

nurses in poor-house hospitals, as they have learned the tact necessary to deal with the patients found in such hospitals. I find that they require much more tact than they do in general hospitals. . . . They have to learn to control their tempers and to treat their patients in a way that nurses are not obliged to do in a general hospital."

Lady Helen referred to the value which a Register of Trained Nurses would have afforded at the time of the South African War. She showed that the reorganisation of the Army Nursing Department under a Nursing Board has since been accomplished, and referred to the prestige enjoyed by "Queen's Nurses," who are governed by a Central Board, and whose work is professionally supervised by officially-appointed inspectors. What had been done for these departments of nursing could be done for the profession as a whole. She asked the meeting, therefore, to give its adhesion to the principle of State Registration for Trained Nurses.

Dr. James Cantlie, F.R.C.S., then proposed the following resolution:—

"That this meeting warmly supports the principle of State Registration."

Dr. Cantlie said the subject was one upon which he could speak with enthusiasm for an indefinite time. About fifty years ago, at the time of the Crimean War, the condition of the sick was appalling, and the hand of man was found unfit to deal with the dilemma; then God created a new creature and the modern nurse was evolved. At present there was no standard for a trained nurse; there were many who in the opinion of one and another were splendid, but what was needed was some stamp by which the competent woman could be distinguished.

The scientific art of nursing was a branch of practical medicine, and he looked forward to the time when nurses would be placed on a Register as a special branch of the healing art. It was unfair on nurses to have to go round asking the public to examine their certificates and see how excellent they were. They should be put in a proper professional position, and be able to say "I am a registered nurse." There must be a standard of nursing education, and no amount of opposition could stop its enforcement. It was not the well-trained nurse who desired to usurp the province of the medical man—the more a woman knew, the less responsibility she desired to take; the danger was with the ignorant woman. At present, some nurses thought whatever the needs of the patient they must attend on the doctor first, because they depended on him for testimonials and consequently for work. It was a wrong and degrading position to put any woman into. He felt it so keenly that he could do no less than support most cordially the demand for Registration.

Mr. Richard Rigg, M.P., seconded the resolution, and said he was glad of an opportunity of expressing his sympathy with this great and noble cause.

He thought that all whose vested interests were not affected by the Registration of Nurses must realise that the proposal was one of simple justice to the community. It was an accepted principle that the State had a right to step in and interfere in matters which concerned the health of the community. Opposition from interested quarters was not to be feared; apathy and lukewarmness were much more serious enemies.

A difficulty in the organisation of a profession composed mainly of women was that they had not the power to make their influence felt in the political world; nevertheless, it was certain that a sound systematic standard of nursing education must be enforced, and that those who attained it must be adequately protected. Already State Registration had been adopted in some of the British Colonies and of the United States of America. Opposition from the medical side was not to be expected, as the rapid development of medical science made the value of the trained nurse increasingly felt, and the medical profession depended more and more on nurses to carry out practical details which were essential to the welfare of the patient. Opposition was expressed in some parts of the country because it was feared that the adoption of Registration would disqualify the good folk who now render service to the sick. This was not the case. What it would do was to give a professional status to fully-qualified nurses.

In regard to the Parliamentary position, a private member's Bill which did not get a high place in the ballot early in the Session had very little chance of discussion unless the Government gave it facilities. One means of bringing the question before the House was by a resolution. A resolution of the House had not legislative effect, but it paved the way for legislation, and the advantage of bringing a question forward in this way was that it was thoroughly threshed out on the floor of the House. This would go a long way towards arousing the conscience of the country to the seriousness of the issues involved in the case of State Registration.

Mr. Rigg advised those present to take heart of grace; they were working for a reform with which the general interests and welfare of the community were bound up, work which he considered it both a duty and a pleasure to help forward.

Miss Stewart then put the resolution to the meeting, when it was carried unanimously with enthusiasm.

After a vote of thanks to the Chairman had been proposed by Miss Mollett, seconded by Mrs. Bedford Fenwick, and one by Miss Stewart to the speakers, both of which were heartily carried, those present responded to Miss Barton's hospitable invitation to adjourn to the nurses' recreation room for tea and coffee, and one of the most successful meetings ever convened in the Registration interest was brought to a conclusion.

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