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intimately associated with that of medical men that it is obviously for the benefit of both professions that such representation should be given, and accepted. Until the Charter was granted, it is easy to understand that representative medical Societies did not feel called upon to take any part in controlling an unincorporated body—an Association which might at any time fall to pieces and cease to exist. But when the Nurses' Association was incorporated by Royal Charter, and not only became, therefore, the first body of women in this country to be organized by that ancient method, but also obtained the prestige and status which such incorporation necessarily confers, it became essential that it should be governed, so far as the medical profession was concerned, not by any Tom, Dick, and Harry, who represented himself and nobody else, but, as far as possible, by men who occupied the position of control as representatives of large numbers of their professional brethren. It was therefore arranged that the Presidents, for the time being, of the British Medical Association and of the Medical Practitioners' Association should have permanent ex-officio seats given to them upon the Executive Committee of the Nurses' Association—the principle of having such representative members being of course capable of indefinite extension as time went on.

This arrangement was made fixed and permanent by specific mention in the Bye-Laws which received the sanction of Her Majesty's Privy Council, and therefore had a binding legal effect. When the Middlesex clique usurped authority in the Association, it became evident that independent and representative medical men were dangerous to the success of the private personal ends of the officials, as such gentlemen could not be bullied or coerced as the matrons and nurses were. Mr. Fardon and his friends, therefore, first broke faith with the Associations in question by withdrawing the seats on the Registration Board of the Nurses' Association which had previously been accorded to their Presidents; and then, a few months later, proposed that the Bye-Laws should be so altered as to remove these gentlemen from its Executive Committee. The Privy Council, it is understood, have sanctioned this proposal, and so permitted the officials to break definite pledges, involving the most important principles, and the most farreaching consequences to their professional brethren. Whether the action of the officials will prove to be expedient we consider questionable, but that to break such definite pledges is dishonourable, few persons will have any shadow of doubt.

We cannot, in fact, believe that the medical profession will approve or condone the insult to which it has been subjected at the hands of a few almost unknown members of its body; or even that it will permit the important principle to which we have alluded to be infringed without a contest. This, however, is a matter which we leave the Medical Practitioners' Association to settle with the staff of the Middlesex Hospital; and we have very little doubt as to the results which would follow a conflict on such grounds.

We would content ourselves, on this occasion, by saying that, as the organ of the nursing profession, we consider it most dangerous to medical practitioners that the control of the nursing profession should be allowed to fall into the hands of a small clique of unrepresentative and almost unknown medical men. If the medical profession, however, permits nurses to be thus exploited, we clearly foresee that the consequences will not be so disastrous to nurses as to the other interests which are involved.

Annotations.

CO-OPERATIVE NURSING.

IT is with unqualified satisfaction that we hear that arrangements have been made at University College Hospital by which private nurses, who have been trained in that institution, may take their own fees for the private cases which they attend, less a percentage of one shilling in the pound. This act of justice to the nurses should do much to make this Hospital popular with the public. Those of the public who appreciate the services of nurses supplied to them in sickness—and this means, practically, the whole of those so supplied-fail to understand the equity of the arrangement by which they pay £2 2s., or even £3 3s., for the services of a nurse, while the nurse herself receives, perhaps, 12s. a week of this sum. Institutions may explain as much as they please, but the fact remains in the public mind that the woman who does the work does not get the pay. As a matter of fact, the nurse receives, in a well-managed instituprevious page next page