

Government Board should give them good increases of pay after five, ten, and fifteen years' service, and a pension of full salary after twenty years' service—not unfair—twenty years spent in nursing is a woman's whole life of possible work. I say the Local Government Board, and not the Guardians, should give this pay and pensions, because I entirely agree with the recommendation of the Committee that a large part of the expenses of nursing should be treated as the salaries of officers now are, and be paid out of the Exchequer.

Then the Committee propose to abolish the Assistant Nurse—high time, too, when we hear of Assistant Nurses not knowing how to make a poultice or take a temperature—but they have invented a very objectionable person, to be called a "Qualified Nurse." Any young woman is to have this exalted title if she has spent one year in a Minor Training-School, which, to put it bluntly, means a place where she cannot possibly be trained—*i.e.*, the sick wards of a small country workhouse where a superintendent nurse is employed, and where a non-resident medical officer undertakes to give some of his time to instruct her. We know what "some of his time" means. How much time would the nurse get for instruction from medical officers such as we hear of in the evidence of one of the Local Government Board Inspectors? One medical officer, he says, sees twenty-five sick people in a visit averaging a quarter of an hour. Another, with fifteen patients under him, is such a lightning artist that he gets through them all sometimes in five minutes, and never in longer than thirty minutes. We hear from this Local Government Board Inspector of poor bedridden patients who have never been examined by the medical officer for months! What time could such medical officers spare to teach nurses? The pay given to these medical officers is far too low, and so perhaps it is not to be wondered at that some of them measure their services by their fees. But what a place to turn out a "Qualified Nurse" from in one year! You all know quite well that at such a place there is neither enough variety of cases, nor enough of surgical treatment, or the use of modern appliances to give any *training* worth the name. Nor—and I wish to emphasise this—is any nurse beginning her nursing life in this way at all likely to learn that high tone, that standard of professional duty and manners towards patients which it is of first importance that every nurse should have, and which can only be acquired at a proper training-school under a properly trained head. I state again, as a bedrock principle, that it is absolutely wrong to pretend to train young women where no proper training can be given, and, that being so at these smaller country workhouses, it is a fraud on the public to turn out women from them with the official stamp of Qualified Nurse on them, and that it is utterly wrong and unworthy of the Local Government Board to try to get over their shortness of applicants by inducing young women to join for the purpose of getting this title of "Qualified Nurse."

The right way to attract women into the Poor Law service is to improve the conditions of that service, and not attract women by the glitter of a title which will enable them to deceive an ignorant public. It is not only wrong to the public, but it is a gross injustice to the whole nursing profession who have given three or four years of their lives to acquire the status of a really qualified nurse, to flood the country with a

spurious article "Hall marked" genuine. This is not merely my opinion, it is the opinion of every Matron of every Voluntary Hospital, of the Matrons or Superintendent Nurses of all the big Poor Law Infirmarys, it is the opinion of all the best authorities on nursing in England, and of many Boards of Guardians, and I imagine that no petition has ever gone to any Government department so influentially signed as the one against this plan of giving the title of "Qualified Nurse" to unqualified women.

It is lamentable to find in the Report two such recommendations, the decreasing the number of Superintendent Nurses, and the setting up of the Qualified Nurse. If carried out, the standard of Poor Law Nursing will assuredly be lowered instead of raised.

You may ask, What would you do? It is easy enough to get probationers for the big first-class Poor Law Infirmarys, but how would you get nurses for the small workhouses? This always seems to puzzle people, but I really see no difficulty if the Local Government Board would have the pluck to grapple with the subject. It would be quite feasible to train a very much larger number of probationers than at present at the big Poor Law Training-Schools, and a number of others could be trained at the Voluntary Hospitals. The Exchequer should pay both the Poor Law and Voluntary Hospital Training-Schools for training these probationers. Probationers would sign an agreement to serve the Local Government Board for four years. Two to three years of that time (two at first till their number had increased) should be spent in the big training-school, and two periods of six months at one or at two of these small country workhouses. The very great advantage of this system would be that the nurses who go to the small workhouses would not go there at the commencement of their careers, but after they had had considerable training, and had learned the tone of a good hospital and the proper way of behaving to, and treating, patients.

Then the question comes, Whose servant is she? Guardians naturally resent having an increase of those servants who owe their allegiance to some other body, and so this question seems to puzzle people very much. But where is the difficulty? A Board of Guardians would apply to the Nursing Department of the Local Government Board for a nurse for their small workhouse. One would be sent. If the Guardians did not like her they ought to be entitled, on adequate grounds being given, to demand to have her changed; and if the Nursing Department found that a nurse never got on at any place she was sent to, they would cancel the nurse's agreement. This involves the setting up of a Nursing Department, and is the only and inevitable solution of all nursing troubles. May I pray that if this ever comes about there may be some trained women on the Nursing Board, and some women inspectors appointed.

The members of the Committee seem to have feared that if a Nursing Department were set up, the Local Government Board might have a lot of nurses on their hands unemployed. But we all suffer far more from what does not happen than from what does, and I feel very sure that employment would easily be found for all their nurses, even if they have to be sent to relieve some of the poor nurses who are worn out by looking after too many patients, or who are worried into despair by imbeciles or epileptics.

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