

The quality of the food supply in public institutions is of the utmost importance in these days of bare-faced adulteration of food, and in consequence of the contract system in hospitals, many nurses never taste a mouthful of nourishing English meat, or bread, or an egg cackled over in this country. Every item of the commissariat (excepting milk) is imported. This foreign stuff, and not the quantity of food provided, is at the root of much dissatisfaction so often expressed by resident doctors and nurses, with the dietary provided, and the Matron or Steward with the best intentions in the world thus fail to satisfy the staff.

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Why do not our London Hospitals and Infirmaries support the excellent stores of the British Food Supply Association. Subscribers to charitable institutions, and ratepayers would then have the double satisfaction of knowing that their money has been twice used in a good cause in thus encouraging and supporting home produce. At the same time a very sharp eye is necessary in the steward's department in many of our Poor Law Infirmaries, where there is no doubt the "open door" stands wide for jobbery.

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We have read with considerable interest the remarks of Mr. Dunstan, the Hon. Secretary of a Nursing Federation in Nottingham, who attended a meeting in Norwich which was held to consider the desirability of forming a Cottage Nursing Federation for Norfolk, a movement which is receiving influential support in that county. Mr. Dunstan explained that it was highly important that the nurses employed should be trained, and in some counties grants from the Technical Education Committee could be obtained for that purpose. In Nottinghamshire they had two classes of nurses, those who had been trained for a year or more in hospitals and obtained a certificate, and those who had had six months training. Of course the short trained nurses required constant supervision, a little knowledge was a dangerous thing and they were far too apt to take upon themselves to prescribe for patients and to diagnose without calling in a doctor. The nurses connected with the Nottingham Federation did no house-work. They had a number of patients whom they visited every day. They were different from the Cottage Nurses who had but one case to deal with, and took the place of the housewife besides attending to the patient.

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We must say if these Nurses with six months training are to do no house-work, we cannot understand of what possible use their services can be to the community. The value of the work of a practical woman who is willing to live in the cottage home of her patient, and do the work of the house-mother who is laid aside, we

have always realized; the one point upon which we have invariably insisted is that this woman should be called a Cottage Help and not a nurse, as she is not qualified to assume the latter title, as she only possesses the elementary knowledge of nursing which every girl should be taught on leaving school. If these short-time "Nurses" are not to supervise the domestic management of the cottage homes it is difficult to know what services they are capable of rendering which will command a salary of from £40 to £50 a year. It is to be regretted that the medical men in the districts in which they work have not pointed out their necessary inefficiency as trained nurses. It is difficult for a lay committee to estimate what is an efficient standard of training, but medical men in the interests of the sick, should educate public opinion on this subject.

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The daily papers have recently contained accounts of no less than three serious charges against women who are actually, or ostensibly, nurses, and the public mind will, no doubt, be still further unfavourably impressed with the genus nurse. We notice these cases because we desire to point out that reputable, and thoroughly trained nurses have no means of disassociating themselves from these women, or of removing from their profession those who have disgraced their calling, and we hope that, in the future, when the question of legal status for nurses comes before Parliament the records which we are now compiling will prove the necessity for the protection of the good name of well trained nurses. Otherwise we should take no notice of these unsavoury cases.

The first case is that of Mrs. Annie Mary Wilson Johnson, who was charged on remand with stealing 7s. 6d. and wearing apparel of William Parker, innkeeper, Clotton Hoofield. She appeared before the Justices dressed as a nurse. She said she did not steal the money as it was given her to buy goods with, but she knew she had done wrong in keeping it. She was remanded to Oakmere Petty Sessions.

The second case is that of Jane White, a "nurse" of Kingsland Road, charged with the murder of Alice Birmingham, and the third a charge of manslaughter against Jane Parry, residing at Mostyn, on the Coroner's warrant, for having caused the death of an infant, by neglecting her duties. It was proved that from the time of its birth to its death the child was given nothing but a little "cinder tea" and a few drops of gin. This case was dismissed by the Holywell magistrates as they did not think any jury would convict.

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Miss Balfour, with the co-operation of other ladies round Whittinghame, is organising a scheme to provide two nurses, to be available for five parishes in East Lothian, whose services will be

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