

all recall the times in the early months of our probationership when with Staff Nurse off duty and Sister busy with a special case we were responsible for the remainder of the patients in the wards? Now we are accusing the Red Cross Nurse of assuming the same responsibility, it seems to me there is not much difference.

Personally I think we ought to be thankful that such a splendid body of women have come forward to give their services to *help* the trained nurses, not to take their place; for with the number of wounded being landed on our shores it would have been impossible to find trained nurses for them all.

The country again settled, I think, too, we may get many recruits as probationers for our large infirmaries and hospitals from the ranks of the Red Cross "Nurses," which would be very much better than overcoming the present shortage by supplying them with out-of-work domestic servants as has been suggested.

I am, yours sincerely,

ETHEL MOON.

Sherborne, Dorset.

A RED CROSS SHORT CUT TO NURSING.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I think you may be interested to know that Miss Bell, Lady Superintendent of the Melbourne Hospital and a member of the Army Service Corps, has been appointed on to the Central Committee of the Red Cross Society in Australia, to work with Lady Helen Munro Ferguson. We realise, through THE BRITISH JOURNAL OF NURSING, what troubles beset the want of army nursing experience on the British Red Cross Committee. Through direct representation of the profession, we hope nurses may take a keen interest in the organization of the nursing department of the Red Cross Society. Personally, I cannot see that all this first aid—more especially among our leisured and often bored classes—will ever be of the slightest avail in time of war; to my mind it would be more sensible to teach them cooking, and send out corps of trained cooks with the corps of trained nurses; it is just as essential to feed your sick soldier as to nurse him, and the smattering Red Cross pupils get may make them dangerous in the sick room. Here, where we have voluntary registration in force, women will not be able to take a Red Cross short cut into the nursing ranks, but with you, I fear, many may, after a few lectures, and having obtained a "certificate," add to the mob of disorganized workers calling themselves trained nurses in England. During my recent visit "home," I was much struck with the helpless position of professional nurses and the unjust conditions under which they are compelled to work, with no protection of their interests whatever.

Yours truly,

A CONSTANT AND APPRECIATIVE READER.

Melbourne.

THE ANOMALOUS POSITION OF THE SUPERINTENDENT NURSE.

To the Editor of THE BRITISH JOURNAL OF NURSING.

MADAM,—As you justly point out in your comment on Miss Joseph's letter, it is the *system* and not the individual that has been criticised. At the moment, it is not for trained nurses to concern themselves with the social status of workhouse Masters, but rather to concentrate on endeavouring to prevent the recurrence of such a tragedy as was enacted at Barnet. Why is it that nurses and women generally are so lacking in *esprit de corps*? Surely, it should be of vastly greater importance to the nursing world that one of their sisters was so harried and sore pressed by the "insolence of office" that she "took arms against a sea of troubles," than that the dignity of fifty masters or a hundred guardians should be considered.

Do let us stand shoulder to shoulder in this matter, and rally round the flag of the noblest calling in the world, and demand with no uncertain voice of the L.G.B. that they remove this intolerable yoke from the shoulders of our colleagues.

Charlotte Phipps said to me, shortly before her death, "I hope I shall have made it better for those who follow me." Let us see that it is so.

I would suggest, Madam, as a practical outcome of her sacrifice, that you should, if you can add one more item to your heavy work, organise a petition to the L.G.B., praying them to redress this wrong. Surely every nurse (Poor Law or otherwise), will be eager to sign.

We can attend to the Master and Guardians at leisure.

I am, yours faithfully,

HENRIETTA HAWKINS,

Poor Law Guardian, Certificated Nurse.

REPLIES TO CORRESPONDENTS.

Miss D. J. N. Leisten.—An improvised bed rest for cottage homes may be made either with a net, of the mesh of an ordinary hammock, a straight edge being fastened to the top of the bed, and tied at the sides, and elongated ends tied at each side of the foot. Into this the pillows will fit comfortably. Or the same may be carried out in unbleached calico. A cradle is easily improvised by cutting a hoop down the middle into semi-circles, then screwing the two portions together through the centre and spreading the feet out.

OUR PRIZE COMPETITION.

QUESTIONS.

October 24th.—Describe a course of procedure if secondary hemorrhage should follow the removal of tonsils.

October 31st.—Describe the different classes of fractures, and the dangers to be guarded against.

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