

department is not responsible for the general organisation of a Poor Law institution, and cannot be held responsible for the actions of an untrained bathman. Reform is needed in this particular, and in every hospital and infirmary there should be employed a trained male nurse to bath the male patients, and perform other specified duties for them. Under no circumstances should a porter be deputed to attend upon the sick in any capacity whatever. We hope the Chelsea Guardians will institute this reform without delay.

We have on several occasions visited the Chelsea Infirmary, and we have always been impressed with the cleanliness and order in the wards, and the dainty appearance and courtesy of the nursing staff. "Chelsea" nurses are doing admirable work in a variety of public institutions, and in private nursing are doing credit to the system under which they are trained.

The Medical Board of the Victoria Hospital, Kingston-on-Thames, have forwarded a resolution to the relatives of their late Matron, Miss D. E. Dunn, expressing their sympathy and their deep sense of their own loss in her untimely death, and their appreciation of the high ideals with which she was animated, which, together with her professional capacity, marked her out had she lived for a high place in her profession.

An enquiry is being conducted by Sir Henry Littlejohn, on behalf of the Scottish Local Government Board, into the administration of the Falkirk Borough Fever Hospital. Certain allegations as to the maladministration having been made to the Town Council by the Rev. W. W. Miskimmin. The charges were of a very startling and serious nature.

*The Irish Trained Nurse*, wisely reminds its readers to be on the alert, and watch carefully the progress of legislation for nurses, and to grasp the fact that it is not when Bills are passed they should awake. Irish nurses have had two very serious lessons—once over the Midwives' Act, and again when trusting implicitly in the good faith of the Irish Local Government Board, they found by one fell stroke, an Order in Council, they had been deprived of the title "Trained," and that "Qualified" had been substituted. Irish Nurses distrust profoundly Mr. Holland's "Directory Bill," and well they may. We hope they will place their objections very strongly before every Irish representative Peer

and Member of Parliament. On this side it is known as the "Bill for the Subjection of Nurses."

The Editor of this bright little quarterly suggests that the Irish Matrons' Association should discuss a plan for a House of Evening Rest for old and worn-out nurses. "A Dublin Nurse" writes approving of the action of the Meath Hospital Governors in appointing one of their own nurses as Matron, and says, "It is inexplicable why so many of our institutions pass over and belittle their most valuable servants and introduce strangers with no better training. . . . The doctors of the Belfast Union Infirmary seem to be labouring under the same delusion. What a storm of indignation would be raised, for instance, if the same principle were applied to the appointments of our house surgeons and visiting staff? What is sauce for the goose is sauce for the gander. If we must get our nurses from the other side, then why not get our doctors also?" There is sound reasoning in this pertinent argument.

The undignified wrangle between the Belfast Guardians and the Irish Local Government Board on the question of the recent appointment of a lady superintendent, emphasises once more the urgent necessity for a legal qualifying standard for a trained nurse. The Local Government Board have declined to approve Miss Jack's appointment, as "they have come to the conclusion that she does not possess the necessary personal qualifications." The Board recommend the Guardians to re-advertise the post, which they decline to do, and wish the Board to approve the appointment of Miss Jack for a probationary period of six months. Whatever the result, the lady in question will have the sincere sympathy of her fellow nurses.

At a recent meeting of the Cape Colony Medical Council, reports of the Examiners of Midwives and Trained Nurses were presented. They drew special attention, with regard to Trained Nurses, to the imperfect training of candidates in clinical observation of patients and in sick room cookery. It was resolved to communicate with the heads of all training hospitals, impressing upon them the importance of giving definite teaching in these subjects.

If the Matrons had seats on the Examining Body for Nurses and Midwives, as they should have, the curriculum could be arranged in a more practical manner.

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