

### THE DANGERS SURROUNDING OUR PROFESSION.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—Each day the imperative need for urgent protest against the dangers surrounding our profession becomes greater.

Are we really expected to stand by and see the standard of nursing, for the raising of which so many good women have given the best years of their lives, lowered on every side?

For many years we struggled against our hospitals being managed by untrained women, and after great trials and tribulations we succeeded in placing fully trained women of recognized standard to fill the positions of matron, with a certain percentage of trained assistants, according to the size of the hospital and number of pupil nurses.

What do we see now? Hospitals with untrained women at the head of affairs, wards without the supervision of trained sisters—even to the operating theatres! The most appalling of all being that they are helped and recognized by those in authority, from whom we, as professional women, might reasonably expect every help in upholding the standard of efficiency attained after the struggles of a century.

It is practically a retrogression to the days of the "Sarah Gamp," only a far greater menace to the profession.

Then, we were fighting ignorance amongst uneducated women; now, we find women on every hand with a smattering of knowledge, only with the background of wealth, influence, and perchance a title, living out the repetition of the old proverb, "A little knowledge is a dangerous thing."

We all know from our experience with pupil nurses, including the present V.A.D., of the inestimable value of intelligent assistance under trained supervision; but there it should and must end, out of justice to our brave boys who surely deserve the very best in this which may mean a question of life or death.

As professional women, we are still further humiliated by the indiscriminate conferring of the honour we rightly consider should be reserved for trained women, and only given them as a reward for special service, e.g., the Sisters who did transport duty between Gallipoli, Lemnos and Egypt, working all day and well into the night, caring for wounded men packed together in every available space, the ship not even under the protection of the Red Cross in the days when it was of some avail; others, still, who did hospital ship duty all through the danger of the torpedo menace after our ships were no longer safe, some actually paying the penalty with their lives; and again, the Sisters who did the pioneer work of the war in France, Egypt and Salonika, when even one hour off duty in the day was considered a luxury, and very often even that was not possible.

What of all these? How many have been remembered and honoured? By the present

system of wholesale distribution, irrespective of training and special merit, the value is lowered accordingly even to questioning if it is not greater far to remain amongst the unhonoured and unsung (see daily papers).

Yours truly,

A PROFESSIONAL WOMAN.

### "IS IT FAIR PLAY?"

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I should like your professional opinion on the following matter. I engaged a nurse to come to me on October 9th. On the 8th I received a letter from her asking if she might come a day or two later, as she would like to finish a case or two at the Home where she was working, and would see me about it the next day. I agreed to wait until the 12th, at 9 a.m., although the cases were not serious ones, as they had no night nurse on duty! On the 10th, I received a wire to "get another nurse: writing," a letter explained that the surgeon said he would never give nurse any more work either at the Home or in private, and being between "the devil and deep blue sea," under that threat, she was unable to come. Only one fact remains, she failed in her contract! But what right has a surgeon to insist on a nurse breaking her contract, especially when the case was not a serious one by any means or surely he would have seen that there was a night nurse provided!

JUSTICE.

[An engagement once entered into, a nurse should loyally abide by it; and, if she made it in writing, it would be binding upon her. But without any legal agreement, a professional woman should do the honourable thing, and not, in a facile way, take the line of least resistance. It would be interesting, however, to have the surgeon's view of the circumstances.—ED.]

### OUR PRIZE COMPETITION.

#### QUESTIONS.

November 10th.—Describe the methods of treatment you have seen used in (1) impetigo, (2) ringworm. What precautions would you take in applying X-ray treatment for the latter?

November 17th.—How would you recognise and deal with shock, occurring after delivery?

November 24th.—What do you know of the Carrell-Dakin treatment of septic wounds? Describe the method of its application.

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