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EDITORIAL.

A CENTRAL FUND FOR PROVINCIAL HOSPITALS.

Sir Napier Burnett, director of Hospital Services of the Joint Council of the Order of St. John and the British Red Cross Society, has now issued the third annual report on the Voluntary Hospitals in Great Britain, excluding London.

It is interesting to record that in 1921, for the first time since the war, the majority of the Voluntary Hospitals were able to pay their way. Sir Arthur Stanley says further that it is confidently expected that the figures for 1922 will show an even better position, and supports the belief of Sir Napier Burnett that the best means of securing the necessary financial support throughout the country is to show the wonderful work that the Voluntary Hospitals are doing. He further points out that a new classification of the hospitals is necessary, and approves the suggestion for a Central Fund for the provincial hospitals, somewhat on the lines of King Edward's Hospital Fund for London.

A Resolution approving the formation of such a Fund was passed at the Annual Meeting of the British Hospitals Association, and the Association further asked the Joint Council of the Order of St. John and the British Red Cross Society to take the matter into active consideration.

The total number of voluntary hospitals in England and Wales is 641, and in Scotland 90. In London 112 hospitals come under the supervision of King Edward VII's Hospital Fund for London, and receive grants from it. But there is no similar fund for helping the provincial hospitals. Such a Fund would be collected from sources from which the hospitals do not at present derive assistance; through it, greater unity in their statistical returns could

be obtained, and duplication and overlapping avoided.

Sir Napier Burnett considers that a new classification of hospitals is needed according to the work they do, and the facilities they provide for carrying out that work. known as teaching hospitals, inasmuch as they are associated with medical schools, should, he considers, be graded as a class apart from others, according to their general standard of equipment and laboratory facilities. The subscribing public would then be in possession of knowledge enabling them to appreciate why one class of hospital was more expensive than another. We think also that in grading the hospitals consideration might be given to their recognition as training schools for nurses by the General Nursing Council for England and Wales, and the equipment and teaching facilities they provide for this purpose, which also entail increased expenditure, but expenditure which is an economical outlay from the point of view of public benefit.

The Report calls attention to the fact that little information is given in the annual reports of hospitals as to the actual work done within their walls, and points out that if the hospitals would realise their opportunities and instruct the public in the great work in which they are engaged, the public would take a renewed interest in the "saving of their hospitals."

The provision of hospital accommodation for people of moderate means is touched upon, and Sir Napier Burnett is of opinion that the full solution of this question will not be reached until the medical profession come to realise that the payment of a hospital staff is merely centred in the question of the provision of hospital beds for this class of the community. He appeals to the profession to consider the question, and to act in an advisory capacity to those hospital governors and trustees who are seeking to solve this problem.

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