

LETTERS TO THE EDITOR.

Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.

"A GOOD OLD FRIEND FROM HOME."

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I wish to tell you how much I appreciate your JOURNAL, and look eagerly for it each month. It is a good old friend from home. I would also like to thank you for the help it has been to me in more ways than one. Through its medium I learnt of State Registration in the Union, have become registered, and also a member of the South African Trained Nurses' Association. I find the nursing question out here is very difficult, as in many districts there are neither doctors nor nurses, and farms are from 40 to 90 miles from a railway. I think, taking all things into consideration, it is really wonderful that infant mortality is no higher. Wishing you every success for your JOURNAL,

Yours faithfully,

Clocolan, O.F.S., HARRIET TONG, S.R.N. 237
S. Africa.

THE ART OF PRIVATE NURSING.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I read with interest, in the September edition of THE BRITISH JOURNAL OF NURSING, the suggestion of the Secretary of the Royal British Nurses' Association for the formation of a Professional League of Private Nurses, and also the letter of your correspondent, "State Registered Nurse." Unknown to each other, both writers were thinking of the same thing, viz., organisation and co-operation of private nurses. I think, if superintendents and secretaries of recognised co-operations of private nurses were willing to meet Miss Macdonald, hear her views, and co-operate on the question of organisation, and then lay the "considered opinion" before the members of their respective societies, and have a *free* discussion with them on co-operation, much good would result, for I am sure many nurses do not either know, or think, that it means working together to the same end, sharing work and profits, the stronger and more experienced helping (not with money, but more particularly with advice and sympathy) those less fortunate. A large and influential community might be formed. This accomplished, the feeling of jealousy and selfishness which now sometimes exists between different societies should be replaced by esprit de corps.

In a short time, all qualified nurses in Great Britain and Ireland will be registered under Act of Parliament. When this is understood by the employers of nurses, the half-trained, unregistered nurse will find it more difficult to get work, so that source of "undercutting" should come to an end. In a case of serious illness there must be co-operation between the patient, the doctor and the nurse, if a good result is to be obtained; the reverse is unthinkable; therefore, the patient and the doctor must be another link in the nurse's chain. The patient mentions the nurse to her friends, and the doctor sends for the nurse again, or asks her society for another as good, in this way enlarging the circle. A good, loyal, wholehearted, co-operative nurse can, after a time, keep one or more nurses supplied with work she cannot undertake.

Also, it is to be hoped that the "coming" State Registered Nurses will wake up, and not join Homes, on the completion of their training, which send out nurses for their own gain, or for the benefit of institutions. A nurse's life is a short and strenuous one. She cannot afford to support "outsiders," she requires all she earns to keep herself, and to provide a pension for the time her working days

are over; she has nothing to spare for profiteers, and donations to her Training School should be freewill offerings, not compulsorily deducted from her earnings.

With the advent of the State Registered Nurse, sentiment must be governed by reason; sympathetic and self-sacrificing she must always be, but in other respects she must receive as much consideration and share the advantages of other working women. Times have changed since nursing was mainly in the hands of Religious Orders, the members of which gave up everything to their work, but in return the Order provided for the needs of its members for the duration of their lives. They had no anxieties for the future, neither did their families expect, or receive, help from them, which is now frequently the case.

If the experience of an ex-co-operative private nurse, and pro tem. secretary, is of use to Miss Macdonald, I will gladly give it to help forward her scheme.

Yours faithfully,

JULIA HURLSTON, S.R.N.,

Member of the League of St. Bartholomew's Hospital Nurses.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I shall be very pleased if you will allow me to say a few words in your precious monthly paper.

I was very interested in the article by Miss Macdonald in last month's issue. I am quite sure that most private nurses will approve of her kind suggestion regarding the formation of a Professional League of Private Nurses.

I have also no doubt that the majority who are in private practice will be in favour of a more uniform regulation of the number of hours during which nurses should be on duty.

Miss Macdonald also mentioned that there was a feeling that night duty fees ought to be in excess of those for day duty.

Personally my experience of night duty has been less strenuous than day duty, so I do not feel equal to giving any ideas regarding same, but I have no doubt there are others who may have different opinions.

There was also a very interesting letter in your columns by a State Registered Nurse, giving her views on the Modern Type of Nurse.

Being one of them, I am glad she did not altogether disapprove of their capabilities. I quite agree that nurses nowadays, especially while training, have much better opportunities, having experienced it during my last year in hospital. The present-day nurse may be regarded as being very frivolous, but that does not usually mean that she is less devoted to duty—at least if she is at all interested in her work.

About nurses being more effective in helping one another, especially in private work, there is one thing I should like to mention—that is, that it would be very beneficial if nurses who have been members of an association for some time would take a little more interest in new members who are being frequently added to the staff.

Nurses beginning private work are apt to have that "new probationer" feeling unless their more advanced and experienced fellow-workers take them more or less into their confidence. There are many things a novice at private nursing has to learn, though she may be proficient in regard to her work, if she is to make a success of this difficult branch of work, and she would usually be grateful for advice from one who has already done so.

Yours faithfully,

ANOTHER STATE REGISTERED NURSE.

OUR PRIZE COMPETITION FOR NOVEMBER.

Mention some of the chief causes of vomiting. Describe the type of vomit in each case. State your method of dealing with post-operative vomiting?

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