

being sent round to the principal hotels as well as to medical men.

Mrs. Edwards, formerly Matron of the North-Eastern Fever Hospital, who now sends out daily nurses from 102, Holland Road, Kensington, tells me a nurse cannot expect to make more than three visits in the morning, as no patients like to be left till late in the day, and often, of course, the distance from one to another is considerable. The cases are of all kinds:—surgical dressings, medical and obstetric cases, chronic invalids for washing, in fact almost everything not infectious, besides many small operations.

The doctors most thoroughly approve of the daily nursing. I have found, says Mrs. Edwards, the work very fluctuating. At times as much as can be done, and at others nothing at all, but I should say the average earnings of a daily nurse are about £70 per annum. The majority of patients require one visit daily only, but there are a certain number requiring a visit morning and evening. The class of people nursed are the middle and upper middle classes. The charge I make is 3s. 6d. per visit; for a chronic or long case, or where two daily visits are needed I sometimes reduce it to 5s. or 6s. daily, according to the means of the patient. This kind of nursing is much liked by many people, who greatly prefer it to having a nurse in the house, in cases where the patient does not require skilled attention after being attended to in the mornings. To do it successfully requires a tactful nurse, as she is so constantly in fresh houses and with so many fresh patients, but of course that applies to all private nursing. I have done a good deal of the visiting nursing myself since I have been here, and I have found it mostly very pleasant work, and have several friends among my patients.

Miss Margaret Rodgers, who has done some daily nursing in London, tells me that the cases she has attended have been, for the most part, those of influenza, pneumonia, preparing spinal cases for examination, and maternity cases. The class of patients attended are, in maternity cases, the upper artizan class, in most others the upper middle class, who have not accommodation for a nurse, and the work has been chiefly night duty. Medical men, in Miss Rodgers' experience, have no doubt whatever of the blessing that the services of a visiting nurse would prove, and there are some doctors who are anxious always to keep her employed. The greatest need for the visiting nurse is amongst people who cannot afford to pay £2 2s. a week for the services of a nurse, but who can manage with a little daily help.

In America some interesting information on this subject was given by Miss Diana C. Kimber in a paper which was read at the Superintendents' Convention, Baltimore, in February of last year, and which was subsequently published in the

NURSING RECORD. Miss Kimber reports that Miss Cunningham, who started work in Rochester, United States, writes:

"A great many of my cases have been amongst wealthy people, who did not need a nurse all the time. Artizans, clerks, florists, railway men, ministers, students, commercial men, porters, waiters, have all employed the visiting nurse.

There being four other nurses in the city who are ready to do visiting nursing, has made little, if any, difference in the number of calls I have had. I think there is much need for this kind of nursing. I like visiting nursing better than private nursing, as I get out more, going from one case to another, there is more variety in the work, and I frequently have two or three hours a day to myself." Miss Cunningham had her first case on March 6th, and the next on March 23rd. From March 23rd to June 30th she had twenty calls, spent twenty days and fifty-four nights with patients, made 140 day visits, attended seven operations, and had to hand over four cases which she could not take to other nurses.

From Newhaven, Miss Kimber received the following reply from a Visiting Nurse, in answer to her questions.

"How many calls have you made?"

"In four months one hundred and fifty."

"Nature of calls?"

"Massage, night work, surgical dressings."

"What class of people?"

"First and second-class."

"How much earned a month or week?"

"Average first month, six dollars a week, average now, fifteen dollars a week."

"Do the doctors approve?"

"The doctors approve, but have not given it much thought."

"Is there much need of this kind of nursing?"

"At present there is not much need of such work, but it will grow when the work is more generally known."

Miss Kimber points out the following advantages of the visiting nurse:—

She is an educative influence, reaching and teaching a section of the community very susceptible to profiting by such instruction.

The care of the sick is not taken entirely out of the hands of the friends, and the dread of the nurse taking exclusive charge of the sick room, which makes many people hesitate to send for a trained nurse, would not arise. This kind of nursing brings the services of the trained nurse within the range of nearly all wage earners. It is a healthier, wholesomer life than private nursing, and leaves a possibility for some kind of home life, and allows play for more individuality, and gives greater opportunities for usefulness and help.

Later news from America is that the various Registries are beginning to supply daily nurses.

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