

*Some Present-day Problems Connected with the Administration of Asylums.* By BEDFORD PIERCE, M.D., F.R.C.P.Lond., Medical Superintendent, The Retreat, York. A contribution to a discussion on Administration of Asylums at the Spring Meeting of the Northern and Midland Division.

IN many respects the difficulties of administration are greater in hospitals and private institutions than in public asylums maintained out of the rates. The financial problems raised by the reduction of hours and the increase in salaries, as well as the greater cost of all commodities, are very serious when there is little prospect of increasing the income to meet the increasing expenditure. What will happen if the present tendency continues no one can foresee, but it seems quite clear that the middle classes will soon be unable to bear additional burdens. Already many patients with limited income cannot possibly pay increased charges, and it would be cruel to discharge, for financial reasons, aged patients who have been under care for years, and have no other home than the asylum in which they live.

Serious as the financial problem is, there are other disturbing questions of even greater moment. There is, I fear, slowly developing a want of harmony with the staff and the management, and a deplorable tendency to ignore the welfare of the patients. In the recent demands of the Asylum Workers' Union I could see no trace of any concern for the patients. There was no sign of any proper nursing spirit; all the staff were counted equal in the Union, and demands were made for reduction of hours quite irrespective of the duties undertaken. I only judge from the printed circular, and I have not come into personal contact with any of the leaders of this movement, and possibly I may misjudge them to some extent. Still, there are many indications that the well-being of the patients is not the primary concern of members of the Union.

But, as was remarked at one of the special meetings of the Medico-Psychological Association in London, we physicians have also been to blame to some extent, and we must not be surprised that the nursing staff do not readily accept our point of view. Long before the war the pay and the conditions of service of the mental nurse left much to be desired. I have always felt that men or women who devote their lives to nursing the insane deserved much greater recognition than has been given. The work, as we know well, is often very arduous, and brings little reward beyond the satisfaction of doing difficult work well, the pay has been miserably poor, and there have been few signs of appreciation from patients, their friends or from managing committees. When we think of the daily routine in many wards, the discouraging nature of the

work, and the unpleasant duties that have to be performed day after day and week after week, we admit that the conditions of service ought to be good and the remuneration liberal. Yet we, who knew all this, did not, I fear, press upon our committees in season and out of season the urgent necessity for their giving attention to these aspects of the question.

The situation seems to require some clear thinking, or I fear the work of the Association to raise the level of mental nursing will be undone. Hitherto the nurse who has obtained the certificate of the Association has only received a small increase of salary, with the result that in many asylums only a small proportion of the staff are trained nurses. The training itself has not always been thorough, so that the certificated nurse has frequently not been worth promotion to senior posts. The suggestion I would make is that the Association renews its efforts to train nurses well, and also that every effort be made to render the position of the certificated nurse much better than those not so trained. The man or woman who takes up this vocation should find that mental nursing is a career which brings not merely adequate remuneration, but also a social *status* quite removed from that of the ward-maid or labourer.

I have always tried to teach our nurses at the Retreat that they were taking up a profession akin to that of the physician, and I have read to them extracts from the Hippocratic oath referring to the sacred nature of their responsibilities towards their patients.

Thus, on the one hand, I would urge a far greater improvement in the conditions of service of the trained, experienced nurse than has already been obtained, and on the other I should demand much greater devotion to the work than seems to be compatible with the trade union spirit.

I am quite certain that the more carefully we personally train our nurses, and the more we can infuse a proper professional spirit, the less we shall be troubled with disaffection and discontent. But at the same time, the more we bear in mind the conditions under which our nurses work and the more we understand and sympathise with them in the discharge of their truly arduous duties, the less we shall be satisfied with things as they have been in respect to hours, pay, and conditions of service generally.

The practical difficulty is what to do with the many excellent persons in our employ whose education and general qualities do not permit them to reach a sufficiently high standard. I presume, for some years at least, we shall have two classes—the partially trained and the trained certificated nurse. At the Retreat we have begun to pay certificated male nurses £20 per annum more than attendants, and it is intended this amount shall be increased. I look upon this only as a start, but

it is a step in the right direction. On the other hand, it will be desirable to arrange that special qualifications in the senior attendants should receive recognition.

