

should hold public inquiries into all cases of death. Dr. Waldo states that no case of death in private practice has been reported to him for six and a-half years.

The thirty-seventh Annual Meeting of the Governors of the Chelsea Hospital for Women was held at the Hospital last Thursday, the President, the Lord Glenesk, in the chair.

The Chairman, in moving the adoption of the Council's Report for 1907, stated that its most satisfactory feature was the extremely low death rate of less than one and a half per cent. with which they had been able to get through a year's medical work of exceptional difficulty. This was due to the great skill and care of the medical and nursing staffs, and the almost super-care with which all aseptic precautions were observed. The amount of sterilising necessary threw a great responsibility on the nursing staff, and tended, among other things, materially to increase the cost per patient.

The sterilising operations were not confined to the operating theatre; they extended to the wards, the sheets, the cloths, the towels, and everything else, whereas it was at one time considered sufficient to render the dressings aseptic. That was not all. Operators and assistants wore indiarubber gloves, very thin and short-lived, and therefore expensive. White coats and masks, too, were *de rigueur*. It was this super-care which enabled the doctors and surgeons to avoid complicating the patients' maladies by the introduction of microbes.

By the aid of a Sub-Committee and the help of valuable statistics carefully prepared by the Secretary, the Council made a searching investigation towards the close of the year into every item of the Hospital expenditure. The result was extremely satisfactory, as none but minor economies were found possible of suggestion. In these the Council were receiving the cordial co-operation of the Medical Staff.

Comparisons between hospital and hospital were now being made by the big Hospital Funds to an unprecedented extent, but, unless individual circumstances were taken into account, such comparisons might be misleading. Their rightful use had led to much valuable economy, but the necessary statistics threw a lot of extra work on hospital officers at their busiest time of year, and it was obvious that there must be a limitation to such extra work if economy in administration was to be maintained.

The normal income of the hospital required the addition of £2,000 in special donations and bequests to make up the average expenditure. A generous donation of £500 from the Earl Cadogan in memory of the late Countess Cadogan had materially helped in 1907 to show a satisfactory financial result and the City Livery Companies had also given generous assistance. These were vital facts to be remembered by all friends of the Hospital, and they were earnestly asked to remember also the invaluable work of the Convalescent Home of which the Treasurer, Mr. Henry E. Wright, was such a generous supporter.

State Registration in Holland.

DUTCH NURSES PLEAD FOR STATE PROTECTION.

According to my promise I send you some extracts from our second Petition, addressed to the Second Chamber of our legislature by our Association, Nosokomos.

EXTRACT FROM THE SECOND PETITION.

The Board of Nosokomos is gratified to note that many members have been pleased with our Petition of the 24th of September. Certain members, however, being of opinion that the training should be wholly left in the hands of private persons, we take the liberty to pray you not to consider training a private matter, but to institute State supervision of the nurses' education. Private initiative, some fifteen years ago, did much to improve nursing, both in hospitals and in homes. This improvement did not last. On the contrary a decided depreciation in the class of probationers is to be observed, and it is becoming more and more evident that those certificated are unfit for their task whether as Matrons or as private or district nurses.

The scientific side of nursing has developed very rapidly during the last few years, and is assuming still larger proportions. A corresponding general and professional development of the students is not taking place. On the contrary, such development is not increasing, but declining.

It is difficult to give an exact idea of the limits of the nurses' scientific training, but we may quote the testimonials of some eminent physicians to prove its wide range. Dr. Mendelssohn, the well-known Austrian physician, has said that doctors should not forget that they only remain for a quarter of an hour with the patient, the other 23½ hours the nurse has the responsibility, a reason why she should have the most careful training.

Dr. Roux, the director of the Institut Pasteur at Paris, said in a speech at the opening ceremony of a well-known training school for nurses, that the modern nurse requires not only devotion, nursing has become a profession, so that she should combine a great general knowledge and much study with an infinite devotion. The whole responsibility for the patient rests with the nurse from the moment the physician or surgeon has left till the next morning. Should anything unforeseen happen, she has nothing to rely upon but her own knowledge, which, therefore, must be very extensive.

Dr. Stumpff, the director of one of the municipal hospitals in Amsterdam, addressing nurses in his work on nursing, says: "We no longer want you to obey our orders blindly. You have become our assistants, you complete our work."

So we see that the nurse is no longer a person who should mechanically execute the doctor's orders. She has become figuratively speaking his right hand. She must be capable of judging in his absence; she should know the different symptoms and their meaning; she should know when medical help is necessary; she must exert her common sense; when the doctor is absent she must

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