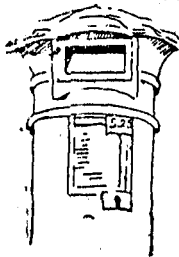


## Letters to the Editor.



Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in any way hold ourselves responsible for the opinions expressed by our correspondents.

## OUR PUZZLE PRIZE.

To the Editor of the "British Journal of Nursing."

DEAR MADAM,—It was indeed a very pleasant surprise when I received cheque for Puzzle Prize. With many thanks,

Yours sincerely,  
E. HEATHCOTE.

## MR. HOLLAND'S EVIDENCE ON POOR-LAW INFIRMARIES.

To the Editor of the "British Journal of Nursing."

DEAR MADAM,—May I, in order to reply to Mr. Holland's statement that he is "at a loss to know what I can find in his evidence which I can say is unfair to Poor-Law Infirmaries," so far trespass on your space as to quote certain extracts from his evidence, as printed in Appendix, Vol. III., of the Royal Commission on the Poor Laws, which statements appeared to me (as to others who were equally indignant at their tenor) to criticise very harshly the spirit in which those of us who are nursing in Poor-Law Infirmaries do their work. (a) In speaking of patients (questions 32,638—32,642) as being unwilling to enter Poor-Law Infirmaries if hospital treatment be not available, Mr. Holland stated that "they would not go to the Poor-Law unless compelled," and in the following answer: "A Poor-Law Infirmary does not treat patients the same; it is not educational; the work is not scientific; there is not the same scope for operating. It is altogether run on a different line."

As a comment on the above I would point out that these remarks do not appear to have any connection with relieving officers, or of the treatment of patients before admission; that they are both unfair and unjust as regards the treatment in the wards by the nursing staff; that the work as regards the training of nurses in an infirmary training school is quite as educational as is that in hospital, and the medical and surgical treatment of the patients quite as "scientific"!

(b) Answer 32,644 states that "when patients come to the hospital we do try to show a little love and sympathy to them. . . . The treatment is altogether different."

Possibly from the context Mr. Holland may be referring to the treatment of applicants for relief by relieving officers, but I would point out that he expressly says when they "come to the hospital," not when the almoner makes his or her inquiries, and the treatment of patients in the receiving ward of an infirmary—i.e., when they "come to the infirmary," is not a whit less sympathetic than is that which they receive at the hospital gate.

Answers 32645, 32646.

Q. "You say the influences connected with the hospital rather encourage the man to make the application?"

(c) I do not say encourage; but he knows he will be treated with very great sympathy and kindness there." (This would appear to mean treatment after, not before, admission, and I took it to mean the treatment by the ward Sisters and nurses.)

Q. "Whereas the influences necessary with regard to the Poor-Law are rather deterrent? (d) The object of the Poor-Law, as I should say, is to do as little as possible for a person, and to do it as reluctantly as possible. That is the spirit I always saw; I may be wrong. The object of the hospital is to do as much as possible. We are there to try and relieve misery. The Poor-Law people are not there for that; they are there because they do not want the scandal of corpses lying about the street."

There is nothing in the above to show that Mr. Holland intended it to apply to one particular section only of "Poor-Law," i.e., that connected with applicants for relief, or to one particular class of "Poor-Law people" only, viz., relieving officers. On the other hand, the expression "Poor-Law people" conveys a very wide meaning, and would appear to be meant to cover all those in the service, including, naturally, the medical and nursing staffs of the infirmaries; hence our indignation.

Q. 32670.—In speaking of the treatment of pauper cases at voluntary hospitals, "Q. It frequently occurs that you have cases, which properly should be treated in the workhouse infirmaries, there to the exclusion of other cases? Yes. When you say properly treated in infirmaries I am assuming that that case could be treated there. (c) There are not many Poor-Law Infirmaries which could carry out the operations which are done, and many of the Poor-Law Infirmaries have certainly not got as good doctors as we have got at the hospital."

I am very glad to see that Mr. Holland did not intend in any way to cast reflections upon the humanity and sympathy shown to patients in infirmary wards, and I feel sure that he will much welcome this opportunity of showing clearly exactly what he did and did not mean in his evidence before the Royal Commission.

Yours truly,  
MATRON OF A METROPOLITAN POOR-LAW  
INFIRMARY.

[Owing to lack of space a letter on this matter from Father Higley is held over till next week.—Ed.]

## THE HOME HOSPITAL SCOURGE.

To the Editor of the "British Journal of Nursing."

DEAR MADAM,—I think many Superintendents of Nursing Homes will have read the letter of "A Superintendent who has Suffered" with a fellow feeling. I have no hesitation in saying from some years of personal experience that gossip, shabby gossip, is the habit of many private nurses who go in and out of the homes in the West-End of

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