

## HINTS FOR MEMBERS OF THE PUBLIC EMPLOYING PRIVATE NURSES.

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I read with mixed feelings the other day a little pamphlet called "Don'ts," containing a quantity of negative advice to nurses—private nurses—no doubt good advice, but advice that was so obvious that one could not but wonder, at first, as to what kind of nurses the authoress had met, and where on earth they had hailed from. Then, however, as I speculated on the often extraordinary behaviour of the general public (from whom, after all, nurses spring) towards nurses, I thought it might not be superfluous to embody a little advice to the said public, also in a series of DON'TS, which, with sincere apologies to the original authoress for my plagiarism, I do:—

DON'T engage a nurse who is not a trained sick-nurse, and then abuse the whole profession for the shortcomings of one who is practically an impostor.

DON'T send an institution a satisfactory account of an unsatisfactory nurse because you have not the moral courage to send a true one, and then ease your conscience by abusing nurses in general to your friends.

DON'T cease to be mistress in your own house because you have a nurse. Keep the reins in your own hands; it is better for everyone.

DON'T make a bosom friend of a perfect stranger simply because she comes to your house as a nurse; don't initiate her into all your family secrets and then speak of her, when the danger is over and you have cooled down, as "that prying, inquisitive woman."

DON'T engage a woman as a sick-nurse, presumably because you have a sick person in the house, and then expect her to act as extra housemaid.

DON'T encourage the servant to refuse all help to the nurse. Lectures of advice to private nurses teem with instructions for propitiating the servants. This should be entirely unnecessary if the lady of the house is really its mistress,

DON'T expect a nurse to know by instinct the working of your house; see yourself that she is properly housed and properly fed, and explain to her how you wish her to manage in domestic matters.

DON'T attempt to overrule the doctor's orders to the nurse; appeal to him yourself if you wish anything altered. Remember he is the nurse's professional superior.

DON'T tempt your nurse to be disloyal to the doctor under whom she is working by trying to persuade her to give you her private opinion of his treatment; whether she knows anyone "especially good at the patient's complaint," "if you think the medicine suits dear Carry," &c. This is frequently done.

DON'T artlessly engage an enthusiastic nurse in professional conversation and draw from her delightfully harrowing details about former cases and hospital work, and afterwards deride her behind her back for "always talking shop" and "telling such terrible stories."

DON'T wonder, when you have grudgingly allowed the nurse six hours' rest in the twenty-four for a week that she is not "fresh as paint" at the end of that time. Wonderful to relate, a sick-nurse is a human being, and is as likely to be worn out as a signalman who does twelve hours' duty in the twenty-four.

DON'T marvel that a young woman with a healthy appetite does not find a cup of tea sufficient food when on night duty from 9 p.m. to 9 a.m. Remember that hospitals provide two meals during the night for their night nurses—one a substantial one.

DON'T imagine, because a nurse does not admit unlimited friends to a patient's room, that it is always done out of sheer "contrariness." The irritation, the physical discomfort, and the lassitude induced by severe disease often cause patients to have no desire to see their nearest and dearest, strange as it seems to those in health. Very often the rest from even pleasurable emotion is a strong factor in treatment, and where the relatives and friends feel themselves aggrieved at not being allowed free access to the sick-room they should always appeal to the doctor for a definite statement, as the delicate task of "keeping people out of the room as much as possible" is often left to the nurse.