

A Sad End.

Miss Lilian Mary Morse, a probationer at the South-Eastern Hospital, Stockwell, was told at the end of three days that she had better give up the idea of nursing on account of a history of phthisis. On leaving the hospital she went to a private hotel in Finsbury where she put an end to herself.

Legal Matters.

THE LESSON OF THE BROOKE DIVORCE SUIT.

The details of the Brooke divorce suit have been widely published, and no useful end would be served by more than a reference to them. Suffice it to say that the divorced woman was before her marriage an ambulance nurse, and that as Dr. Brooke has obtained a divorce on account of her immorality, it is not at all improbable that she will return to the occupation of nursing. Is not this one more argument in support of the plea for State Registration of Trained Nurses, so that the sick may be protected from such persons?

A LAST RESORT.

May Gwendoline Lane, aged twenty, stated to be a trained nurse, was last Saturday dealt with at the Marylebone Police Court, there being two charges of theft against her.

The first was one of stealing a silk blouse from a shop in Westbourne Grove. To this she pleaded guilty, but said her aunt had been "done" at a certain shop, and she took the blouse to make up for it.

The second charge, to which her counsel, Mr. H. H. Curtis Bennett, pleaded guilty on her behalf, was of stealing a ring and a sugar sifter. He urged for the defence that the prisoner's mother was an invalid, and she (prisoner) had been weak-minded from her birth. In her childhood she was troublesome, untruthful, and dishonest, and in order to bring her under discipline her father had sent her to a hospital to be trained as a nurse.

A correspondent writes, in reference to this case: "It would be interesting to know at what hospital this twenty-year-old 'nurse' was 'trained.' It is little wonder that the public cry down trained nursing if hospitals are looked upon as refuges for weak-minded, troublesome, untruthful, dishonest children (for this 'nurse' could only have still been a child when she started her training), and nursing as a means of bringing such under discipline."

We agree with our correspondent; but as hospitals evidently can be found which will accept and train such "deficients," is it not time that the State stepped in and afforded the public some protection by assuming some control over nurses as a class?

Idle Thoughts of an Idle Matron.

Is it necessary to have a set subject to write about? I think not. Lots of little things often come into one's mind far too trivial to spin out into articles, which are none the less suggestive, and give food for thought. Now, there is a complaint one often hears from one's Sisters respecting probationers.

"Oh, Matron, she is so slow, she never gets done."

"No, she doesn't do her work badly, but she is so slow over it."

And I cannot help thinking that it is a pity when the exigencies of ward-work lead to a policy of hustle in the nursing of a ward, and nursing, which should be, *par excellence*, a restful, quiet, gentle performance of duties, reposeful and measured, becomes a kind of hurry-up, slapdash, don't-you-be-too-long-about-it kind of rush. It is a great pity, for the unfortunate probationer becomes imbued with the idea that the one unpardonable fault is slowness, and that if she can only "get done in time" much else will be forgiven her.

Another thought. With some Sisters and nurses nothing is so reprehensible on the part of a patient as infringement of ward discipline. A most excellent thing in its way, without which all hospital nursing would be impossible, but it can be carried to excess. After all, patients are not convicts undergoing penal servitude.

Thank goodness, the old custom of insisting upon a patient's never tucking the bedclothes over his shoulders is dying out; it dies hard, but it is beginning to dawn upon our narrow minds that the creaseless perfection of the quilt is of less importance than the comfort of the being beneath it.

I remember in my probationer days a patient with typhoid who was put on an exclusive diet of whey, and who preferred to stagger out sooner than face any longer that delectable fluid. What a villain of the deepest die we considered him. The terrible risk he ran sank into insignificance beside his breach of discipline, as the feebly damned doctors and nurses impartially starved him.

Then why, oh why, do we worship the brass fetish? I do myself. Why is my hospital gay and sparkling with brass door plates, door handles, medicine brackets, hot and cold water taps, even door springs, which require stern labour to keep them at that sparkling pitch? The brasses! What patent messes do probationers not expend their money on for those idols; how Matron and Sisters go for them when dull or spotted; how we burn incense before their brightness! I ask any sane person to tell me why architects are allowed to riot in these labour-producing adornments in such a reckless fashion throughout hospitals?

It is sad to think that one can never attain one's

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