

the best "first-aid" treatment in all cases of nervous and mental breakdown, and they can be secured by "reciprocity"—*i.e.*, by the recognition of asylum work by the hospitals, as is now done by asylum authorities of the time spent in the general hospital. A well-trained mental nurse with a full knowledge of sick nursing has been taught to be observant and practical; she is accustomed to note from her training in the hospital the signs of injury and disease and their relief; and from her training in the asylum she has learnt to impart sympathy, to encourage confidence, to allay suspicion and to relieve mental unrest. Like the quality of mercy, she is twice blessed, the mind and the body both respond to her aid and tact. She realises that the efforts of a good nurse are to assist Nature in her own work of healing. She helps the body to regain its normal functions, and by suggestion, persuasion and her own personal example she helps the mind to its permanent restoration. In the possession of skill born of experience in the hospital and the asylum she is qualified for the highest place which any institution can offer. We desire to see our asylums not only custodial establishments for mental disorders, but also curative hospitals in the best sense; we want them to be schools of re-education for our patients by means of which life may be rendered more useful because health has been rendered more perfect, and the essence of this process is "reciprocity."

### NURSING ECHOES.

Miss Margaret Huxley, so long a leader of nursing organisation in Ireland, has been elected Vice-Chairman of the General Nursing Council for Ireland. We congratulate the Council on its selection. Miss Huxley was trained at St. Bartholomew's Hospital in the eighties, but has for upwards of thirty years devoted herself to the uplifting of nurses in Ireland, as a member of the Irish Nurses' Association and the Irish Matrons' Association.

The Irish and Scottish Councils have drafted their Rules for the conduct of business and the registration of existing nurses—but await consultation with the English Council before putting them into force. We fear, owing to the holiday season, some weeks may elapse before registration is in force. Once more let us advise that certificates of birth and marriage be in readiness—also the small guinea fee put aside to cover the cost of registration, to be sent in with the official Form of Application.

The Metropolitan Asylums Board, at a recent meeting adopted a report on the subject of the remuneration of the nursing staff (other than in Mental Hospitals). The Board

recommend that the salaries of the nursing staff be increased by a sum approximately equal to 30 per cent. of the permanent salary of each grade, war bonus remaining unchanged; and that the working week for the nursing staff be in future 50 hours, with four weeks annual leave.

As the Matrons and Assistant Matrons are not affected by the 50 or 48 hours week or payment for overtime—they are considered worse off than their juniors—it is therefore recommended that the annual leave of Matrons shall be six weeks, and that of Assistant Matrons five weeks. The cost of the above proposals is estimated at £47,000 per annum.

A formal debate took place at a recent meeting of the Camberwell Board of Guardians on a recommendation from the Infirmary Committee "that permission should be given to the Nurses to play tennis in the Infirmary grounds on Sundays between one and six o'clock in the afternoon." Several of the Guardians opposed this sensible suggestion by speech without consulting the nurses themselves, and fifteen voted against it, to thirteen for. We agree with the *Poor Law Officers' Journal* that if the Guardians desire to administer rightly in this matter they will leave the question to play or not to play with the nurses, who, having reached years of discretion, are fully able to decide what is right for themselves. The Medical Officers enjoy this harmless form of recreation on Sundays, why not the nurses? Poor Law Guardians in the guise of Mrs. Grundy leave us cold.

A deputation from the Workhouse Nursing Association which waited on Dr. Addison last week explained the details of a scheme for the relief in sickness and old age of a large number of the semi-professional and educated classes whom circumstances arising out of the war had reduced to poverty. It was suggested that the provision made in Poor Law infirmaries for chronic and incurable disease might be so extended and modified as to include, and be acceptable to, the new class of poor. Dr. Addison expressed sympathy with the proposal.

We wonder if the "new poor" have been consulted! The stigma of pauperism must be removed from these institutions before they can be made acceptable to any class of poor, old or new, and this should be done without delay.

The late Mr. Henry Lyne, of Park Crescent, W., bequeathed £500 to his nurse, Miss Elizabeth Gordon.

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