospitals are liable to abuse. Two cases which have recently occurred in the practice of a well-known medical man are quoted. In the first, the patient, who was accustomed to pay a guinea a visit, consulted her medical adviser concerning the illness from which she was suffering. An operation was decided upon, the details as to fee agreed upon, and the necessary treatment was to be carried out at the patient's own home. The doctor lost sight of his patient, and in the end found that she had been advised to go to a certain hospital. She was at once admitted, and the operation cost her nothing.

In the second case, the fees agreed upon were much higher, but the patient was operated upon in a hospital, and no questions were asked as to her social position.

It is, in our opinion, quite inexcusable for persons who can afford to pay for treatment to avail themselves of public charity. At the same time, it is a fact that the poor can always, if necessary, obtain the most skilful medical and surgical treatment, while persons of moderate incomes may spend money which they can with difficulty scrape together, and yet only succeed in obtaining very indifferent attendance. The efficient medical treatment and nursing of the middle classes is a subject which demands attention.

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