

from 15s. to 25s. a week. There were occasions when patients died and were left in the room with the other patients for quite a long time, and were then put in the tool house. It struck him that a certain number of the patients were of weak mind or senile, some bedridden, and put where they were by relatives who would not like it to be known that they were in institutions, but who would probably think it would sound nicer if they could say they had relatives in nursing homes being cared for.

He always strongly advocated such patients being placed in infirmaries or other public institutions.

Miss Cardross Grant spoke of her observations when visiting a home, of the absolute filth, of dirt on the bed-clothes, and vermin on the patients and walls, of food lying about on the tables in the kitchen, which was slept in. One patient, who was incontinent, was put in the bath at night to save trouble, and brought out and put on a bed when her friends visited her. The nurse had no qualifications. She had been told of patients dying in the night, when others banged on the floor, but no one came till morning.

Evidence by the Chairman of the Public Health Committee of the Wiltshire County Council.

Miss Stephenson, Chairman of the Public Health Committee of the Wiltshire County Council, also supported the proposed registration. There were few real nursing homes in the county, and of those she knew of, two were in Salisbury and one at Swindon. Generally speaking, these were very good, and it was precisely the good ones, which did not really require it, which favoured the proposed registration. She thought all odd rooms should be included, and indeed was very anxious on this point. A midwife or a nurse in a rural area might take one or more cases in unsuitable premises. These single cases were mostly midwifery ones. She thought cottage hospitals should be included and their work definitely and greatly extended, so that they could take such cases.

Evidence of Superintendents of Nursing Homes.

On April 22nd evidence was given conjointly by Miss K. Scott, Superintendent of a Nursing Home at Bournemouth (formerly Matron of the Royal Sussex County Hospital, Brighton), and Miss Crookenden, Superintendent of a Nursing Home at Hove, formerly Matron of Addenbrooke's Hospital, Cambridge. Miss Scott told the Committee that it was the exception for patients to know anything of the management of a Nursing Home. They were usually run in at the last minute. If they had more time they might perhaps find a more comfortable home than that selected, but they would not enquire into the efficiency of the nurses. She considered that Registration of Nursing Homes would protect both the Homes and the public, and would not be objected to by proprietors of Homes run on proper lines. She was often told that Nursing Homes were terrible places. She knew there were many bad ones. Both ladies considered it essential that the inspection should be carried out by a trained nurse, and that the nursing staff should be fully trained nurses.

Both Miss Scott and Miss Crookenden objected to the entry in a Register open for inspection, of the names, addresses, and diseases of patients, and considered this would "kill the Nursing Homes."

The next witness pathetically appealed to the Committee to help her in regard to her mother, incarcerated for thirty years in a private mental hospital, and said it was "not human to be put away for the benefit of a man who did not care." This was, however, outside the scope of the Committee's reference.

The next witness (Miss X.) was a private nurse, who in the course of her professional duties has nursed her patients

in Nursing Homes, and who gave the Committee some striking facts as to the lack of a skilled staff in some Homes.

Evidence of a Registered Medical Practitioner.

On April 27th, Dr. Thakore, a registered medical practitioner in Doncaster and ophthalmic surgeon on the staff of a hospital in that town, strongly advocated the registration of Nursing Homes and inspection by either doctors or nurses. He considered that all nurses employed in them should be fully trained, going so far as to say, in reply to a question as to expense, that he would prefer to reduce his fee to having his patients nursed by partially trained nurses. Moreover, so-called probationers in Nursing Homes found to their sorrow at the end of three years that their time had been wasted. The authorities should not be allowed to train "rubbish nurses" who tended to move on as "fully trained."

Evidence of a Former Patient.

Mr. J. Davidson, a former patient in a Nursing Home in the North, said he had offered to give evidence when he saw in the daily papers that the Ministry of Health had no evidence of the need for the registration of Nursing Homes. He detailed his own experience with convincing force.

Evidence of Miss Isabel Macdonald, S.R.N.

Miss Isabel Macdonald, Secretary of the Royal British Nurses' Association, gave important evidence on April 29th, and said that the Association was strongly in favour of the registration of Nursing Homes. She supported this with first-hand knowledge.

She considered that efficient Nursing Homes would welcome registration, and that a large number employed only trained nurses. There was no great economy in having others, as expenses for board and laundry were not reduced.

It was appropriate that Registered Homes should be staffed by Registered Nurses, but, apart from that, their employment would add to the patients' sense of security.

The nurses were of opinion that Registered Nurses should do the inspection. A nurse with experience in the management of a large ward, and holding a Sanitary Inspector's certificate would be well suited for the work.

Asked whether she considered that a Home run by a medical practitioner should be registered, the witness gave it as her opinion that all Nursing Homes should be registered.

Two other witnesses were examined.

LEGACIES TO NURSES.

Mr. Joseph Jackson, of Newcastle-on-Tyne, left £1,000 to Miss Fanny Barrie Robertson, for many years his nurse.

Mr. Edward Langton, of Dore, Derbyshire, left £500 to Nurse Beatrice Farmer.

Miss Charlotte Caw, of Bournemouth, left to her nurse Miss Marian Burns, £100.

Mr. Thomas Whysall, of Leicester, left Nurse Kate Moore £50.

Sir John Alexander Boyson, of Kensington, left £200 to Miss Olive Walkerston "who nursed me through my illness in January, 1920."

Miss Margaret Elizabeth Johnston, of Princes Square, Bayswater, left £1,000, and if attending her at the time of her death an annuity of £50 to Nurse Isabella Gordon "with my loving thanks for her tender care."

Mrs. Anne Langton Owen, of Bexhill, left £100 to her nurse, Mrs. Jane Adelaide Joyce, if still in her service.

Mr. R. L. Hogg, of Londonderry, left £500 to his nurse, Mrs. Elizabeth Morgan, on condition that she undertakes the care of his dogs and domestic pets, and, as "a token of her care for him," 4,000 £1 shares in a company in which he was interested.

Professor Edward Granville Browne, M.B., F.R.C.S., late of Pembroke College, Cambridge, left a life annuity of £52 to Miss Charlotte Thacker, his nurse since 1907.

Miss Ethel Mary Portal, of Carlisle Mansions, Victoria Street, S.W., left £400 per annum to her nurse, Sister Anne Reed, for life.

Mr. Albert Washbourne of Four Oaks, Warwickshire, left £50 to Nurse Parslow, if still attending his daughter.

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