

according to the doctor, was liable to die at any time. But the fullest inquiry ought to be made in such cases, not because of any suspicion attaching to the Workhouse officials, but for the satisfaction of the public. A worse case than that, however, occurred just before the Board's last meeting, when a woman, who had just been sent from Barnoldswick, and who was now dead and buried, was found one morning under circumstances which led to the conclusion that she had, while on the floor of the ward in which she was confined, given birth to a child. The woman was evidently unable to call for help, and might easily have died before morning through sheer exhaustion. Violent convulsions ensued, and the poor woman died. There were four people in the next ward, one door separating them. One of these was perfectly deaf, the other physically and mentally deranged, another an imbecile, and the last a woman who was supposed to be in charge of the other three, and she was found asleep and heard no cry for help from the adjoining ward. He contended that such cases as those ought to be made the subject of the fullest inquiry, and the Master should make an entry giving the fullest particulars and lay them before the Board. The Hospital Nurse had far too much to do. She had, on an average, 18 patients to look after, and some of them were quite incapable of doing anything for themselves. Of course, the Nurse could not be expected to do 24 hours' work in a day; it was out of all reason to ask it. He was afraid if such a state of things was allowed to continue, worse things would be happening. The only available woman who could act as Assistant Nurse was one who was afflicted with softening of the brain. He was not blaming anyone in the matter, but the master should enter every particular of any extraordinary deaths in his journal, and more Nursing assistance should be obtained. The Workhouse Master and the Nurse having been sent for, the latter was interrogated as to her work. She confirmed Father Sharp's statement that she averaged 18 patients in the Hospital, and half of them were unable to do anything for themselves. The only assistant she had was a woman who had, softening of the brain. She could not attend to her work for 24 hours every day; she did 14 hours a day at present, and that, she considered, was quite enough. With respect to the woman who was confined during the night, she was the last patient she (the Nurse) saw before retiring, and she did not complain of being ill. There was a bell-rope in the ward which, had she pulled it, would have aroused her (the Nurse) and she would at once have gone to her assistance."

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It is almost impossible to believe that such a horrible condition of things can exist in our public State supported institutions, and it is one more proof of the imperative duty of the public to arouse itself on this vital subject—the care of the sick poor in our workhouses, and arrange for their nursing in a skilled manner. The reign of the "Master and Matron" has already continued too long. We must have these responsible positions filled with trained and educated persons, who will provide for the care and nursing of these poor persons in the spirit of humanity.

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MISS GERTURDE DIX has an article in the "Westminster Review," entitled "Hard Labour in the Hospitals," in which she once more calls attention to the long hours and arduous duties of Nurses

during their term of training, more especially in the sick wards of the Workhouses, where Miss Dix describes the care of the sick, "A squalid scramble—miscalled nursing." In Paddington Workhouse there are nine Nurses to 300 beds, and in Bethnal Green 20 to 600!! Miss Dix suggests the remedy of an eight-hour day, and three shifts of Nurses. Who would be a Hospital Sister—under this arrangement? The constant change of Nurses might, by the bye, be the most efficacious method of reducing the number of sick persons to a minimum.

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MISS WESLEY, the Matron of the St. George's-in-the-East Infirmary, received as a Christmas gift from the nursing staff, a beautiful silver cream jug, sugar bowl, tongs and spoons in a case, together with a bouquet of flowers. It is pleasant to record this evidence of goodwill between a Matron and the Nurses, as it is only by this *entente cordiale*, that the best work for the sick can be accomplished.

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"A STUDENT of Nature" writes:—

MADAM,—“L.B.” who warns us under the above heading of a very serious danger, also lays stress, I am glad to see, on the necessity for the Nurse, for the preservation of her own health (her best stock-in-trade), to clean her lungs daily by draughts of fresh air. How little even educated persons, Superintendents, as well as the rank and file of the profession, seem impressed with this necessity; and I know of numbers of excellent Sisters in our Hospitals who are content with a whiff of fresh air once or twice in the week. As a Probationer, well do I remember the yearning after fresh air which I experienced for the first few weeks of residence in the Infirmary of a smoke-laden midland city; we Nurses only being permitted off duty once a week. I remember Matron saying to me—she was an excellent woman—“Never go off duty morning or evening, without leaving every article under your care in a perfectly *cleanly* and orderly condition.” Exactly; the only dirty thing permissible in the ward being myself. China, glass, pots and pans, all must be scrubbed, cleaned, polished, and put away. But how about my own person? A very limited supply of baths and hot water, made my daily ablution a difficulty; had my woollen gown been originally white instead of blue, its appearance after six weeks wear would have appalled all beholders, and as to my respiratory organs, the germ-laden and malodorous air which I habitually breathed for six days out of seven would inevitably pollute the purest blood. I slept in a room with a wide window high up in the wall, and nightly, before going to bed, I wrapped myself in a blanket, climbed by the wash-stand on to the sill, and there sat for fifteen minutes with the window wide open, inhaling the cool and delicious night air, reinvigorating exhausted nature by a “cool air bath.” By this means I believe I maintained my health and prevented the various species of blood-poisoning and debility from which sooner or later the majority of my companions suffered—tonsillitis (familiarily known as Hospital sore throat), whitlows, carbuncles, anæmia, zymotic fevers, to say nothing of the rapid decay of their teeth; this latter sign of air poison is so terribly common amongst Hospital Sisters that it is worthy of prevention, if possible; and I strongly advocate the daily fresh-air flush of the air vesicles, by at least an hour in the open.

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