

Royal British Nurses' Association.

Incorporated by



Royal Charter.

THIS SUPPLEMENT BEING THE OFFICIAL ORGAN OF THE CORPORATION.

THE PRESENT POSITION OF PRIVATE NURSES.

The following paragraph appeared under "Public Notices" recently in the South Australian newspapers:—

"NOTICE OF INCREASE IN TRAINED NURSES' FEES.

We, the undersigned, representing the Councils of the two Associations of Trained Nurses in Adelaide (the Royal British Nurses' Association and the Australian Trained Nurses' Association) hereby notify the public that, on and after September 1st, 1927, the fee per week for all cases shall be £4 4s. Signed W. Mullaney, Secretary, Royal British Nurses' Association; M. F. Mann, Secretary, Australian Trained Nurses' Association."

We do not propose to discuss here the extent to which a uniform fee might or might not prove practicable in England, where we have so much specialisation in private nursing, but we admire these two Associations in Adelaide for having achieved a position of agreement and co-operation which must strengthen enormously the position of the private nurses there, and which must have its influence throughout the whole of the Dominion; self-governing societies of nurses in England might well emulate their example. That the ground is more clear in Australia, for such agreement, than it is in England, is undoubted; nurses are up against difficulties here which do not arise elsewhere. For instance, in Australia there is not the tendency to place the voluntary hospitals in competition with the nurses in private practice nor, to any extent, do we find there, private individuals and companies who, for purposes of profit, establish businesses for the supply of nurses. In England many of the large hospitals have now private nursing staffs and indications that this precedent, established years ago, is likely to develop still more are not far to seek. We have been in the habit of seeing it stated that certain large hospitals are "supported entirely by voluntary contributions," and a strict adherence to accuracy might have added to this statement "and by the labour of the nurses." Of late years this latter means of subsistence has not been quite so easily obtainable, for the admission of women to other careers, many of them promising a greater opportunity for personal initiative, freedom and economic independence, has curtailed very considerably the number of applicants for training as nurses. Moreover, the young people of the present day have no great inclination to accept the conditions of a former generation, more off-duty time is claimed, and circumstances compel an increase in the hours allotted for study.

The purpose of the hospital, in relation to its nursing staff was (and still is, in many cases, if we look at the matter from an unbiased point of view) a threefold one—it must (a) provide for the nursing of the sick poor; (b) educate and train the nurses; and (c) as far as possible, through the nurses, promote and foster the hospital's

financial resources. The length of the working day having been, perforce, shortened, hospitals look for other directions in which to make a commercial asset of the nurses; they attach to themselves private staffs (worked on co-operative lines or otherwise) and thus they increase the income under the control of the hospital and maintain, incidentally, a greater control of nursing politics. We will not labour this aspect of the position further, but simply indicate a possible—or rather an impossible—analogy by suggesting the probable result if the Universities or the Hospitals said to those medical men, who have passed through their medical course, "We have equipped you with the knowledge necessary for your professional career. We now propose that you will work for us (on terms, to be agreed upon) where and how we shall determine, that you will, in fact, give your services to the public in such manner and under such conditions as we shall arrange rather than under those conditions and on those lines which are approved by your own professional organisations." Doctors and the rest would receive such a suggestion, not with anger, but with laughter, as one outside the realm of possibility. Yet the nurses accept conditions parallel without question. There are even those who argue that it is a good thing to have a hospital or a private individual as a prop. We would quote to them the old adage: "If a man cannot lift a stone himself let him leave it altogether, even although he may have someone else to help him." Substitute profession for man and lay the lesson to heart.

Recently, on all sides, we have had our attention drawn to enterprises on the part of individuals, or small groups of people, which are too often a serious menace to the sick and a great economic danger to the nurses. Such enterprises are frequently designated "co-operations" but co-operation is, in most cases, conspicuous by its absence. There are those, and also private staffs, from which nurses are "farmed out" on salaries, under agreements strictly safe for the employer but of doubtful value to the nurses. Some of these businesses are, it is true, owned or managed by nurses; others are run by untrained women and by men—we know of one administered by a lady of title and another, we have reason to believe, is conducted under the auspices of an American company.

We need not refer at length to the system of engaging a nurse at a salary far below the amount which is to be drawn in fees for her services; the injustice of this system is sufficiently obvious and has been stressed frequently already in THE BRITISH JOURNAL OF NURSING. But there is one form of "co-operation" which often proves dangerously attractive to the unwary. Nurses are engaged on the understanding that for the first one, two or three years they will work for a salary and after that on the co-operative principle—drawing their own fees, paying a percentage on these and finding their own board and lodging. (It is presumed by the nurse that she will have formed a connection in these first years that will make her entry on the Co-operation quite a sound proposition); Alas, before they have reached that Eldorado—the "Co."

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