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EDITED BY MRS. BEDFORD FENWICK, REGISTERED NURSE.

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EDITORIAL.

A PROBLEM OF URGENCY.

The Minister of Health in a recent speech on the hospital question at Coventry aroused some criticism subsequently in a leading article in *The Times*, on the ground that, with his predecessors, Dr. Addison, now gathered to the ranks of Socialism, and Mr. Wheatley, who never disguised his Socialism, Mr. Neville Chamberlain is also attracted by the advantages which would result from the setting up of some Central authority on the co-ordination of hospitals.

"Voluntary hospitals," he said, "at present received grants for certain services. Was it not possible that, in the future, some co-operation of that kind might be extended? Could they not visualize a time when those responsible for the conduct of voluntary hospitals might be represented upon some central health authority upon which would rest the responsibility of the general hospital policy of the area? Might they not imagine that, in return for a certain subordination of their complete and absolute freedom to do what they liked, the voluntary hospitals might receive some further assistance than that which they got at present," an authority which, while laying down in broad outline "the principles upon which questions like extension or treatment should proceed, nevertheless should leave to each individual unit the widest possible freedom in the administration and conduct of its work."

THE NEED FOR A CORRECT SOLUTION.

Mr. Chamberlain wrote at length on the following day, welcoming the leading article in our contemporary, as the purpose of his observations was, he says, to draw attention to a problem of urgency, and of very great importance, in order that public interest might be aroused in regard to it, and that, as Minister of Health, he might enlist all the assistance possible in arriving at a correct solution.

He then proceeded to comment upon the article, and stated that he was wholly opposed to the creation of a State Medical Service, by which he understands to be meant the accumulation in the hands of whole-time public servants of the work done by the medical profession as general practitioners, as research workers, or as consultants and specialists, inside or outside the hospitals.

He states further that he is, and always has been, a firm supporter of the voluntary hospitals system, but he conceived it his duty to draw public attention to certain difficult questions which either have arisen, or will shortly arise in regard to that question.

THE BED SHORTAGE IN VOLUNTARY HOSPITALS.

These included (1) The necessity for the provision of extensions of the voluntary hospitals. The Voluntary Hospitals Commission estimated, in this connection, that 10,000 more beds are required, and recommended that public money should be found to assist in providing for them, to which, in the present financial state of the country, the Government finds itself unable to accede; but the need for extension remains.

A POSSIBLE SOLUTION.

(2) The Minister points out that account must be taken of the so-called infirmaries, now in the hands of Boards of Guardians. These are, he says, in many places, really general hospitals, with a staff, and an equipment which is comparable with that of a first-class voluntary hospital, and that, to an increasing degree, these infirmaries are being used by classes which can certainly not be described as destitute.

(3) Then there is the question of the sanatoria and infectious diseases hospitals, in the hands of county and county borough councils and the sanitary authorities as well as of Boards of Guardians, resulting in overlapping, duplication of staff, and waste of money, while beds are standing empty, and patients are unable to obtain treatment without long delays.

THE DESIRABILITY OF CO-ORDINATION.

The Minister advocates a closer co-ordination of the institutions, in a given area by some body having general powers of guidance over hospital policy in that area. He suggested at Coventry that the voluntary hospitals should take their part in such guidance, and emphasises in his letter that if they do not the body will undoubtedly be formed without them.

ACTION OF THE L.C.C.

At its meeting on November 2nd, the London County Council authorised the special Committee on the Poor Law to enter into negotiations with the Minister of Health, the Common Council of the City of London, and the Metropolitan Borough Councils, with a view to the Council becoming the Public Assistance Authority for London.

In our view the most essential step in the co-ordination of hospitals, voluntary, poor-laws and special, is the removal of the pauper disability in connection with sick persons treated in Poor Law infirmaries.

Co-ordination of hospitals in given areas, is, in the interests of the community, over due, and we are glad that the Minister of Health has spoken clearly on the urgent need for such co-ordination.

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