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STATE AID FOR POOR LAW NURSES.*

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I have been asked to read a paper on State Aid as it will affect the Nursing profession, and the side that I have presumably been asked to dwell on specially is that of Poor Law.

Thanks in a large measure originally to the Nightingale Fund and to the pioneer work done by Miss Agnes Jones and other zealous workers in Poor Law Infirmaries, the standard of nursing has been, and is still, continually improving. The lot of a patient in a modern Poor Law Infirmary should at least be as happy as that of one in a modern hospital.

 \hat{I} shall consider the subject first from the view of nursing. By that I mean whether by State control the nursing of the sick poor would be more efficaciously carried out. We must therefore consider the circumstances which tend toward effective nursing, and this again should be considered from the personal point of view and from the point of equipment.

From the personal point of view the best staff would be expected to be found where necessary freedom of action and individuality goes with the security of tenure and an up-todate hospital equipment. As another factor, other things being equal, it is obvious that the best staff should be found where their services are best rewarded. Poor Law Infirmaries, or State Hospitals as they have been called, are managed by Boards of Guardians elected by the ratepayers, and they are responsible to the L.G.B. for the economy and efficiency of the various Institutions.

The Regulations concerning the management of each Infirmary differ in detail only, each Infirmary formulating its own scheme of training based upon these general Regulations. Infirmary or Poor Law training is divided into the major and minor training schools, classed according to the number of patients which the Infirmary is certified to accommodate.

In the majority of large Unions the Infirmaries are self-administered, but in the smaller Unions the number of sick persons admitted to the Workhouse is not sufficiently great to necessitate a special Infirmary under separate control, and the patients are therefore nursed in wards in the Workhouse set apart for this purpose.

In 1907 an Association of the Matrons of the Poor Law Infirmaries was formed for the co-

ordination of the work and training in Poor Law Training Schools, the aim of the Association being to raise the standard of nursing in the institutions as a whole, so that such institutions as may be governed by the less progressive Boards of Guardians may be supported in their initiation of improved nursing conditions.

For the appointment of Matron, three years' training is insisted on by the L.G.B. She is responsible for the organization of the Staff.

In the majority of the Poor Law institutions the appointment of the nursing staff is largely in the hands of the Matron and Medical Superintendent. Certain Boards of Guardians, however, have allocated to themselves the duty of appointing the staff. The Matron hence becomes responsible for an organization in the selection of which she has had very little voice.

As regards security of tenure, no permanent official can be dismissed, but may be suspended from office until his, or her, case has been inquired into by a Committee of the Board of Guardians. In the case of all officers, save 1st class officers, their decision is final; but in the case of 1st class officials, whatever action has been decided on by the Board of Guardians must receive the sanction of the L.G.B. By these means security of tenure is to a considerable extent obtained.

The staffing and equipment of Poor Law Infirmaries are under the control of the L.G.B., and all administrative changes of any moment must receive their sanction.

Poor Law Infirmaries are also under the inspection of the L.G.B. The L.G.B. Inspector is often a help in obtaining administrative reform or improved equipment when such changes might have been longer delayed without that assistance.

State help must as a natural corollary carry with it State inspection. It is a simple business detail, too often criticized adversely as the growing curse of officialism. An Officer who is conversant with all that is best in the administration and equipment of the best hospitals of the country could hardly fail to be of assistance to those who are not fortunate enough to command so large an experience. As regards remuneration for services rendered, I have studied the salaries of the chief nursing officials in 35 leading Poor Law Infirmaries. The salaries range as follows : Matrons from a minimum salary of £80 to a maximum of £150 a year, with emoluments reckoned from £60 to £100; Assistant Matrons £35 to £70, Ward Sisters £26 to £41, also with emoluments averaging £35. The emoluments vary according to the office held by the particular

^{*} Read at a meeting of the Midland Association of Matrons and Lady Superintendents.



