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Editorial.

THE NEW RULES OF THE CENTRAL MIDWIVES' BOARD.

The new Rules of the Central Midwives' Board, now issued with the approval of the Privy Council, affect both nurses and midwives, inasmuch as many nurses not practising midwifery have passed the examination of the Central Midwives' Board, and, as certified midwives on the Roll, come under its jurisdiction. It is therefore very important that they should obtain the new Rules and acquaint themselves with the alterations in their provisions which are officially described as "numerous and important."

The Rules govern not only the practice of midwives but the proceedings of the Board, the issue of certificates, and the condition of admission to the Roll of Midwives, the course of training and conduct of examinations, and the remuneration of the examiners, etc.

A period of three months is still accepted as sufficient for training purposes. We deal elsewhere with some of the details in the new Rules. In connection with points of general interest we are glad to notice that for the first time the candidates for the examination of the Board are expected to have "some knowledge of the local manifestations of venereal disease in its effects on the newly born." Unfortunately, venereal disease is often present, more especially in the class of cases which often in hospital and infirmaries, and also in other work, come under the care of midwives and nurses. The effects are known to be disastrous and far reaching, and yet, so far, little or no instruction on this subject has been included in those taught in most of the lying-in-

hospitals, and pupils pass over symptoms unnoticed, because they do not know how to observe them, which it is of the utmost importance should be reported, treated, and guarded against in the interest of the mother, the infant, and those attending upon them. The new requirement of the Central Midwives' Board in this respect will stimulate teaching, and therefore knowledge, and we welcome its inclusion in the syllabus of the Board.

In connection with the procedure for the removal of a name from the Roll, it will be remembered that some Local Supervising Authorities, which, in the first instance, investigate locally the cases brought before the Board, and therefore are in possession of the facts regarding them, were very anxious to conduct the prosecution of their own cases before the Board. The new Rules are quite definite on this point. "In order to prevent any misapprehension on the subject, it is desirable to point out that under the procedure laid down in Rule D, the prosecutor is 'the Secretary, or other person appointed by the Board for the purpose' (Rule 6), and not the Local Supervising Authority which has reported the midwife to the Board. The Medical Officer of Health or Inspector of Midwives in giving evidence, appears therefore as a witness called by the Secretary as Prosecutor, and not as a Prosecutor laying an information before the Board."

We are bound to say that we take the strongest exception to this procedure. We believe that the Board is honestly desirous of doing justice to the midwives who come before it. But it sits in a judicial capacity, and a judicial attitude should be maintained by its officials. The Board is judge, it is also jury, and to employ a paid official to act as prosecutor, *i.e.* as the person

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