BRITISHJOURNALOF NURSING

THE NURSING RECORD

EDITED BY MRS BEDFORD FENWICK

No. 1,250

SATURDAY, MARCH 16, 1912,

Vol. XLVIII

EDITORIAL.

NURSES' SALARIES.

The question of nurses' salaries is one of importance, not only to those who earn them, but to the public at large; for if salaries are insufficient, and nurses constantly careworn about ways and means, it is impossible for them to give their best work to the sick public, who are therefore the ultimate sufferers. The Lancet in a leading article in its last issue on the "National Insurance Act and the Modern Interpretation of the Hippocratic Oath, claims, in the words of the late gifted President of the Royal College of Surgeons of England, that the medical man has three duties, "his duty to his patient, his duty to his profession, and his duty to himself," and in the last-mentioned item may certainly be included the duty of securing a sufficient Our contemporary points out further, that "it was allowed in the House of Commons in words, that no man of ordinary capacity can do his duty to the sick under the continued pressure of sordid cares; and hence that a proper remuneration of the medical profession, as a body, is essential to a complete utilization of their powers as guardians either of private or of public health.'

The same argument applies with equal force to nurses. If the salaries paid to them are so small that they are "under the continued pressure of sordid cares," they cannot give their best energies to their daily work. This specially applies to nurses holding single posts, who are endeavouring to live on inadequate salaries.

Probationers and nurses in hospitals, if their salaries are small, at least are assured of house room, attendance, food, washing, fires, lights, and uniform. The nurse living on a small income learns by bitter experience the cost of all these things which she has been apt to take as a matter of course.

She finds the problem of rooms and attendance—especially in or near London—one of the most acute. High prices are asked and obtained even for dingy and sordid furnished lodgings, with most inadequate attendance; her food is ill cooked, its cost seems out of all proportion to its quantity; and, coupled with the worry of making ends meet, digestion and temper suffer in consequence. It is therefore not surprising that many nurses, who have tried both, prefer a moderate salary in an institution, with substantial emoluments, to one of £80 to £100 per annum, on which the cost of living leaves a very slender margin after out-of-pocket expenses have been defrayed. Yet, even in institutions, trained nurses are often ill-paid; we say trained advisedly, for the nurse in training is probably one of the best paid workers in the community. She receives frequently a salary of from £8 to £20 a year and emoluments while still in her apprenticeship, while a very usual salary for a ward sister, whose duties are most responsible and exacting, is £35. For this she is expected to take the responsible charge of 30 to 40 acute cases, to supervise and direct the work of the nurses and domestic staff in the ward, to receive and be responsible that the doctors' orders are carried out with minute accuracy, to interview the patients' friends, and to keep everything in a high state of efficiency. There is no doubt that the salary she receives is in no way commensurate with the work she performs.

The two classes of Nurses amongst the rank and file who are most adequately remunerated are probably private nurses who receive their own fees after the expenses of working a well-managed society have been paid, and the members of Queen Alexandra's Imperial Military Nursing Service, in which Staff Nurses begin with a salary of £40 increasing to £45, and Sisters at £50 increasing to £65, besides receiving

pensions on retiring.

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