

House of Commons by Viscount Wolmer, has not yet become law, although the Select Committee which last year reported upon it stated their opinion that, with certain amendments, it should be proceeded with in order that it might pass into law.

There is no doubt that the hours of Asylum Attendants are in many instances excessive, and would be so even in the case of attendants upon the sane, over eighty hours on duty a week being by no means uncommon. When we consider the mental anxiety inseparable from the care of patients of unsound mind, it will be recognized that legislation is urgently needed.

In the examination of the Medico-Psychological Association, which provides a uniform examination throughout the Asylum world, mental nurses have an advantage over those with general training.

PRIVATE NURSING.

The nursing of patients in private houses is becoming increasingly important, as, with the advance of scientific medicine and surgery, greater demands are made upon their knowledge and skill. Added to this, women of the highest type are needed for this branch of work, as their position in houses disorganized by illness, where not only the patients, but very often the relatives, are dependent on their resourcefulness and wisdom, is extremely responsible. Many such nurses are to be found in the private nursing world whose services are invaluable to the public. On the other hand, many undesirable women exploit the public under the guise of the nurses' uniform.

Private nurses are supplied (1) through co-operations and societies managed for the benefit of the nurses; (2) through hospital committees and institutions, which, in most instances, make a considerable profit out of the earnings of their private nurses, following the regrettable example of the London Hospital, which makes thousands of pounds annually from this source. It is a quite unjustifiable method of supporting a charity. There is only a certain amount of private work available, and the fees derived from this source should be paid to the nurses who earn them, after the expenses of management have been defrayed.

The Managers of Scottish Hospitals are to be congratulated that they have never imposed this tax on the nurses trained in their institutions.

We are glad to note that a number of hospitals with private nursing staffs are following the example of St. Bartholomew's Hospital,

and giving their nurses the option of working on the co-operative system.

DISTRICT NURSING.

District nursing work is undertaken by women of every degree of professional training and social status, from the thoroughly trained Queen's Nurse with a three years' certificate, and six months' special training in addition, to the nurse-char, who, under the Cottage Benefit (Holt-Ockley) nursing system, resides in the home of her patient, cooks, cleans, and scrubs for the family, washes the children, and perhaps sleeps with the patient. The Queen's Nurses have proved of the greatest value to the community, not only in the care of the sick poor, but as social workers in the prevention of disease, and in raising the general standard of health. It is greatly to be regretted that, for the sake of cheap philanthropy, a class of so-called nurses are being extensively employed by lay committees in rural districts, whose knowledge of nursing, and therefore the value of whose services as nurses, is of the slightest. In many instances their status is really that of midwives (who in their own department are invaluable workers), and they should be known as such. The efficient care of the sick poor in rural districts would probably best be solved either by the establishment of a central fund in connection with the Queen's Institute, from which the nurses in districts too poor or too scattered to be able to maintain a fully trained nurse could be subsidized, or by the establishment of a State Nursing Service, but it is unfair to the sick poor to supply them with incompetent nurses, and to ask them to contribute to their support on the assumption that they are efficient.

There have been several changes in the important posts under Queen Victoria's Jubilee Institute during the year. Miss Macqueen, Nursing Superintendent for England, has resigned, and is now working in the Near East in connection with the Macedonian Relief Fund. She is succeeded by Miss Alice J. Buckle.

Miss J. Cowper, Superintendent of the Scottish Branch, and Miss Lamont, Superintendent of the Irish Branch, have resigned. Miss A. M. Peterkin was first appointed to succeed Miss Lamont, but subsequently accepted the invitation of the Scottish Council to become Superintendent in Scotland. Miss A. Michie was then appointed Superintendent of the Irish Branch.

Miss Cathlin Cicely du Sautoy has been appointed Inspector for Wales, in succession to Miss Pilgrim, who has been transferred to the Lancashire and Cheshire area.

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