

From this it follows that the Matron of a Poor Law Infirmary as Superintendent of Nurses, has no legal status whatever, her position is in no sense assured, but dependent on her surroundings.

Every atom of power, any semblance of authority, the Matron may possess, has been accorded her by act of grace, she can claim nothing as her bounden right. If the Medical Superintendent is a gentleman, and of a liberal mind, he will hold the Matron responsible for certain duties in connection with the nursing staff, and general administration of the building, and support her authority. If, on the contrary, he is small-minded, and jealous of his own position, he will give with the one hand and take with the other, and the Matron's responsibilities will pendulate according to the convenience or will of her Master.

Again, the Assistant Medical Officer, being in sole command during the absence of his chief, frequently forgets his true position when his senior is in residence, and lays down the law with regard to what the Matron may or may not do, so far as he is concerned, with overbearing assumption.

On appeal to the Medical Superintendent there is no redress. Professional etiquette forbids any interference on his part. This is but the outcome of an anomalous position; if the Matron is advised by him, she will submit to circumstances, and make the best of it.

Neither is it all plain sailing with the ubiquitous Lady Guardian. There are some women working on Public Boards for the good of the community, whose names will ever be held in grateful remembrance; there are others who, through lack of knowledge and excess of zeal, cause much unnecessary friction and endless complications. It is quite the custom now for Boards of Guardians to refer any suggestions made by the Matron to a Ladies' Committee, and with this result—that nine times out of ten she has no further voice in the matter, and by the time the proposition has been considered, re-adjusted and recommended, the original idea is wholly lost sight of.

That the unsatisfactory position of trained Matrons under the Poor Law, has been one great deterrent to graduate nurses remaining in the service, has long been recognised. The office of Superintendent Nurse, instead of being one to be coveted and eagerly striven for, is seen to be one beset by difficulties, hampered by rebuffs, and socially isolated. Can youth be blamed that it seeks other fields of work, where an assured position goes hand in hand with professional advancement.

Our Nurse-training Schools have become im-

portant institutions, mainly at the cost of individual effort; and but for the fact that the women selected to organise Training Schools under the Poor Law, were, for the first few years of office, given a comparatively free hand, and their efforts encouraged and supported by the Local Government Board, Workhouse Infirmaries would not hold the position in the nursing world they do to-day.

But alas, the majority of Matrons have no longer a free hand. Inch by inch, slowly but surely, the position originally occupied is being wrested from us. Already the boundary line has been reached, "Thus far shalt thou go and no farther." But if we do not advance, we must of necessity retrograde; there can be no standing still.

Of how much the Poor Law Infirmary is capable, only those who have held office and worked in it can tell. Our training schools have not yet reached that high standard of thorough, practical efficiency, which it is possible for them to do. They lack Clinical instruction, there is no recognised curriculum, no fixed standard for a "pass" examination. Too much is left to individual Boards of Guardians, and the value of the Certificates fluctuate in consequence. There should be State examination, and State Registration, there would then be no longer any doubt either in the Public or Professional mind, as to what, under the Poor Law, constitutes a recognised training school.

To those who look on and are conversant with facts, it is evident that the great Parish hospitals have outgrown local administration, and that the term "Union" or "Workhouse," as applied to them, is a misnomer.

They are, in truth, general hospitals worked on recognised institutional lines, and the sooner these hospitals are taken over by the State, and freed from the Union brand, and the workhouse taint, the sooner will the vexed question, as to finding nurses for the sick poor in isolated country districts, become capable of solution.

The hospital system of training is, in my opinion, only applicable at present to Poor Law Infirmaries with a minimum number of 250 occupied beds, for it must not be forgotten that the number of nurses employed in a General Hospital of 120 beds, quite equals that of a Poor Law Infirmary making up 250. In a General Hospital there is one nurse to every three or four patients; in our best Poor Law Infirmaries, one nurse to every eight or ten.

That this suggested reform in Poor Law administration would be a momentous undertaking, goes without saying, but the success which has followed previous attempts in this direction,

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