

Nursing in the Reports of the Poor Law Commission.

Having been myself an officer under the Poor Law—*anglicé*, a workhouse nurse—I naturally looked forward with keen anxiety to the Report of the Commission, and turned at once to those parts of it, or, rather, of them, for they are three, though not exactly triune, which deal with the nursing side of the question.

Shall I tell you, first, something—a few things—out of my own experience?

In my Infirmary we had more than the number of nurses which, by the Local Government Board's Order of 1897, rendered it necessary for a proper Superintendent Nurse to be appointed, with nurses under her. My assistants, however, although addressed as nurse, expected to do the work of nurses, wearing the uniform of nurses, and lodged in the Infirmary, were wholly untrained, and were called "wardsmaids."

I reported this to the Local Government Board, who were good enough to reply, confirming the arrangement, *which was directly contrary to their own order.*

Although my nurses were entirely untrained, one of them, each taking it in turn, was on duty as night nurse, without supervision, as a regular thing.

The midwifery cases were attended by the doctor, if he happened to be at home and arrived in time. If not, they came off, somehow. I happened to have taken my C.M.B. certificate, but that was a chance, midwifery not being required of the nurse in charge.

We were not medically inspected during my term of office, nor, indeed, could we be, seeing that for over six hundred workhouses there are one senior and one junior medical inspector, and to these must necessarily fall also much of the routine and clerical work of the Board.

Pauper assistance we constantly employed, simply because there was nothing else to be done. I well remember having to ask the Master for help at night with a poor, delirious patient, but I had to sit up as well, to prevent the pauper assistant from hurting the sick man.

If a man became seriously delirious, provided he had not a temperature, he was consigned to the padded room, with a young and ignorant porter as his only attendant. I remember sitting up a good many nights to prevent that. And as to decency, it is wiser not to mention it.

As for hours, it was useless for me, as nurse in charge, to try to get my time off duty. It was impossible. Nothing could be left to the

untrained wardsmaids. For six weeks at a stretch I have been on duty eighteen hours daily, snatching my meals as best I could, and being called up at night as well.

Not long after I left a patient committed suicide by getting through a window. Well, what wonder? No nurse whom I know can manage to be in six separate wards at the same time.

And so I turned hurriedly to the nursing side of the Reports—to find an interesting study in contrasts. The Commissioners appointed a special investigator into the question of medical relief in all its phases, including nursing, in the person of Dr. J. C. McVail, the well-known Medical Officer of Health for Stirling and Dumbarton. Unfortunately, no woman was joined with him in the work.

Taken as a whole, the following quotations from his report to the Commissioners form a practical condemnation of the whole system of Workhouse Infirmary and other nursing. By "other" I allude to that which is supposed to be carried on in the mixed general Workhouse.

Report, page 267: "Dr. McVail informs us that every one of the institutions visited by him 'would be the better of a rigid examination at not very infrequent intervals.' He recommends that there should be 'systematic medical visitation of all Poor Law institutions.'"

Page 144: "As regards the rural Workhouses visited by him, Dr. McVail is of opinion that the nursing arrangements are, with a few exceptions, inadequate."

Page 861: "Looking at the facts with regard to the individual rural Unions which I visited, I have concluded that the nursing staff is insufficient in the majority of them. . . . In one Workhouse the sick wards contain 24 beds, of which 16 were occupied, 9 of them by bedridden cases, and one of these with a bed-sore. For all this work there was only a single nurse, both for day and night service, and her duty included attendance at confinements in the lying-in ward. . . . In only two or three of the rural Workhouses have I been able to form the opinion that the staff are sufficient."

Page 273: "My general conclusion is that even where Guardians provide excellent, or, perhaps, extravagant modern buildings, and equip them most elaborately with modern medical and surgical appliances, and furniture and furnishings, yet when they come to the appointing of a staff to do the work of these fine institutions, liberality of policy fails them, and parsimony takes its place."

Page 863: "Even in some of the large

previous page

next page