put them right, and to make them combine and form one harmonious truth, Light. Truth, said Plato, is the body of God, and light is His shadow.

# REPORTS

# THE NURSING AND ADMINISTRATION OF PROVINCIAL WORKHOUSES AND INFIRMARIES.

SPECIAL COMMISSION OF THE "BRITISH MEDICAL JOURNAL."

WREXHAM.

THE Wrexham Union is in the midst of a populous district; though the number of square miles is not large, the number of parishes grouped in the union is nearly as high as any in Wales. We were therefore not surprised to find a large workhouse with its separate infirmary and nursing staff. An introduction from the medical officer of the workhouse, Dr. Davis, secured us a cordial welcome and ready co-operation on the part of the master and matron, who took us over the house with pardonable pride in its cleanliness and humane management.

## INFIRMARY BUILDINGS.

The infirmary is in a separate block, two storeys high, standing open all round, the wards extending like wings, having windows on each side, thus securing ample light and ventilation, and the cheerful aspect that goes with these prime necessities for the sick. The wards vary in size; the larger, on the first and second floors, hold as many as twenty-six beds; the smaller, twelve, six, or three. There are no day rooms for the sick or the infirm. On the ground floor we saw some imbeciles and idiots in a day room, but on the upper floors such patients as were up were grouped round the fires, or were sitting by the bedsides. There is an ample water supply, hot and cold water laid on to every floor, with water-closets, sinks, and bathrooms, all of which were wholesome and clean at the time of our visit.

# WARDS AND PATIENTS.

The large wards are arranged with beds on either side, having a strip of matting down the middle of the ward; there are lockers, pictures, plants, and armchairs; we thought the supply of the latter rather scanty, as a large proportion of the inmates are infirm old people; but the whole appearance of the wards was comfortable, and betokened wise and humane management. The bedsteads vary in width; the bedding used is long straw. Those we turned up were quite clean and amply supplied with blankets.

At this time of the year the wards are not full; there are sixty-two beds on the male side, and sixty on the female side, with about sixteen isolation beds in various parts of the infirmary. Each group of wards seemed to have a separate ward attached for isolation, which is used for any offensive case; in one such ward we saw a man with cancer in the mouth, kept apart because of the effluvia. On another occasion these wards might be used for the controlling of an unruly patient, and besides the small wards there is a padded room, where a patient would be kept, guarded by inmates until removal.

We saw about ten inmates in bed; a woman with cancer of the breast. which was washed with boracic lotion, and dressed with the same ointment; another woman, who looked very ill, reported to have "some internal complication;" a case of rheumatism, a case of fits in a padded bed, paralysis and old age completing the number.

The lying-in ward is apart from the other wards, and has its separate offices; it is close to the nurse's quarters. The wards are warmed by coal fires and lit by gas.

# SYSTEM OF NURSING.

There are two paid nurses, one on the male and one on the female side. The latter is a fully-trained nurse, and is the midwite; the former, though not hospital-trained, has had

long experience in the work, and was reported to us by the matron as very capable in the management of her wards and patients; certainly in appearance her wards compare very favourably with the other side. There is no night nurse, nor as a rule are any inmates told off to sit up in the wards at night. The matron informed us that, when necessary, special paupers were employed as watchers; they had rest in the daytime, and some little extra tea or tobacco; the nurses were called up in the night if necessary. We asked what system was employed in the distribution of the paupers among the wards; the matron replied that when she found that an inmate was doing the work of the wards well, he or she was kept there unless proved guilty of unkindness towards the patients, in which case they were sent into the main building.

Such patients as can do so make use of the night stool or closet on the landing; the others are helped by the wardsman or woman. The paupers make the beds, help with the washing of the patients, wait on them, and do the cleaning.

We saw a card over each bed, and temperature charts were in use; the card, probably that issued by the Board, was hardly precise enough in its arrangement; there was very little space for the diagnosis, treatment, or result; it could not serve as a record of the case.

#### CLASSIFICATION.

The imbeciles, idiots, and cases of fits are on the ground floor, the sick on the first floor, and the infirm on the top floor. We did not see any separate wards for the treatment of children, and to the best of our recollection we saw some infants on the lower floors. It does not follow that they were with the idiots, but the nursery quarters were not up to the mark, as there was no reponsible attendant to look after them. Lock cases and patients with offensive disease are placed in the small wards off the larger ones.

#### DIETS.

The diets for the sick include soup, broth, rice puddings, and such extras as are ordered by the doctor; and milk or beef tea is left in the wards at night. We went the round at dinner time, when soup and bread were being served.

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The matron informed us that she endeavoured to give the sick in bed such food as they could take, and they had tea extra in the afternoon for those who could take it.

## RECOMMENDATIONS.

The tone and management of this house impressed us very favourably; the officers seemed to regard their charges as human beings to be cared and planned for. We would nevertheless recommend:

An increased staff of nurses for the sick, the employment of a night nurse, and the exclusion of pauper help in the actual nursing. The separation of the infants from the adults, the provision of special accommodation for them when sick, and of a paid official to take care of them. A paid attendant for the fit cases and imbeciles. Improved airing courts for the infirm; those now used are too much like back yards. More arm chairs and couches for the sick and infirm wards.

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CHESTER: A CORRECTION.

We have received a letter from the medical officer of the Chester Workhouse (Dr. Archer), pointing out a few inaccuracies in the report of our Commissioner on that infirmary. We are as anxious as himself that there should be no exaggeration in the reports that we are publishing, therefore we give the sum of his letter. He first states that the number of patients reported as being under the charge of each day nurse is in excess of the facts; but as the report refers to the number of beds for which the infirmary is licensed, this may account for the discrepancy. The separate block for the lock and itch patients contains "four beds in the male lock, six in the male itch, five in the female lock, ten in the female itch." Dr. Archer traverses the statement that "a pauper is in charge of the children's ward," and states that "although a pauper sleeps in the ward with the children and helps to look after them, the ward is on the same floor as the nurse's room," this seems to us a question of degree, as it is evident that the nurse must rely on the pauper when her duties call her to other parts of the building, and for twelve or more hours the pauper is in sole charge. Our Commissioner commented upon the need of improved closet and bathroom accommodation, "especially in the lock and itch wards." The medical officer states that there is a separate closet and bathroom for each of these wards; we apologise for the mistake, and are glad to find that the need has already been met. With regard to means of communication with himself at night, this again is a question of degree, though every available means is taken by the master to bring the doctor as quickly as possible. Still we say that anything short of telephonic communication is insufficient. We are obliged to Dr. Archer for his comments, especially as they serve to accentuate the main facts of the case, which it was the duty of our Commissioner to ascertain.