

## 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 RIVAL REGISTER.

To the Editor of THE BRITISH JOURNAL OF NURSING.

Miss Mary E. Greenshields, F.B.C.N., Matron, Woodhall Spa Hospital, writes:—

DEAR MADAM,—

"A rival Register would indeed have been a serious danger both to the profession and the public—and I, for one, am grateful to Dr. Bedford Fenwick for all he has done, in the interest of the British College of Nurses and the profession at large. May I take this opportunity of saying how much I appreciate the BRITISH JOURNAL OF NURSING. I feel a very country member of the B.C.N., but the JOURNAL keeps one in touch.

"Yours faithfully,

MARY E. GREENSHIELDS."

Alexandra Hospital,  
Woodhall Spa,  
Lincoln.

## KERNELS FROM CORRESPONDENCE.

*Sister Tutor* writes:—"What a real boon to the profession at large is the B.J.N. The daily and unprofessional Press had such garbled accounts of the case heard before the Privy Council that our side, and reasons for opposing the grant of the Royal Charter to the College of Nursing was never apparent—but as soon as I opened my B.J.N. and read the clear and considered Editorial—there it all was in a nutshell. The nursing profession is, indeed, deeply indebted to the British College of Nurses and its Treasurer for saving the status of the Nurses' State Register from mischievous competition by the College of Nursing. Surely ignorant and unfortunate nurses have suffered enough already from "registration" by the College—dozens of them misled and now unable to have their names on the State Register—thus every year feeling competition keener from those more fortunate and far-seeing. With you, I consider the General Nursing Council failed once more in its duty to us Registered Nurses in not opposing upon our behalf the grant of a Royal Charter to the College of Nursing when its Petition included such a dangerous demand, as to set up a Statutory Register, but as it now represents the College members and not the Registered Nurses as a whole, we must keep a vigilant eye upon its proceedings, and continue to take action for ourselves. May I urge every intelligent nurse to join the British College of Nurses and do her DUTY?"

## CONFERENCE ON PRIVATE NURSING.

"*A Mere Patient*" writes:—"I note you are going to hold a conference on Private Nursing at the new College. May I suggest someone speaks for the patients? I have enjoyed and otherwise the ministrations of many nurses in my time for self and family, and one thing appears to have been omitted in the training of many—Domestic Management.

"Take the household property. How many trained nurses consider it as the mistress of a house should? Very few. The waste of electric light, gas and water is proverbial. The right use for items of linen—why dry up things slopped over with a face towel? Why crumple up sheets instead of folding them? Why place one plate on another on which knives, forks and spoons remain? Why clatter crockery and glass on the wash-stand? Why place cans containing boiling water on white painted stair rises and thus often leave an irradicable mark?

Why never wipe feet on a mat? I once asked a nurse all these questions and her replies were illuminating.

"Hospital property—provided by charity—was used lavishly, she replied, as no one had any personal knowledge or power of expenditure, in the wards or the Home, and so cost was not known. Electric light, gas, water came under this heading. Time was short in a ward, and lint or the most handy cloth was often used for mopping up. Soiled bed linen was never folded by the nurses, but just rolled up and pitched down the shoot. Nurses did not 'wash up,' that was done by the ward maid, so the gentle handling of crockery and glass was not taught. Many probationers came from homes where there was little domestic service, and domestic duties were not always done daintily as 'it was too much fag.' The standard of home-keeping—when all classes were 'houseproud'—has of recent years been lowered.

"The result of this type of 'training' in the home and the hospital does not inspire private nurses with respect for domestic goods, and many are very untidy, not only in their personal habits but in handling items in the sick room. Personally, I detest having my newspaper cracked and folded crooked, and hand-bags and match boxes placed on the mantelpiece amongst fine china and decorative objects, but such habits are common.

"Of one gem of a nurse I have the happiest memories.

"'May I have a duster?' was her first request.

"'Why?' I asked, 'the maid does the cleaning.'

"I never forgot her smile.

"'Yes, but there is a vast difference between domestic and surgical cleanliness,' she replied, 'and I make a point of gathering up dust three times a day.'

"*Thoroughness* was her chief characteristic—a most uncommon virtue.

"Please let the patient speak at your conference."

[It is to be hoped some patients will attend the Conference. They will certainly be encouraged to speak.—ED.]

## A STUDY IN CONTRASTS.

*Miss Mat'la Humphreys, F.B.C.N.*, writes from Bermuda:—

"We came here a month ago, having spent a few days in New York. It is a wonderful change from Montreal, with its ice and snow and temperature below zero, to the bright sunshine, with everyone in the gayest summer attire. There is a nice little hospital here with a very efficient staff from the Overseas Nurses' Association. When we arrived I got a throat and went into the hospital for five days. I quite enjoyed my stay there.

"Bermuda is like nowhere else I have seen in the world. The houses are all white, inside and out, even to the roofs being built from coral, which is white. Then there is no fresh-water supply except the rain water which everyone catches and stores. If the hospital or large hotels run out of fresh water they have to get it from New York, 48 hours' journey from here.

"There are no motors on the Island, so every one walks, drives, and bicycles. Two-thirds of the population are black, but it seems more English than Canada, because we use English money, and most of the stores sell English goods. There are no industries, no factories, no trains on the Island.

"We expect to be in Montreal again by Easter."

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## PRIZE COMPETITION QUESTION FOR APRIL.

What are the more important complications of (1) Otitis media; (2) Chronic tonsillar infection, and what indications would make you think they were present?

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