

by the wastage of candidates during training and the fact that many who complete training leave the profession. This means that there are never enough nurses to care for patients.

I.—THE SPHERE OF THE NURSE.

The problem to be solved is the right use of skill so that every patient, wherever he may be, is given the skilled nursing care he needs to bring him back to health. Everything which is not nursing should be done by trained ward orderlies and domestic staff.

II.—WORKING AND LIVING CONDITIONS.

(a) *Salaries*.—The girl who is drawn to nursing as a career finds that there is no progressive scale of salaries which would enable her to remain in contact with patients. The key post of ward sister does not offer satisfactory professional status or financial inducement. Moreover, a sister is thought to be lacking in enterprise and ambition if she is not willing to take administrative preferment. Not only does the training of nurses and medical students depend on the teaching of the ward sister, but in her contact with patients and their relatives she has a great part to play in health education. In our opinion, it is this lack of recognition of the importance of nursing as compared with administration which is one of the main reasons why nursing fails to attract and keep nurses.

(b) *Hours of Work*.—If patients are to be properly nursed throughout the 24 hours a radical reconstruction of hours of duty is necessary so that overlong spells of duty may be avoided.

(c) *Working Conditions*.—Living conditions for all ranks of nurses are often unsatisfactory, with poor food, poor quarters, petty restrictions, and enforced residence of senior staff. These should be improved so that nurses have the same opportunities as other professional women to take a share in the general life of the community.

III.—TRAINING OF NURSES.

If the burden of extraneous duties which now claim from 40 to 50 per cent. of the nurses' time were removed, a much better and possibly a shorter training could be given, especially if the nurse in training were received and treated as a student of nursing rather than a hospital employee.

A copy of the foregoing has been sent to the Minister of Health, who has already indicated his interest in our proposals, and also to the Ministers of Labour and Education.

The National Advisory Council for the Recruitment and Distribution of Nurses has been asked to consider it and to press for a Royal Commission or other form of public enquiry into the conditions under which patients are nursed.

Will every nurse who agrees with the points we have made let us know by sending a postcard to Miss Hendey, West Middlesex Hospital, Isleworth, Middlesex?

(Signed) W. SIMMANCE.
H. HENDEY.
B. MATHIAS.
A. C. MURCH.

A CONSTITUTIONAL RIGHT.

This consultation around the table of the Minister of Health is of far greater importance than will be generally realised. It concedes the right of the workers to place their considered opinion concerning their own work and service, that is, their position in the body politic, before the appropriate Minister of the Crown.

This privilege has been denied by successive Ministers of Health, so far as Nursing is concerned, since the retirement of Lord Addison from the Health Office where every consideration was extended to Registered Nurses after his excellent Nurses' Bills were made law in 1919.

THE INTERNATIONAL COUNCIL OF NURSES.

Miss Effie Taylor, President I.C.N., and Miss Isabel Stewart, had a very warm welcome in Great Britain and coming into touch as they did with a number of those now warmly interested in its work, have returned to U.S.A. with clear impressions of the situation, and are thus prepared to take hold of organisation necessary for the progress of the future work of the I.C.N. Finance is of course the basis of immediate progress, and do not let us forget how much we owe to the American Nurses' Association in keeping organisation solvent for the past war years.

The hope of European travel suggested by our guests could not materialise owing to lack of organisation abroad at the present time, but it is hoped by next summer the tour abroad may become effective. Meanwhile, our new *International Nursing Bulletin*, to be issued from Headquarters in New York this month, will keep us in touch with affairs.

Before leaving England, Miss Effie Taylor and Miss Stewart, dined at the Headquarters of the Royal British Nurses' Association, the premier Trained Nurses' Organisation in the world, promoted by Dr. and Mrs. Bedford Fenwick in 1887, and founded by the group of pioneer progressive Matrons in London, headed by the late Miss Isla Stewart, Matron of St. Bartholomew's Hospital, who worked and paid for years for the Royal Charter and State Registration in the United Kingdom. Our international guests were much impressed by the beautiful Headquarters of the Association in Queen's Gate, S.W.7, and its flourishing club, and were requested to convey affectionate greetings to Miss L. L. Dock, Professor Adelaide Nutting and Miss Goodrich, to all of whom more is owed than can ever be repaid, for their initiative, devotion and generosity.

THE PRESS AWAKES.

Many leading papers have, during the past month inserted long articles on the "Shortage of Nurses," which has become so notorious that it can no longer be ignored. They are sympathetic and accurate as far as they go, but they, one and all, evade the basic cause for what amounts to a national disaster. It is simple.

Registered Nurses have been suppressed—exploited, and their hardly won status de-graded—through the notoriously unjust Nurses Act, 1943, which classes these devoted, highly qualified women with semi-trained and totally untrained persons "Christian Science Nurses,"

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