

## The Nursing Conference.

### THE NURSING OF MIDDLE-CLASS PATIENTS.

By Miss Margaret Breay.



MISS M. BREAY.

The difficulty the middle classes experience in obtaining the same skilled care in illness as is attainable by both their poorer and richer neighbours, and the means of overcoming the difficulty, are matters over which all those who interest themselves in the nursing problems of the present day must often ponder. The duty of providing adequate attention for those totally unable to pay for it is universally recognised as incumbent upon us, and our many hospitals and district nursing associations—supported in some measure by the very people upon whom the expenses of long illnesses press so hardly—are standing witnesses to this fact. The wealthy classes, again, are able to obtain without difficulty a thoroughly competent nurse, should occasion arise. But with the middle classes it is otherwise, and the trained nurse, who seems a necessity if a life (perhaps that of the bread winner of the family) is to be preserved, seems also an unattainable luxury.

To a family possessing an income of £200 or £300 a year, a very average income, it is quite impossible, in the case of a prolonged illness, to pay a nurse the fees which she can command, besides providing her with board, lodging, and washing, and, in a small house, the necessity of housing her is a serious difficulty.

If the employment of a nurse under such circumstances be insisted upon, it cannot be wondered at, that, if the patient is the father or mother of the family, the recovery is often retarded by anxiety as to ways and means, more especially as the expense comes at a time when money is required to meet the doctor's bill, to provide luxuries for the invalid, and change of air during convalescence if his health is to be effectively re-established.

The question to be solved then is how to provide efficient nursing for the sick of this class, while at the same time securing to their nurses adequate remuneration. Firstly, there can be no question that some provision in the way of hospital accommodation should be open to them. At present the need for such accommodation for middle-class patients is met by admitting them to the wards of a few of our General Hospitals on payment of a guinea per week, or three guineas for a cubicle or single ward. This sum by no means covers

the expense of the board, lodging and attention, which such patients receive. On the other hand, the expense of maintaining a home hospital exclusively for middle-class patients would be so large, that, in the opinion of those well able to form one on this matter it is doubtful whether in the west end of London at least, such a home could ever be conducted with a prospect of success. In the suburbs, perhaps, where rent, rates, and taxes are lower, the difficulty might not be so great. In any case, however, the payments which the patients would be able to afford to make would have to be liberally supplemented by the public, if such homes were to be successful. One method of meeting the middle class difficulty has been attempted, in a limited degree, both in this country and in America, and has met with a certain amount of success, namely, the daily visiting of patients who cannot afford to pay for the entire services of a nurse, on the same lines as district visiting is carried on amongst the poor. With a certain class of cases, no doubt, this plan would answer well; for instance, in surgical cases, such as fractures, where the patient requires simply to have his daily bed making and washing performed by skilled hands, cases needing the changing of surgical dressings, and many others which one can call to mind, could be efficiently nursed in this way. Maternity cases among the middle classes would also greatly benefit by the services of a daily nurse. If the nurse paid a visit morning and evening for ten days, or a fortnight, washing mother and child, and performing other necessary duties, in the large majority of cases the rest of the attention required might quite well be given by a member of the household. It is somewhat difficult to get definite information on the subject of Daily Nursing, as it is still in its infancy.

St. John's House, Norfolk Street, which has recently begun to send out daily nurses, reports that the scheme seems likely to prove a success, but that the work has begun too recently for it to be in a position to give much information on the subject. The visiting nurses, are most in demand in hotels, chambers, and flats. Their services are required mainly in surgical and gynaecological cases, occasionally also they are asked to take patients to see doctors, and so on. The employers have been, so far, fairly well to do. It would seem that the daily nurse should, if possible, be attached to a private nursing institution, as many of the cases end by requiring the entire services of one, or even two, nurses. The medical men, whose cases these nurses have attended, have expressed much appreciation of the visiting nurse, and the demand for her services seems to be a growing one. The fact that daily nurses are supplied was, in the first instance, made known by cards of the terms and regulations, under which they may be employed,

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