

Charity Ward, and Miss H. Scrase Sister of Kenton.

The enquiry by Mr. W. P. Ellis, Local Government Board Inspector, into the circumstances attending the resignation or suspension of probationers at the Fusehill Workhouse Hospital, Carlisle—the outcome of the friction between the Superintendent Nurse and the subordinate nurses—is now closed. The nurses concerned were the Superintendent Nurse (Miss Mary Kervin), Charge Nurse Todhunter, Acting Charge Nurse Cole, represented by Mr. J. G. Lightfoot, and Probationer Nurses M. Y. Ashley, J. Ashley, Dinsley, Armstrong and Reside, represented by Mr. D. Main. They, after complaining to the Clerk of the Guardians, left off work without notice.

Mr. Main, for the probationers, began to cross-examine a guardian as to the Board's inability to obtain a Charge Nurse, when the Inspector said that they could not get nurses anywhere in the country, so that evidence would not help Mr. Main's case.

Dr. Hall, the Medical Officer, stated that no complaints had been made to him. He was satisfied with the work of the Superintendent Nurse and the Charge Nurses.

The probationers, who were examined at great length, complained generally that the Superintendent Nurse had shown a want of sympathy with them in their work, and that they had not been properly instructed. Miss Mary Young Ashley stated that when she was engaged, the Superintendent Nurse told her whatever the Charge Nurse said about them they must not speak or defend themselves.

Miss Dinsley stated that in the course of nursing a case she contracted a disease on her hands, and on reporting the matter to the Charge Nurse, Miss Todhunter, the latter said that if she had such a filthy dirty disease she would drown herself or put an end to herself in some way. Later, the Superintendent gave her some ointment for them, but she was never allowed to be off duty, nor did the Medical Officer examine her hands.

An extraordinary incident occurred when the Superintendent Nurse was on her way to give evidence. A number of women inmates collected on the path and booed and bawled at her. Ultimately the police were called in, and six of the ringleaders were arrested and taken into custody.

The Superintendent Nurse described the circumstances under which the probationers sent in their resignations. She thought she had a fairly good temper, and was generally very friendly to the nurses, whom she helped and assisted.

When the probationers left, two of the Guardians came and gave her a great deal of abuse. The Inspector rightly pointed out that the Local Government Board Regulations did not authorize individual Guardians to give advice or say anything to officers. It would be well if this rule were observed.

We await with interest the decision of the Local Government Board.

In this country we are now quite used to seeing our nursing uniform in the dock, worn by criminals, usually very specious thieves, who may or may not have had a smattering of training; but it is a novel sight to see a gentle, calm-faced nun nervously fingering her rosary in court. The nun in question was Sister Candide, founder and manager of innumerable large charity organisations in France, whose personal liabilities, due to the collapse of her undertakings, are estimated at £608,000, with assets of £120,000. Sister Candide is charged by two Paris jewellers, from whom she is alleged to have purchased jewels which she immediately sold at considerable loss to meet pressing liabilities.

The question of the nursing of native patients by white nurses in South Africa is one round which a considerable amount of discussion has recently centred. The general opinion of the most earnest nurses and of medical practitioners seems to be that the question of "the black peril" does not enter into the situation. At a meeting of the Kimberley Hospital Board, when Councillor Pratley took the opposite view and proposed that a committee be formed to go into the matter, Dr. Mackenzie spoke strongly on the subject, and said:—

"The suggestion of Mr. Pratley's that the native mind was evilly affected by the treatment of European nurses was entirely wrong, according to his experience, and he had had a life-long experience. The working by white nurses on the mind of the native patients was one of the most likely things to prevent any such thing, and to remove it outside the realm of possibility altogether. The class of native who would commit anything of the nature of black peril would be the native who had never been inside a hospital and treated by a white nurse. He knew that was a fact, and on that point he would absolutely contradict Mr. Pratley at once."

A late Sister in the native surgical ward at the Kimberley Hospital also wrote to the press:—

"The whole time I worked in the Kimberley Hospital I experienced the greatest gratitude from both native and coloured patients (excepting

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