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EDITORIAL.

A HOSPITAL FOR PRIVATE PATIENTS.

It is announced that a new hospital for the accommodation, in the first instance, of some forty private patients is to be erected in Vincent Square, Westminster, and that capital of £18,000 has been subscribed for the purpose. The promoters of the movement are laymen, with the addition of Dr. Harvey Hilliard, formerly connected with the Colonial Medical Service in Ceylon. The management of the hospital is to be chiefly in the hands of a committee of medical men, and the charges to patients will be from three guineas a week and upwards. It is stated that the scheme "will not be in any way of a charitable character," but this is somewhat contradicted by the statement that "after payment of a moderate dividend on the preference and ordinary shares a substantial sum of any balance of profit will be set aside each year to form a fund to assist necessitous patients in paying their fees. This fund will be administered by a committee independently of the Board, and will be open to charitable contributions from outside, though no appeals will be issued."

The payment of medical fees does not apparently come under this provision, but it does not appear to be a desirable method to take charitable subscriptions, sub-rosa, to assist patients to pay the fees charged by the hospital, when it is expressly announced that the scheme is not in any way of a charitable character, and when the institution will compete with private Nursing Homes managed by trained nurses on purely business lines.

We think, also, the promoters of the scheme are over sanguine when they expect to make a profit on private patients who pay only £3 3s. a week. Having an intimate and practical knowledge of the

working of one of the first, and most successful, private Nursing Homes in London, we can say, with assurance, that, if twelve patients are admitted, each will cost £5 a week before any profit is made, that is, if they have the best skilled nursing, refined domestic service, ample food of the best quality, unlimited supplies, and perfect cleanliness. To maintain this cleanliness means the employment of a large and well-trained domestic staff, and such service in London is costly. Washing bills are also heavy, and the frequent disinfection of rooms and bedding, and the remaking of mattresses, are also expensive items. Fires must be kept burning night and day, the nursing service is continuous for the twenty-four hours, and the salaries of nurses must be adequate if their services are to be retained. Superintendence, maintenance and repairs of the fabric and furniture, and renewal of crockery, are ever recurring expenses; moreover, the cooking must be first rate, and the wages of the cook therefore proportionate, if a private Nursing Home is to succeed; coal, lights, rates and taxes, and unexpected incidental expenses are also considerable items.

The only way to efficiently finance an up-to-date private hospital, for patients of limited means, on business lines, and at the same time to charge moderate fees, is to form a co-operative society to which a fixed sum is paid annually, as an insurance fee. Whatever the scheme, its finance should be sound, and the temptation to exploit the nursing profession either by the employment of an inadequate or partly-trained probationary staff, or to augment the income by profit-making through a staff of private nurses, would be quite inexcusable. Whenever hospital work is to be done on the cheap, it is the nurse who pays. We hope that the promoters of the new scheme will carefully avoid these pitfalls.

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