

Nurses had caused an actual increase in numbers at present employed; for instance in 1941, 58,269 domestics were employed, and there was a shortage of 7,780. In 1948, 92,601 domestics are employed, and there is a shortage of 9,458.

Yet the Working Party's Report showed that a quarter of the Nurses' time is still spent in domestic duties.

With regard to the present shortage of cooks, she pointed out that Hospitals can send suitable kitchen maids to one of the Ministry of Labour's training courses.

Mr. Lockyer, Ministry of Labour, speaking on the same subject, said that in the Sheffield Area there were only 60 vacancies. He also gave facts and figures of employment and unemployment. He stressed that if the office cannot fill vacancies from local sources, other offices are asked to help.

*Tuesday, September 14th.*

Miss Eggleston, Deputy District Officer, Ministry of Labour and National Service, spoke on the "Advantages Offered by Competing Fields of Employment." She informed us that the Labour Exchange officials talked to school-leavers on careers and stressed the many inducements held out by the competing fields. Some of the reasons given to her by girls for leaving Hospital Domestic Service have been:—

Insufficient privacy. Split duty times. Off duty times changed at short notice. Shortage of labour saving devices. Insufficient scope for advancement for the ambitious girl.

In reply in my own speech on "The Advantages which Hospital Service can offer to Domestic Workers," I pointed out first that all Hospitals do not offer at present all these advantages, but there is no reason why they should not. We can offer security of employment, opportunities for specialisation and promotion, pensions for all, settled hours and relief when off duty, company of others of either sex and a good social life, good living conditions for residents, with constant hot water, rooms for personal laundering and ironing, warmth, cleanliness, recreational facilities, clean, healthy work and an attractive uniform.

The Hospital Domestic Worker was an integral part of the Health Team, and when she was made to feel this, much satisfaction was gained by her.

Miss Edwards, Organising Secretary of the Sheffield Association of Girls' Clubs and Mixed Clubs, spoke of "Rest and Recreation." She spoke on the work of the clubs and of the stigma attached to domestic work. Discussion arose on whether it was better to provide Resident Domestic workers with amusement or encourage them to go out, and it was decided that both were required according to the situation of the Hospital. Miss Edwards was asked to help by welcoming Hospital Domestic workers if we encouraged them to join.

*Wednesday, September 15th.*

Mr. Peter Smith, Training Service Officer, Ministry of Labour and National Service, spoke on "Training Within Industry." He explained that the scheme was started in 1944 and extended to Hospital Service in 1946. The programme consisted of: 1. Job Instruction. 2. Job Relations. 3. Job Methods. In five two-hour and ten one-hour lectures, each Session at eight weeks intervals for ten people of mixed interests. This has been carried out experimentally in some Hospitals, but it is too early to say with what benefit.

Miss Brown, Adviser in Hospital Domestic Management, Ministry of Health—"Suggested Developments in the Hospital Services"—informed us that there is a nine months Course for school-leavers and Hospital Domestic workers in existence in Birmingham. Also a two-year training for Institutional Management, but the School Certificate standard is required from these candidates. Interest was

shown in the first Course, but the second was beyond the scope of the Hospital Domestic.

Miss Seton, Organiser for Domestic Subjects, Middlesex Education Committee, spoke on the "Opportunities provided by Local Education Authorities" which seemed to be solely for Catering Staffs—e.g., the City of Guilds.

*Thursday, September 16th.*

Mr. Greystoke, B.Sc.(Econ.), B.Com., Lecturer in Economics, the University of Sheffield, gave a most interesting talk on "Wage Standards and Incentives." He said conditions were determined by the competition between services for scarce labour. The interdependence of the wage scale causes wages to be determined not by the Management, but by Industry in general. It is the marginal workers who don't mind which Service they work for, who are attracted by wages and conditions only. Also the rise in wages and change of outlook of the worker has caused a shortage of resident domestics. He spoke also of the changed relationships between management and worker due to many factors, including the loss of the incentive of increased wages for better work owing to the general increase in the standard of living and the collective bargaining of wage councils. New incentives were being adopted in industry, such as prizes and other forms of recognition for good performance, training schemes and opportunities for promotion. To foster the pride in work which is essential to good relationship between worker and management he suggested that Group loyalty be created by Community outings, etc., and that Unit loyalty can be created on Wards by making the Domestic feel she is part of the Health Team. Pride in her uniform should be encouraged in the Hospital Domestic, and the issue of a booklet on the Institution for welcoming the new recruit would be helpful. He also stressed the benefit of judicious praise and the uses of joint consultative machinery.

Miss Goddard, Deputy Adviser in Hospital Domestic Management, Ministry of Health—"Modern Principles and Practice of Staff Supervision"—said the employee now does not accept strict discipline, fines, fear of dismissal, or the state of "living-in" or sense of inferior status. The loss of old incentives leaves only the conviction of the worker that he has a place in the scheme of things. Hospitals, she said, have a powerful incentive there if it is properly developed.

The guiding principles of management should be consultative machinery, scientific investigation of jobs and accurate timing, labour saving devices and up-to-date equipment, opportunities for promotion, justice and fair treatment and rules to be simple and just and to apply to all.

Mr. J. Griffiths, F.H.A., Chief Administrative Officer, the United Sheffield Hospitals, on the "Problems of Hospital Life," pointed out that all problems involve the individual, the social factor, the economic factor. The solution lies in the recognition of the factors involved, the recognition of good organisation and the value of discussion.

*Friday, September 17th.*

Mr. H. J. Marsh, Director of Personnel Advisory Service, Institute of Personnel Management, speaking on "Personnel Management," said a personnel officer is necessary only if all other officers are occupied with technical duties and so have no time for the welfare of the employees. To be effective personnel management should consist of informal consultations, as exemplified by the Matron's rounds of the wards and departments, and of formal consultations by means of joint consultative committees, which must be elective, and the representatives must report back to their colleagues. Britain, he said, had nothing to learn from America in the field of human relations. In this we had set the example to the world in many ways.

D. W.

[previous page](#)

[next page](#)