

dislike the restrictions of a public hospital, and physicians and surgeons who are not attached to a hospital staff are often glad to have a place where they can send their patients and have them under care while retaining the treatment in their own hands. The good will of a number of the medical faculty is necessary to the success of the undertaking, as the patients must come through them.

The nurse in charge is responsible for the rent and furnishing of the house, for all the running expenses, service and ordinary nursing. Patients pay the extra fees of a special nurse when exclusive service is needed, and for medicine, stimulants and the washing of body linen. The charge is usually from \$20.00 to \$50.00 per week, according to the size and location of the rooms occupied. A large house is indispensable.

It would seem that an obstetric hospital conducted on these lines should be a success. Great care would have to be exercised that none but irreproachable cases, sent in by reputable physicians, were admitted, that no stigma could possibly be attached to the patients using it.

In a large city a private hospital for contagious diseases, authorized by the Board of Health, might be a success. The hardship is sometimes very great when patients are removed from their homes to the public hospital for cases of contagion.

A nurse who is familiar with the work and methods of the best hospitals for the care of the insane might make a private sanitarium for those cases a great success.

A home for the reception of persons suffering from nervous prostration and allied nervous diseases would supply a want in some cities. Doctors would be glad to send their patients where they could have rest, suitable occupation—sometimes as essential—therapeutic baths, electricity, massage, or whatever treatment was prescribed, away from the care and worry inevitable in the home life and equally far from the depressing influence of a body of nervous sufferers such as is met with in the larger sanitariums.

A private hospital for children might be made successful when the field is large enough to ensure a sufficient number of patients, and if under the auspices of an eminent surgeon, would seldom be empty.

A hospital for chronic invalids, such cases as are either not received into a general hospital, or not retained there, would be remunerative when once it was fairly established. The occupants would remain for longer periods than acute cases, and there would be an element of stability and permanence about it which would render the financial question a less difficult problem to solve.

(To be continued.)

Nursing Echoes.

* * * *All communications must be duly authenticated with name and address, not for publication, but as evidence of good faith, and should be addressed to the Editor, 20, Upper Wimpole Street, W.*



WE have to acknowledge with gratitude subscriptions of £2 2s. from Mrs. Bennett, and £1 1s. from Mrs. C. H. Raphael, for Sir Julian Goldsmid's Home of Rest for Nurses. Mrs. Bennett, who is at the head of the London Association of Nurses, expresses the warm appreciation of the members who have visited the Brighton Home during the past year.

WE hear from the Matron that Christmas was most merry at the Home, many kind nurse friends sending gifts of flowers and good cheer, which added to the happiness of those gathered under its hospitable roof.

THE old question of "hospital manners" has, during the past week, been running the gauntlet of the press, and a fine castigation has been the result for "Jack in office." The whole conflagration was set alight by an evident lack of courtesy upon the part of a West-End Hospital Matron, in attempting to "snuff out" a would-be hospital visitor, who straightway carried her injuries to the daily press, the valiant champion of abuses which neither touch its pocket, nor its party!

THEN, indeed, were the dogs of war let loose, and helter skelter the snubbed ones poured forth their sorrows. The journalist cannot get "touching copy," nor the society woman a run for her popular philanthropy, and "Indignantly Rebuffed" goes for the "dignified" Matron with the "chilling voice." All this is, of course, highly human and humorous, but, perhaps, not altogether uncalled-for.

We know the *tête montée* Matron. There is a type of woman—ill-educated, and trained up in a narrow sphere, whose careful consideration for the interests of No 1 lands her in a position of authority in the hospital world, and who, in vulgar parlance, "gets above wi' hersen," once planted on a giddy eminence. But this type of woman is rapidly disappearing in these Matrons' Council days, and it is to be hoped that the new century will know her no more. We never liked her.

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