

written out from memory subsequently, not taken down at the time.

Amongst the evidence offered, Nurse Bristow alleged that in the early part of last year she had 32 cases in a ward for 10 beds. It was impossible to carry out the treatment ordered. Children, seriously ill, for whom poultices were ordered, did not get them. The children were changed at long intervals. There was also a shortage of napkins, and the nurses used towels, pillow-slips, etc., to change the babies with. The night nurse was instructed not to change them. On one occasion, when the Matron reproached her, and asked her where she had been, she had gone down to the mortuary to rectify a mistake made by a probationer in labelling two bodies. She called the Sister's attention three times to a patient whose eyes were bad. The Sister said it was pus in the eye. When she directed the doctor's attention to it, it was found that the sight was destroyed.

Sisters Fullerton and Duncan, and Nurse Webster also gave evidence. Sister Duncan said that when there was a shortage of napkins, the instructions were that the children were to lie without them. Not in wet ones. Excoriation was sometimes due to the children not being washed when they were changed.

Wednesday, February 5th.

NURSE LESLIE said she had to carry out treatment of which she had no previous experience, including applying an ice-bag, giving a hot pack, and giving an injection. Temperatures and pulses were taken in preference to bathing the eyes of measles patients when requisite, because in the former case entries were made in a book for the doctor's information. There were no entries as to the bathing of eyes.

NURSE PATTERSON, a Stobhill nurse, admitted with measles, said the nurses had more to do than they could accomplish. They were terribly busy.

SISTER BESSIE BROOM, Night Superintendent, said that the Matron had done all in her power to keep up the staff. The high mortality in the cerebro-spinal ward accounted for some of the nurses leaving and for others not joining.

SISTER BLACK said she had no grievance, and Nurses M'Leod and Sutherland expressed regret at having signed the paper dealing with the dismissal of the doctors. The latter said she had not read the paper, but was pressed to sign it.

MISS BROOM, Senior Assistant Matron, said she was an applicant for the post of Matron when it was vacant, but had always worked loyally with Miss Landles.

SISTER M'INTYRE stated she knew there had been friction. She thought the nurses felt the Matron was taking a grip of things and making the discipline firmer.

Thursday, February 6th.

MRS. ROWAN, formerly Miss G. K. Adams, wrote repudiating suggestions that discipline had been slack during her tenure of office as Matron, and that the nurses had done their private work in the wards. She also appeared and confirmed her letter. Private work by nurses on duty was, she said, strictly forbidden.

The evidence offered by the two members of the medical staff, Dr. Morton and Dr. Liddell, went to prove there was a deficiency of nurses, and they could not always get extra nurses when they asked for them.

DR. MORTON said that owing to an insufficient report furnished by a probationer sent to bring in a case of whooping-cough, the likelihood of the child developing measles was not recognised. Later it developed measles with the most appalling result.

DR. LIDDELL said the nurses could not carry out the treatment to his satisfaction. The understaffing and overcrowding had a very deleterious effect on the patients.

The Matron's Evidence.

MISS LANDLES said that the nursing staff was entirely under her control, subject to the approval of the Physician Superintendent, whom she always consulted when she dismissed a nurse. She found on taking up office that it had been the custom of the previous Matron to consult the resident medical officers in regard to the changes in the wards. She followed the same rule for a time, but came to the conclusion it was not conducive to good discipline. In many instances she regarded the requests of the resident medical officers as very unreasonable, but when she refused them she informed the Physician Superintendent of her reason for doing so. On being notified by Dr. Mackenzie that if she could not come to some arrangement with the residents as to the staffing of the wards, they were going to make a formal complaint to the Hospitals Committee, she thought she must come to some definite understanding, and herself complained to the Hospitals Committee. In regard to her speech to the Sisters, the version given at the inquiry was not correct.

Friday, February 7th.

Miss Landles said it was not true that she had said to the Sisters that she had the power at Ruchill and meant to wield it, or that she would not have the medical officers interfering with her and her nursing arrangements and that no Sister or Nurse must tell the doctor she could not manage with the staff she gave on pain of instant dismissal; nor did she say no medical officer has any power under the sun, or that anyone discussing her nursing arrangements would be instantly dismissed. She did say, "I am mistress of Ruchill Hospital." The only explanation she could give of the effect caused by her speech was that the resident medical officers resented very much the position she had taken up, and "of course the nursing staff in any hospital would very much rather be governed by the resident medical officer than by the Matron."

DR. JOHNSTON, Physician Superintendent, repudiated all responsibility for the overcrowding of the hospital, i.e., for the admission of 74 cases in a ward constructed to hold 15. He had no option but to take the cases the Medical Officer of Health sent him. He made a daily return to the M. O. H., but could not protest in strong terms to his superior officer.

Witness thought they were understaffed during

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