

The various Hospital Physicians and Surgeons feel that there is a tendency to make the Nurses not their aids, but their supervisors and superiors."

It appears that the facts of the case were briefly as follows:—"The Lady Superintendent, who had only held that position a few months, suddenly and summarily dismissed one of the Sisters. This lady appealed to Dr. Humphreys, as the Senior Physician, and he called upon the Lady Superintendent and asked her the reasons for the dismissal. Failing to gain any information from her, Dr. Humphreys was proposing to bring the matter on behalf of the Sister to the knowledge of the Committee, when he was suddenly informed that he was suspended."

The medical profession of Manchester, however, immediately and entirely declined to recognise the justice of such peremptory proceedings. They presented Dr. Humphreys with a memorial of sympathy signed by all the leading Physicians and Surgeons. They made the medical and lay press ring with the matter. Not a single medical man applied for the vacancy caused by the resignation of Dr. Humphreys, and amidst a storm of public indignation the Committee collapsed.

The Lady Superintendent resigned her post, and the affair was speedily hushed up for the sake of the Hospital, and in fact it had almost been forgotten until recent disclosures revived the story because of its dramatic significance now. For years past tales have been floating about in Nursing circles of the hardships, the injustice, and the fatalities from which the Nurses of the London Hospital suffered. A flagrant case occurred, and the Chaplain brought it to the notice of the Chairman of the Committee. Suddenly he was accused by the Committee of having invited the Nurses to come to confession. He was not, as Dr. Humphreys was, suspended, probably because the Committee did not dare to do so. But he was told that unless he promised at once never to ask anyone in the Hospital to confess, the Governors would be asked not to re-elect him at the termination of his current period of office. He asked for the name of his accuser, he asked for the facts upon which the accusation was founded. As at Pendlebury, so at the London Hospital, the Committee refused this bare measure of justice. Then the Chaplain pointed out that by his ordination oath he was compelled to "exhort sinners to confess," and that it was his duty to do this day after day to the sick and the dying, to whom he especially ministered. He was next told that he had better resign quietly, to avoid scandal. But having a clear conscience, he declined to resign, and the Committee was forced to appeal to the Governors for

their support, which under the circumstances the Governors distinctly declined to give. Then the Committee referred the matter to two eminent clergymen, who carefully investigated it, and reported that there were no grounds for the accusations. The Chaplain, worn out with the persecution to which he had been subjected, and believing that now the Committee would retract their charges and apologise for them, accepted a living in the country, and resigned his post at the Hospital. Whereupon the Committee accepted his resignation, made no shadow of apology, and as far as can be discovered, never even reported to the Governors that the Chaplain had been completely exonerated from the charge brought against him.

The extraordinary parallel between the two cases—the despotism and injustice shown by the two Committees—needs no comment here. The moral upon which we wish to insist is that attempts at nursing despotism have always ended, and undoubtedly always will end, in disaster to the individual, and the gravest public and professional discredit of the cause of Nursing. We are well aware that our views may not be approved of by some of our readers; but we are in possession of facts of which, perhaps, they are not cognisant, and which induces us especially to lay stress upon this subject at present. In any case we know that the matter is of vital importance to our readers generally, and therefore, without fear or favour, we express our views. For we are absolutely convinced that nursing and Nurses can only prosper and advance in usefulness and influence by rigidly maintaining their proper relative positions to medicine and medical men.

## OBSTETRIC NURSING.

— BY OBSTETRICA, M.B.N.A. —

### PART I.—MATERNAL.

#### CHAPTER VIII.—DEVIATIONS FROM NORMAL CONVALESCENCE.

(Continued from page 208.)

THERE is yet another point—friction. Should the limb be rubbed? Certainly not during the attack, at any rate; and my Nursing readers can plainly see, from what I have so recently brought before their notice, that two evils might accrue from it—"clot" detachment from the veins, or inflammation from injury to the lymphatics. I earnestly impress upon the minds of all women engaged in Midwifery work to resist all pressure brought to bear upon them by patients in all stations of life to "rub."

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