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EDITORIAL.

A MINIMUM WORKING MONTH.

It seems almost incredible that there was ever a time when hospital probationers hated going off duty. But it is a fact, for nothing in our training days caused us more acute disappointment, than to hear the clock strike 9 p.m., when the night nurse would step lightly into the ward, to take over "our" patients, or our "special case" and expect us to trip as lightly away to supper and bed, deprived of all knowledge as to progress of the patients until 6.30 on the following morning! Then there were the urgent cases to be operated upon after that fateful hour of 9, and once a week a long, long leave from 3 p.m. to 9 p.m., and it was a very injured little person indeed, who thus by absence lost touch with the treatment, and the continuity of disease of the sick people she served. The one supreme advantage of being a sister, or a matron in those days was that one need never go off duty at all unless one felt inclined.

These reflections have been aroused by much perusal of newspaper cuttings, all harping on the one string, and headed "Nurses Hours," "One Day in Seven," "A Minimum Working Week," "Why not three Shifts?" and so on. The general public have at last realised that nurses work long hours, for seven days or nights a week; and its pachydermatous conscience probed by publicity, will reduce them forthwith to "Labour's" maximum of a 48-hours week! For the sake of euphony in the world generally, there must for the future be no overstrain, or overwork, of nurses; in the twinkling of an eye the whole system of hospital management and sick nursing must be rearranged.

There is no doubt that nurses work very long hours—though not nearly so long as in

times past, and it is right that this question should be seriously considered by those responsible for the nursing of the sick, and by the nurses' organizations also; because it is largely responsible for the break down of the demand and supply of probationers in hospitals and infirmaries.

We need a consensus of opinion as to the best means of rearranging nurses' hours on duty, so that they may be humane and just. There are apparently several proposals and methods by which the hours could be reduced for "a minimum working week." "Labour" demands a 48 hours week, that is, an eight hours day for six days a week! Such a suggestion could only be possible with a three shift system, to which it would be quite impossible at present for those in training to agree. It would disorganize the continuity of their clinical work in the wards, and depreciate the standard of their practical knowledge. Also theoretical study must be counted as work as well as clinical attendance. A 48 hours working week in private practice would certainly prevent a nurse earning her living.

Then we come to the more reasonable suggestion of reckoning hours of work by arranging the average of hours off duty by the month, and not by the week. This is more feasible, and better results would be obtained. It permits of fewer changes of attendants for the patients daily, and less disruption of routine work. This plan has been recently adopted by the Birmingham Union—not as a final solution of the difficulty, but as a step in the right direction. The new time table it has adopted for its nursing staffs in the 3 large infirmaries for which it is responsible, might well be studied by hospital committees and Boards of Guardians.

Nursing is, and always will be arduous work, even shortening hours will not make it otherwise.

[previous page](#)

[next page](#)