

Associate Editors are Miss Robinson, Superintendent of the General Hospital, Galt, Ontario, and Miss Hodgson, of Toronto. The "Foreword" announces that *The Canadian Nurse* will be devoted to the interests of the nursing profession in Canada. It is the hope of its founders this magazine may aid in uniting and uplifting the profession and in keeping alive that *esprit de corps* and desire to grow better and wiser in work and life, which should always remain to us a daily ideal.

For the protection of the public and for the improvement of the profession, *The Canadian Nurse* will advocate legislation to enable properly-qualified nurses to be "registered at law," objects with which this journal is in cordial agreement. The frontispiece is a portrait of Miss Mary A. Snively, Lady Superintendent of the General Hospital, Toronto, and the first article, which is from her pen, gives an account of the condition of nursing before an organised system of training was introduced into that hospital less than a quarter of a century ago.

The nurses were "illiterate, and, if tradition is to be relied upon, intemperate as well." They occupied bedrooms opening into the wards of which they had charge, and each nurse carried her knife and fork and spoon in her pocket.

The first Superintendent, when the training school was organised in 1881, was an English lady, Miss Harriet Goldie. Her health failing nearly two years later, she resigned. Two succeeding superintendents remained in office six months and eight months respectively. In December, 1884, Miss Sniveley, a graduate of Bellevue Hospital, New York, took up the work, which she has carried on with such success to the present day. "At this period," we are told, "the nurses occupied rooms situated in various parts of the hospital. They slept in beds without springs. Their dining-room was in the basement of the hospital, opposite the engine-room, and they not only served the meals in the wards, but washed the dishes as well. In addition to an afternoon off duty each week the nurses were also allowed one-half of each alternate Sabbath." An article by Mrs. Hampton Robb deals with "The Nurse and the Public," Miss Elizabeth Campbell Gordon deals with "Practical Points in Emergency Nursing," Miss Charlotte Eastwood sets out excellently "The Meaning and Benefit of State Registration," and there are many other interesting items. We shall look forward with pleasure to the next issue.

The United States Congress has been asked for an appropriation of £4,000 for a new hospital at Carlisle, Pennsylvania, where sick Indian students may receive treatment and where Indian girls may be trained as nurses. They are said to be excellently suited for work of this kind, for, though kind, they are not sentimentally sympathetic, and will obey implicitly the orders given by the physicians and surgeons under whom they serve.

## The Hospital World.

### THE WEST OF ENGLAND EYE INFIRMARY

The whirligig of time brings with it many changes; it removes historical landmarks whose departure we regret; it destroys also many places whose going causes not one single sigh, but rather gladness that science and philanthropy joining hands give to the very poor, not only the best medical aid possible, but also the best surroundings to aid recovery.

In the West of England Eye Infirmary, Exeter, we find the old and new—I cannot say combined, for that is not so (for there one is forcibly reminded of the famous advertisement, "Look on this picture and on that")—but standing side by side for the moment, and in a transitory state. When Miss Kinninmont, the present Matron, entered upon her duties about 14½ years ago, the old infirmary contained fifty beds; it was about one-third its present size; the adults and children were mixed together; there was no nursing staff, the Housekeeper-Matron, when off duty, was replaced by the housemaid.

The medicines, poisons, lotions, &c., were kept handy in two unlocked corner cupboards in the kitchen. The wards, long, bare, and dark, as befitted eye patients in those days, were lighted only by a window at each end, which afforded very little ventilation.

In the women's ward one end was curtained off, and there the person in charge slept with four patients; the only privacy obtainable was by the use of a solitary screen.

The out-patient department was in keeping with the rest of the building, one tiny waiting-room for all-comers, and when that was full they overflowed into the passages, anywhere in fact where there was standing room. One lavatory did duty for all.

The doctor's rooms were dark, bare, and ill ventilated, with walls painted black, or green which looked black.

The dispensary, a mere cupboard, with insufficient room to extend one's arms, let alone to swing the proverbial cat. How could doctors, dispensers, Matrons, nurses possibly work in such conditions expecting good results?

In these days when we are accustomed to plenty of light, space and air, and many conveniences, it seems scarcely credible that only a few short years ago such delicate work as eye work, was carried on under such adverse circumstances.

Miss Kinninmont, although suffering from severe overstrain, steadfastly set herself to improve the conditions of the patients under her care. Windows were cleaned, walls and wood work painted, and, with much cleaning, the wards were made as bright and airy as possible. But, unfortunately, this alone could not make the building suitable for patients,

[previous page](#)

[next page](#)