

Matron: "Yes, solids, and anything you like in reason."

Patient (cheerfully): "Oh! good. Now do sit down and let us consult together."

Matron (taking a chair): "Yes, indeed. You begin; here's a pencil and paper. What is your special fancy—breakfast, luncheon, tea, dinner and snacks?"

Patient: "This is a lovely game. I feel a new man. I shall be well in no time. Shall I make a list of all the things I like and all the things I don't?"

Matron: "An excellent plan."

Later, after an animated discussion on food values, the patient finding that only the most delicate (and expensive) food nourishes his particular "system," appetising little menus are arranged, to which, during the rest of his stay, he looks forward from hour to hour, and upon which his strength and general health rapidly improve.

We hope an experienced dietitian *with a palate* will be included in the staff, with a seat on the Board, of the future Hotel Hospital.

Sir William Collins, presiding at a meeting at Birkbeck College on February 10th, referring to Miss Florence Nightingale from personal acquaintance with her, testified that the "Lady of the Lamp" could also be the "Lady of the Lash," more especially when dealing with stupid officialism in high quarters.

Dr. I. Bernard Barclay, Resident Medical Officer of the Norwich Infirmary, Bowthorpe Road, has written to the local press, criticising a letter which has been published from Mr. Percy Robinson, Chairman of the House Committee, Norwich Board of Guardians, relative to the staffing of the Infirmary, arising out of the evidence given by Dr. Barclay at an inquest, to which we referred last week, and which showed that, with the limited staff of nurses on duty, a special nurse was not possible for an operation case. Dr. Barclay gives chapter and verse for his evidence, with which no trained nurse will disagree. He adds:—

"The entire nursing staff has been working overtime (beyond the 48-hour week) to the full knowledge of the House Committee. This has been rendered necessary to cope with the general excess of work, which must not be taken to mean the recent influenza epidemic. During my tenure of office I have repeatedly drawn the attention of the House Committee to the shortage of the nursing staff. The Guardians are now receiving deputations from a

union upon the subject of working hours per week and their extension. Nevertheless the nursing staff has been and is voluntarily working overtime. Such "professional keenness" shown in the cause of humanity—the spirit of the nursing profession—should not be tendered as an excuse to gloss over a difficulty and the nursing staff shortage.

"In conclusion, I deeply regret the necessity for this letter, inasmuch as Mr. Robinson, as Chairman of the House Committee, has consistently done his utmost to further the best interests of the infirmary. It is, then, the more lamentable that, by inference, he should seek to cast blame upon any official for what is clearly inadequate staff provision. It is still to be assumed that medical officers and nurses to public institutions have the interests of patients under their care at heart, and themselves jealously watch over the institution so far as lies in their power."

It is thought likely that the statements made by Dr. I. Bernard Barclay with regard to alleged understaffing of the Poor Law Infirmary will form the subject of a Ministry of Health inquiry.

The *Lancet*, in its issue of February 11th, has an interesting note on "Non-Resident Private Nurses." It considers "it is remarkable that for private nurses the custom of living in still persists. A resident nurse, even when officially off duty, is always liable to be called, and it is this, together with the constant need of adaptation to the customs of different houses, that makes the life of the private nurse a harassing one."

There is something to be said for this point of view. At the same time it must be remembered that it adds much to the toil of the nurse to travel in all weathers to and from the case daily, having perhaps to prepare her own breakfast before she starts, in order to be with the patient sufficiently early. Also, she carries with her an ever-present anxiety for the patient if she is the only nurse in attendance and away from the house, and therefore out of call.

Non-resident visiting nurses are no doubt useful in some cases, but their employment is only practicable in large centres. Private Nurses' Co-operations and Societies can usefully keep a few nurses ready to work on the non-resident system, and the *Lancet* publishes a list of such Societies in London. We do not doubt there are others, both in London and the provinces, which supply daily nurses by the week when there is a demand for them.

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