

## KING EDWARD'S HOSPITAL FUND FOR LONDON.

The work of King Edward's Hospital Fund for London, as reported at its annual meeting on June 26th, is indeed of national value, and those interested in hospital work throughout the world might study it with advantage.

The Duke of Kent who has been appointed President of the Fund by the King, his predecessor in office, read the following message from the King:—

"I would like to assure the council of my constant interest in the work of the King's Fund for the Hospitals of London, and of my gratitude to those who, by their devoted services, contribute so much to its welfare.

"I send my best wishes for the future of the fund and of the hospitals which it helps to support.—GEORGE R.I."

### King George V's Gift.

The Duke said: "First of all I wish specially to mention the new heading on the balance-sheet, 'Gift of King George V, £20,000,' the income of which is to form part of the annual distribution. Every year the accounts of the fund will thus contain a record of his late Majesty's constant interest in its welfare, and every year his gift will bring benefit to the hospitals of London."

The Fund received last year in subscriptions, donations and legacies, about £98,000 besides an income from investments, and this has left a deficit on the year's working—as the annual distribution to the hospitals amounts to £300,000, and to this has been added the District Nursing distribution of £2,000. The Report alluded to all the special activities of the Fund.

### Special Reports.

Four special reports have been prepared and published for the assistance of hospitals. The first was an explanatory memorandum on the Voluntary Hospitals (Paying Patients) Act, which was passed in May, 1936. The Act was promoted to facilitate the provision of pay beds in addition to ordinary beds.

The second was a new memorandum on fire precautions at hospitals.

The third was a special report by the hospital economy committee on the progress of the hospitals during the past 15 years. It is a supplement to its two annual reports. One of these deals with the work, income, and cost of each separate hospital, and the other with the hospitals as a whole. The new report shows how greatly the voluntary hospitals of London have increased their work, their expenditure, and their income during these last 15 years.

### Out-Patient Waiting.

The fourth is the new memorandum, published this week, on the reduction of waiting in out-patient departments. In its last report the out-patient arrangements committee dealt with the out-patient dispensary, where patients get their medicine just before leaving. The present one discusses ways of saving time at the other end: when the patients arrive and before they see the doctor.

The King's Fund also took a leading part in the conferences which led to the numerous hospital flag-days being combined. It was asked to do so both by the Commissioner of Police and by the hospitals.

### District Nursing.

Sir William Collins said that as chairman of the Central Council for District Nursing in London he had been particularly asked by the associations to mention to the council their gratitude not only for the financial aid given, but for the recognition of their work.

The recommendations were carried.

## HOSPITAL INFECTIONS.

Are doctors, nurses and other persons employed in hospitals and coming into contact with patients more liable to contract infectious diseases than others? This question is answered by an investigation which has recently been conducted in a large Swedish hospital admitting cases of infectious disease.

This hospital is the Stockholm Fever Hospital whose authorities have investigated the incidence of illness in the staff in the period 1930-1934. The average membership of the staff was about 300. These have been classified in two large groups according as the persons concerned were or were not in contact with the patients in the course of their work. In the first group were nurses, probationers and others in direct attendance on the patients. The second group included the persons employed in the laundry, machine house, the administration service, the telephone service, etc.

In the period under review there were 678 cases of illness in the staff. It was found that 13 per cent. of all the cases of illness were due to such well-defined infectious diseases as poliomyelitis, mumps, chickenpox, whooping-cough, etc. More than half of all the cases, *i.e.* 58 per cent., represented ill-defined, probably infectious diseases, such as sore throats and other infections of the respiratory tract (influenza, etc.). It will thus be seen that if these two categories be added together, 71 per cent. of all the illness overtaking the staff of this fever hospital was due to infectious diseases.

This high percentage of infectious diseases is all the more impressive as in the hospital studied great care was taken to isolate, as soon as possible, the members of the staff who fell ill. There were 28 cases, or 4 per cent. of the total, in which tuberculosis broke out. There were also 10 cases of acute rheumatism of the joints, 16 cases of acute disease of the digestive system, and 19 cases of nervous trouble, general weakness and anæmia. In as many as 53 cases, or 8 per cent. of the total, the ailments from which the staff suffered were due to accidents and injuries.

When the two groups of workers were compared it was found that the sickness-rate was four times as great among the workers in direct contact with the patients as it was among the other workers. This difference was most marked where the infectious diseases were concerned. This was natural enough. For accidents and injuries could hardly be expected to be more frequent among nurses than among workers engaged on machinery or in a laundry. In about 84 per cent. of the cases of diphtheria and scarlatina developing in the staff, it was possible to trace the infection to some patient.

There are several lessons to be learned from this study. In the first place, it has shown that workers in a hospital under the age of 25 are more subject to contract infectious diseases than older workers. This observation should be borne in mind when nurses and probationers are first engaged. It was also found that newly appointed workers were more subject to illness than those who had been in the hospital some time. This observation suggests that the employment of casual labour in hospitals should be discouraged as much as possible as far as those persons are concerned who come into direct contact with the patients. This problem is apt to arise in connection with the employment of stop-gap workers engaged in an emergency.

The lesson taught by this Swedish study is confirmed by the experience of certain hospitals in Paris. Here the sickness rate among medical students from diphtheria has of late been so high that steps are now being taken to test all the students coming into contact with infectious diseases such as diphtheria. The students found to be susceptible to diphtheria are inoculated against it with Ramon's vaccine.

[previous page](#)

[next page](#)