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Editorial.

THE SUCCESSFUL PRIVATE NURSE.

Many qualities go to the making of the successful private nurse, and it is not always the one who is most appreciated as a hospital worker who is most acceptable to the sick public. For this reason, amongst others, the co-operative system is the fairest for private nurses, for in no branch of nursing does individuality count for so much. A nurse who has been engaged in private work for some time, and has proved acceptable to patients, is always in demand, for she has built up a connection, and doctors and patients who know her work are only too anxious to secure her services.

Another nurse, who has not the qualities which make for success in private work, has, on the contrary, to depend upon general calls—not being specially asked for. She therefore may have a considerable amount of leisure time between her cases. When both nurses are working for an institution, for a definite salary, the one who is always hard at work reaps no financial benefit; the nurse who is not asked for has, on the other hand, no incentive to make herself acceptable to patients, and so to secure an increased number of cases. Her salary is secure whether she is at work or not, and she has no anxiety as to board and lodging between her cases—these are provided for her by the institution with which she is connected, and she has besides the liberty and recreation which the hard worker has to forego.

If the two nurses are working on a co-operation, on the other hand, the one gains the reward of her work in securing a larger amount of fees, and in building up a *clientèle* upon which she can depend for future support. She is, moreover, a desirable co-

operation nurse, because she can be sent to a case with confidence, in the certainty that the society with which she is connected will be applied to on a future occasion should a nurse be required, either for her services, or, if they are not available, for a nurse equally good, for she has been careful of the prestige of her Association, and the public apply to it with confidence. Another nurse, equally well qualified, may frequently return from her cases after a short period. If she is wise, she will consider whether there is any reason for this, and realise that when sent to a case it depends upon her own efforts to make herself acceptable to the patient and to the medical attendant. If after a fair trial of private work a nurse finds that she is not asked for, then she should seriously consider whether she is suited for this particular branch of nursing, or whether it would not be well to consider if her talents do not lie in another direction.

It is not given to every nurse to possess the qualities which make for success in private nursing, any more than every nurse has the capacity for managing a ward, or as a successful administrator as Matron and Superintendent of Nursing. Talents are happily diverse; it behoves each individual to discover in what direction hers lie, and then to find her life's work in a sphere for which she is suited. It is useless to persist in attempting to fit the square man to the round hole. It is only productive of annoyance to all concerned, and it is unwise because there is a hole which every man and woman is intended to fit.

It may be, however, that the nurse fails to be appreciated for reasons which are not fundamental. She may be too arbitrary or inflexible in her methods. A few words of practical advice from an older nurse may then be of much value to her.

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