These proposals are only of value if the training the nurses receive is adequate.

There seems to be room for considerable improvement in the present system of training, and the regulations of the Association require amendment.

Some years ago, when I was examiner for the Certificate, it was clearly evident that many nurses who presented themselves for examination were practically illiterate, whilst there was reason for concluding the training they received was poor. The number of lectures allowed by the regulations is far too few. There is no proper provision for demonstrations and instruction in practical nursing. Invalid cooking should be taught to all women nurses, and opportunities given for instruction in massage. The class examinations should be compulsory, and only those who succeed reasonably well should receive advances in salary. In this way the illiterate who fail to educate themselves would gradually be eliminated.

Lastly, it has been the practice at the Retreat for many years only to take nurses who sign an agreement to go through a course of training for four years. I consider this period for training necessary, and it corresponds with the years of apprenticeship required in many trades. Nurses learning their profession should receive only a comparatively small initial salary, which should rise steeply as they progress, and when qualified they should command, as I have already said, a salary proportionate to the responsibility of their calling.

If it be found impossible to secure men and women to train on lines such as these, then I suppose others must be engaged, but these would not be trained, would not attend classes, and should never reach responsible posts. They would be attendants and not nurses. Their initial salary might be higher, but the advances would be more gradual, and the final pay much less. This view of the matter is similar to that in many trades: the man who begins as a labourer gets more pay than an apprentice, but remains all his life in an inferior position.

It seems to me that the Medico-Psychological Association can do much to help the nursing profession, and greatly benefit patients if it steadily perseveres in its policy of training mental nurses, and sees that the training given is really effective. This will inevitably result in improved *status* and better remuneration for the nursing staff.

It may be interesting to give particulars of the introduction at the Retreat of Departmental Councils, on the lines of Whitley Councils now so general in industrial concerns.

Three departmental councils have already been started—(1) For male

nurses ; (2) for female nurses ; (3) for the outside staff, including artisans and engineers.

In each of these the staff concerned elect five or six representatives, care being taken that all classes in the department are represented. The management is represented by one or two members of the Committee, the responsible officers of the department affected and myself.

Each Council appoints a clerk, who keeps the minutes, and the minutes are submitted each month to the Committee of Management. The Councils meet monthly.

So far the meetings have been useful, the discussions have been frank, and the impression on my mind is that they will promote a better understanding. The attitude of all the Councils is thoroughly loyal to the institution. No doubt in time questions will be raised which the Committee may decline to take up, but there is a reasonable hope that the interchange of opinion will lessen the risk of dissatisfaction and discontent.

The relations between the management and the staff at the Retreat have always been harmonious—indeed, it has been a sort of family party ; but I encouraged the establishment of these Councils in view of the tendency of the times, and if possible to anticipate the difficulties which I knew existed elsewhere.

One question raised may be alluded to. It was asked whether the Committee would object to members of the staff joining a trades union. They received the formal reply that the Committee raised no objection whatever, but they wished it to be understood that they would not willingly retain on the staff any persons capable of leaving, and so neglecting their patients, without giving adequate notice. Other subjects referred to at these Councils have been the difficulty of reducing hours when short-handed ; the proposed new time-table giving fifty-three hours a week and a varying period of about three hours weekly to games and entertainment of patients ; the stokers' hours of fifty-six per week—three shifts of eight hours each ; the cultivation of games amongst the nurses ; holidays for gardeners, etc. All these subjects are discussed, but the final decision rests, as heretofore, with the Committee of Management.

I cannot but think the old days of autocratic management are over, and though some who think a beneficent autocracy is the best form of government may lament the change, we can nevertheless look forward without dismay to the new era of democratic control if the proletariat recognises its responsibilities. The Works Councils are, I consider, useful as a means of introducing the spirit of mutual understanding and co-operation without which no institution can be successfully managed.