

earshot, and asked, without any apparent bitterness, "What *can* we give this new Miss to do?"

I have said before that it was hot. I had on new prunella shoes the torture of which I shall never forget, and the unintentional hopelessness of sweet Sister M.'s inquiry sank deep into my soul.

I shall find it difficult to convince the present-day Nurse that my training included lessons in deportment.

It was the privilege of the L.P.'s each morning to present themselves before their Superior and to be shaken hands with. I use the expression advisedly—it was considered "familiar" of the L.P. to shake. She had also to be careful not to drop the Superior hand as though it were something unpleasant! Erring, as I generally did, on one side or the other, I was constantly ordered to "shake hands again in a proper manner, Miss."

My mode of entry into the office was also a ground of offence, and I have had to make several entries in one morning before I hit off the exact attitude of deference and grace. I need hardly say that, to my colleagues, this performance gave exquisite enjoyment, and the keyhole was in great request. "Go on your hands and knees and see how that will suit," and other friendly suggestions would follow my disappearing form. (Dear things! What lovely times we had, in spite of everything.)

My skull, I suppose, was not of the shape considered suitable for an L.P., and my cap would be tugged from side to side in vain endeavour to make it cover both ears. These particular portions of anatomy were considered unsuitable and unnecessary to an L.P., and were not supposed to be visible.

"I never knew such a head as yours, Miss, and such a don't care expression!" Or it would be: "Take those puffs out of your sleeves. Stay in from your pass this afternoon; don't do it to-night when you go to bed, or you won't have time to say your prayers."

Once I had the temerity to ask if I might go off five minutes earlier to catch a train.

"No, you may not, Miss; not that you are any use when you are on, but you are not going off."

Pride goeth before a fall, and after all it was hundreds of years ago. L. P.

The Trained Women Nurses' Friendly Society and the Scottish Nurses' Branch of the Women's Friendly Society of Scotland have agreed to transfer members, should members of either Society take up permanent work, from one country to the other.

THE ISLA STEWART MEMORIAL COMMITTEE.

At the meeting of the Isla Stewart Memorial Committee held at 431, Oxford Street, London, W., on Friday, 24th ult., Mrs. Shuter, the Hon. Secretary and Treasurer, reported progress to date. Close on £200 has been received since the appeal was issued four months ago, £56 of which is promised as annual subscriptions for two, three or more years. A good many collecting cards have not yet been returned. A detailed report will be presented at the annual meeting of the League of St. Bartholomew's Hospital Nurses on the 29th June. Several of the donations and subscriptions are of a very generous nature, but it will be a pity if those who can afford little do not subscribe, as small donations and subscriptions will be equally welcome as larger sums. Small sums soon make up a handsome total, and it is the spirit which prompts the gift—not the amount—which we all know would have been valued by the most generous of women, whose devotion to our professional work and noble character we are anxious to affectionately commemorate. All information can be obtained from Mrs. Shuter, Cleveland House, Chiswick Lane, Chiswick, W.

NURSES AND THE INSURANCE ACT.

The impossibility of obtaining definite instruction concerning nurses and the Insurance Act from the Commissioners, or plain replies to plain questions, makes it very difficult for nurses to grasp their relation thereto. One thing is undeniable: that the profession as a whole bitterly resents its provisions, as far as they understand them; and from letters received, many nurses intend to do nothing until compelled by the long arm of the law, if it can reach them! Then one matron says her staff hopes the Bill will not pass. The Bill *has* passed—the Act will come into force on July 15th next, and the profession *must* realise it. The hospitals do not yet know how the Act will affect them, owing to the medical strike. The committees and some honorary medical officers of hospitals seem to think that their terms of appointment cannot be affected by the decisions of the Medical Union. Here they are wrong. No consultant can safely play the part of "blackleg" in relation to the decisions of the overwhelming number of general practitioners—upon whom his practice depends—and any attempt upon the part of hospital committees to exercise authority would result in the patients being deprived of medical services and closed doors! No, the whole lay

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