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## Editorial.

### "THE SCAVENGERS OF THE NURSING PROFESSION."

No wiser dictum has been uttered of recent times in regard to the relations of doctors and nurses than that of Mr. Douglas Bryan, who asserted in a letter to the *British Medical Journal*, on the subject of the State Registration of Nurses, that "the medical profession have no wish to be the scavengers of the nursing profession," and that "nurses generally would be the last to expect it." In short, Mr. Bryan makes it plain that medical men rely on nurses to organise their own ranks, and "to eradicate that which is bad from their profession and endeavour to produce only that which is good and serviceable."

We have no doubt that if nurses were given adequate powers of governing and controlling themselves they would fulfil the trust thus imposed upon them, with results satisfactory to all concerned. It cannot be too clearly pointed out that, while the medical man is the director of the nurse's work for the sick, and it is her duty to carry out his directions skilfully and exactly, the control of her personal conduct is outside his jurisdiction, and, if he has occasion at any time to question its propriety, he is wise if he reports the matter to the proper authority and "no further meddles therein." The discipline of women should at all times be in the hands of women, and, in the case of nurses, Miss Nightingale has laid down the law that in every well-organised training-school there must be "the authority and discipline over all the women of a trained lady superintendent." What is true of the training-schools is true also of organisation outside them.

In the matter of education we hope in the future, as in the past, we shall receive much valuable help from medical men. But, in disciplinary matters, it is far better that we should manage our own affairs. As effective discipline was never maintained in the ranks of the nursing staffs of our hospitals until trained

women, appointed as Superintendents of the Nurse-Training Schools, were entrusted with its enforcement and given adequate powers for this purpose, so, outside the hospitals, we must ourselves, as Mr. Bryan points out, eradicate that which is bad from our ranks. To know that the medical profession rely upon us to perform this duty would certainly be an additional incentive to its performance.

Nothing is at present more discouraging to those Superintendents of Nurse-Training Schools who conscientiously endeavour to "produce only that which is good and serviceable" than to find that the pupils who have been eradicated as unsuitable can, as a rule, obtain employment without difficulty as private nurses, and that thoroughly-trained nurses have to compete with them in the open market on equal terms. The medical profession repudiate, and rightly, the office of "scavenger"; they cannot discharge it without loss of dignity. We have, therefore, a right to expect that they shall support those who perform this duty, and that they should make it a point of honour to employ as nurses only those whose credentials are endorsed by their own profession.

More and more the public are learning to depend upon the services of private nurses in illness, and it is from the private nurse that they form their opinions of the entire calling. How many of us would care to assert that we are content to be judged by the work and personality of many women who take up private nursing? While the well-trained bring credit to their colleagues, and are a source of comfort and help to the sick, there are many who, if organisation were enforced by means of a State Register controlled by a Nursing Council, would be at once eliminated as possessing neither the minimum educational qualification, nor the personal qualities which make them "good and serviceable." The sooner, therefore, that the work of organisation is inaugurated, the better for nurses, for the medical profession whose instructions they carry out, and for the public whom they serve.

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