

THE NATIONAL COUNCIL OF NURSES' CONFERENCE.

The Nursing Conference on "Questions of Interest to the Nursing Profession," convened by the National Council of Nurses of Great Britain, was opened by Mrs. Bedford Fenwick, the President of the Council, in the Great Hall, Caxton Hall, on Thursday, November 10th, at 10.30 a.m., Mrs. Fenwick said:—

"I have pleasure in opening this Conference, the primary object of which is to discuss how the members of the Nursing Profession can best be trained to take an effective part in maintaining high standards of national health, and with skill helping to alleviate suffering and carry out remedial methods of medical and surgical treatment. Accurate knowledge and manual skill are the basic principles of our work—a royal heritage we must never resign. Our Speakers to-day are experts, they can teach us much—let the discussion be free and outspoken. One item on the Programme I hope may be emphasised—the right of Registered Nurses to Pensions after a lifetime of service. Let us agree, and let us each make up our minds that there must never be another generation of *old, cold and hungry nurses*.

We have only one day in which to discuss our lengthy programme of four sessions. I will, therefore, invite Miss M. S. Cochrane, R.R.C., who has kindly consented to preside, to take the Chair at this Session, which is concerned with Hospital Administration."

MISS M. S. COCHRANE, R.R.C., PRESIDES.

Miss Cochrane said that the privilege of taking a chair was that one was not expected to speak, but to introduce the speakers. She would call on Miss E. Cockayne, S.R.N., Matron of the Royal Free Hospital and President of the League of Royal Free Hospital Nurses, to present the paper on Hospital Administration, who would be followed by the opener of the Discussion, Miss I. Stewart, R.G.N., Matron of the Victoria Hospital, Glasgow, after which she hoped there would be a very full and free discussion.

Miss E. Cockayne then presented the following Paper on

HOSPITAL ADMINISTRATION.

ITS ECONOMIC ASPECTS IN RELATION TO: HOUSING OF STAFF; HOSTELS. THE OPTION OF TRAINED STAFF TO LIVE OUT. THE 48-HOUR WEEK AND THE 96-HOUR FORTNIGHT. RATIO OF NURSES TO PATIENTS.

MADAM CHAIRMAN, LADIES,

If you have given one thought to the immensity of the subject on which we are to discourse this morning (and I hope you have), you will know that it is not possible for me to cover the entire field. But I will endeavour to mention the main controversial points, and I hope you will raise the remainder at our subsequent discussion.

We are asked to discuss the *Economic Aspects* of Hospital Administration, and in preparing this paper I have tried to keep in mind two points:

1. *The Thrifty and Judicious Spending of Money*, which is such a great responsibility to the subscribing public.

2. The economy of labour and the judicious spending of the Nurses' health, which is an even greater responsibility.

The general tendency to lower the minimum age of entry for candidates for Hospital training necessitates a frequent review of the latter point, and I ask you to keep it in mind throughout.

We are asked to consider Hospital administration under the following headings:—

1. Housing of Staff.
2. Hostels to replace our Nurses' Homes.
3. The option of Trained Staff to live out.
4. The 48-hour week and 96-hour fortnight.
5. Ratio of Nurses to Patients.

6. Salaries.

7. Superannuation—Interchangeability of Pension Schemes.

Housing of Staff.

A great deal has been written in the Lay Press about Nurses' conditions during the last 18 months, and none have been more exaggerated than the management of our Nurses' Homes.

Some of us know to our sorrow that when an extension of patients' accommodation is proposed, a similar extension of Nurses' Quarters is inclined to be overlooked, or considered to be of secondary importance. The patients' beds appear and we are expected to do the rest. A second bed is put into a single room or Maids' Rooms used as a temporary measure—a fatal thing to do—and so the new accommodation for staff is deferred again and again.

But this is not true of the majority of schools, who for many years have striven to give their Nurses spacious sitting-rooms and light airy bedrooms, tastefully furnished with hot and cold water laid on, and the same etceteras as one finds in a first-class hotel. There are innumerable such buildings throughout the country, and if the hotel idea could be kept in mind we should hear less criticism of Nurses' Homes.

Many of you will say that the average Nurses' Home provides much greater freedom than is possible in an hotel, and I agree. But in any large community there is a tendency to "want more" and yet more, and I think we are suffering from this spirit very acutely in 1938. But one can use the comparison of hotel management when difficulties arise.

I find in practice that if a request is tested by the question: "Is it reasonable?" and the answer is in the affirmative, all is mostly well.

And so, shall we take the usual criticisms of our homes and put them to this test?

Is it reasonable for a Nurse to have a wireless or gramophone in her bedroom?—*No*. But earphones which can disturb no one—*Yes*.

Is it reasonable for a Nurse to expect complete privacy in her bedroom on her day off?—*Yes*.

Is it reasonable for the Home Sister to look in her drawers?—*No*.

Is it reasonable to expect to receive friends when off duty?—*Yes*.

Is it reasonable to expect to receive telephone messages (urgent ones)?—*Yes*. Others—*No*.

Is it reasonable to add to her furniture?—*No*.

Is it reasonable to have innumerable trinkets on her dressing table?—*Yes*, if she keeps them clean herself. Otherwise—*No*.

Is it reasonable to expect food to be brought to her room at odd times?—*No*.

Is it reasonable to be able to make a hot drink before going to bed?—*Yes*.

Is it reasonable to smoke in her bedroom? Until you have had two fires in six months—*Yes*. Afterwards—*No*.

Is it reasonable to let the bath overflow and leave innumerable electric lights on?

And so on.

With regard to Late Leave the community really makes its own rules by its behaviour, and the difficulty lies in making young people appreciate this point.

In considering the Trained Staff, it is helpful if their quarters can be in a separate building from the trainees. The Senior Sisters, of a certain number of years' service, should have the advantage of bed-sitting rooms.

I think we all regard our sisters as the backbone of the Hospital, and they should receive every consideration in their leisure hours.

The Domestic Staff, too, should be housed well away from either Sisters or Nurses if this is at all possible, but that

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