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Editorial.

IN THESE DAYS OF CHANGE, and continual change, we are apt, in the turmoil of our every day life, to overlook the ethics which our colleagues of fifty years ago set before us, and although first written in 1901, these words still hold a message for the younger generation of nurses.

Ideals.

“Who aimeth at the sky
Hits higher far than he who means a tree.”

How prosaic, how disappointing, how commonplace is life! How hard it would be if we did not sometimes get glimpses of the ideals with which we began, and which, in spite of the disillusion, and the sobering experiences that come with later years, still gleam beautiful and bright as ever. There is the profession which we entered with so much enthusiasm, counting the hardness of the life as nothing, compared with the honour of belonging to the band of the noblest women the world contains. Well, we have had to revise our ideas amidst some disappointment and bitterness of heart; we find nurses much the same as other human beings, as liable to petty, unworthy failings, as small-minded and as jealous as their neighbours. Yet here and there one arises who revives our hopes, who demonstrates that our dream may become sober reality, that what one has attained to others can achieve, and who keeps alive our faith in the ideal.

Again with regard to work, we set out with high views as to its performance, we come into contact with nurses whose work is perfunctory slipshod, untidy, careless, and showy; so long as things appear right on the surface the unseen details are slurred over or neglected, for it is just these details, which make all the difference between good and bad work, that take up time. The conscientious woman, moreover, often sees her superficial colleague gain credit for smartness and quickness, while her own work is considered slow. Then comes the question. Does this attention to detail matter so much after all? Would it not be better to be quicker and less thorough? When this question presents itself what is the safeguard against degeneration? Let us keep our ideals before us and aim at, if we cannot achieve, the best.

Again, with regard to professional organization we set out with such high hopes. How well we remember the enthusiasm of fourteen years ago. Are we to lower our hopes because unexpected difficulties, unexpected disappointments have arisen? By no means. We will keep before us the ideals with which we started. Sooner or later we shall attain them.

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“Perfection is made up of trifles, but perfection is no trifle,” so it seems worth while to discuss a subject which

has forced itself upon our attention in the course of visits to various hospitals, namely, the deportment of nurses on staircases and in passages. Even in hospitals of high reputation we have noticed nurses laughing and joking, calling to one another, singing, and behaving generally in an unrestrained fashion in the public corridors. “Well,” some one says, “there is nothing wrong in this. Why should not nurses be happy, poor things, when possible, they have plenty to sadden them when on duty.” No, there is nothing *wrong* about it, but in our opinion it is very unseemly.

Imagine the feelings of an anxious relation suddenly summoned to a dying bed, who hears on reaching the hospital, peals of laughter from nurses in the corridors. True, the nurses are off duty; true, they may just have been attending the patient in question with all devotion, for there are few, happily, who are not tender and gentle to the dying, but this impression will scarcely be conveyed to the relations, and a hospital may get a name it by no means deserves from an incident of this kind. Again, we all know how sounds are carried up “well” staircases—the form of staircase used in most of our hospitals—and sounds of laughter and conversation may penetrate the wards, and annoy patients to whom quiet is essential.

Then it must always be remembered that behaviour which is allowable in the privacy of one's own home is quite out of place in public. In a private house, for instance, no one objects to the sound of a voice, either speaking or singing on the stairs. But directly we enter public life our behaviour must be quiet and restrained if it is to be seemly, and while this applies to all deportment in public, it is intensified in institutions which are concerned in the care of the sick and dying. After all, the matter is not so much one calling for hospital regulations, as for the cultivation of the sense of the fitness of things on the part of individual nurses. Some women instinctively do the right thing at the right moment, others have to acquire the habit with more or less difficulty, but it is an art which every nurse should take pains to cultivate.

We needs must love the highest when we see it.

TENNYSON.

Such trifles make the sum of human things,
And half our misery from our foibles springs;
Since life's best joys consist in peace and ease;
And though but few can serve yet all may please;
Oh, let the ungentle spirit learn from hence
A small unkindness is a great offence.

HANNAH MOORE.

[previous page](#)

[next page](#)