

speaker and adviser, the County Nursing Associations have, under her, increased in number and prospered wonderfully. Miss Hughes may be assured of the hearty congratulations of all Queen's Nurses, and of their warm wishes for her future happiness and prosperity in her new post.

A writer in a contemporary condemns the uniform of hospital nurses as "of all uncomfortable uniforms the worst," and thinks that even if it is imperative to wear it in the daytime, the nurse might be permitted to don a loose dressing-gown of neat cut at night. We trust that day will never come. A nurse on duty should always wear the full uniform of her calling. When on night duty she rests in the daytime, and there is no reason, quite the contrary, for her to appear in a *negligé* costume. Nor would the well-trained nurse desire to do so. She is proud of her professional dress. Besides it begets in the patient a confidence which is a very valuable asset.

The Belfast Board of Guardians have recently been discussing a complaint preferred against one of their nurses, that she failed to send for the Roman Catholic chaplain to visit a patient who had expressed a wish for his ministrations. His sister who visited the man appealed to the nurse, and not receiving a satisfactory reply, she herself endeavoured to secure the attendance of a visit. The man's name was put by the nurse on the chaplain's book next morning, who had a conversation with him before he died. The issue was, was a request made to the nurse, and the Committee decided that such a request had been made, and recommended the Lady Superintendent to bring before each individual nurse the rules bearing on the matter of sending for clergymen. The Board endorsed the finding of the Committee. Nurses cannot be too careful in securing to patients, without delay, the attendance of the minister of the religion which they may profess, when the patient expresses a desire for such attendance.

"An Englishwoman in Paris," writing in a contemporary on the working women of that city, contrasts them with their English equivalents to the considerable disadvantage of the latter for the most part. The hospital nurse, however, appears to be an exception. We read:—"My afternoon wanderings sometimes take me to the neighbourhood of a certain great public hospital, and once or twice I have had occasion to visit the wards. The difference between the spick-and-span order of an English hospital and the careless, untidy, uncared-for look of the French is very marked; and the slovenly dress of the nurses in their loose holland blouses, with black ribbon caps, is not attractive; but though generally incapable, from our point of view often culpably so, and invariably uneducated, there are good, devoted women to be found amongst them—

women who do not work for money alone, and who have a divine gift of sympathy for human suffering, in spite of their loud voices and rough hands. Their wages are from £1 to £3 a month, with board and lodging, such as it is. The head nurses are generally married women, and live away from the hospital, and consequently get higher wages."

Writing on Visiting Nursing in *Charities*, Miss Marie R. Jamme, Visiting Nurse Committee, Minneapolis Associated Charities, says:—For the second time in the history of the National Conference of Charities and Corrections the district nurses from all parts of the country sent their representatives to the Portland Conference, and held their own sessions.

Owing probably to the great distance, the representation was smaller than last year, but the meetings were fully as interesting, and were well attended.

The morning sessions, of which Miss Fulmer was chairman, were given over to the discussion of the district nurse in co-operative work; training in connection with hospitals, and nursing for small wage-earners.

Realising that the district nurse held an important and somewhat unique position in the field of charitable endeavour an earnest plea was made for a preliminary social training that would give her a broad insight in philanthropic methods.

Whether this training should be given while still a pupil nurse or be taken as a post-graduate course; whether it should be elective or compulsory, and just how much time should be given to it were points in the paper which brought out liberal discussion.

The nurses congratulated themselves upon having Miss Palmer, editor of the *American Journal of Nursing*, with them. While Miss Palmer is not a district nurse, her insight into all phases of nursing was very helpful in the discussions.

Miss Fulmer, of the Chicago Visiting Nurse Association, outlined a plan for the training of district nurses, which was full of practical suggestion—for a three months' course in connection with some visiting nurse association, which would include lectures on social service generally, and some practical experience in charity work as well as practical district nursing under trained supervision.

What the district nurse can do for the small wage-earner who cannot afford the regular nursing fees and is not an object for charity was the subject of an interesting paper, read by Miss Jane Elizabeth Hitchcock, of the Henry Street Settlement, New York, discussed by Miss Quantard, of Philadelphia.

It was suggested that the most workable scheme would be to pay the nurse a stated salary and charge patients according to their means.

In discussion Miss Palmer advanced the

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