

strations and clinics are not simply to give information, but to demonstrate good methods of conducting the same.

We are specially privileged to have lectures from the leading teachers of midwifery to pupil midwives; they cannot fail to inspire us to remodel our practical teaching in some cases, to realize how great a factor is the personality of the teacher, and to aspire to educate individually, more truly and thoroughly, each pupil that comes to us to be initiated into an art and science of which we ourselves feel that there is much yet to be perfected, to be discovered, to learn.

The question as to whether some test of the midwife's ability to teach practical midwifery is desirable is an open one. Personally, I think an oral and practical examination, which should include a demonstration, a clinic, and the taking of a coaching class, would be excellent. We are all apt to grow stale—to get "sick of perpetual pupil" (to modify Lamb's phrase), and we can only improve the education of our pupils by improving our own education. We ought to do that practically at every case we conduct, if we put our minds into it. New acquisition of knowledge will, in many cases, make us better midwives, and better teachers, and if there is anything to be said for a higher theoretical examination, demanding a wider knowledge of maternity and child-welfare than is required to become qualified as a midwife, it is that it will stimulate our lazy brains and keep us from numbness and rust, "the arch foe of women."

BILL TO AMEND THE MIDWIVES ACT, 1902.

On Thursday, August 8th, in the House of Commons (the day on which the House adjourned), the Bill to amend the Midwives Act, 1902, was presented by Mr. Hayes Fisher, President of the Local Government Board, on behalf of the Government, and read a first time.

Mr. Bonar Law, replying to Mr. Herbert Samuel, stated that when the House reassembled on Tuesday, October 15th, the Bill would be taken.

THE MATERNITY AND CHILD WELFARE BILL.

The Maternity and Child Welfare Bill, "An Act to make further provision for the Health of Mothers and Young Children," has now passed both Houses of Parliament. It provides that "any local authority within the meaning of the Notification of Births Act, 1907, may make such arrangements as may be sanctioned by the Local Government Board for attending to the health of expectant mothers and nursing mothers, and of children who have not attained the age of five years, and are not being educated in schools recognised by the Board of Education."

The Bill has received the Royal Assent.

CENTRAL MIDWIVES BOARD FOR SCOTLAND.

REPORT ON THE WORK OF THE BOARD.

The Report on the work of the Central Midwives Board for Scotland for the year ended March 31st, 1918, and presented to both Houses of Parliament by command of His Majesty, is now published, and may be purchased through any booksellers or directly from H.M. Stationery Office, Imperial House, Kingsway, London, W.C. 2, price 1d. net. The following items are of interest—

MIDWIVES' ROLL.

The total number of enrolments is made up of 1,351 by certificate, 1,695 in *bona fide* practice, and 264 after passing the Examination of the Board.

The returns made by the Local Supervising Authorities, under Section 16 (6) of the Act show that to date 1,408 midwives notified their intention of practising, and the names of these women have been prefixed by a star in the Roll.

FINANCIAL STATEMENT.

The work of the Board has been carried out in an efficient and economical manner. A credit balance has been carried forward to next year without requiring any levy on the Supervising Authorities.

VOLUNTARY RESIGNATIONS.

Certain enrolled midwives have resigned voluntarily on the ground of old age, ill-health, or inability to comply with the rules, and have applied to have their names removed from the Midwives' Roll.

The Board have instructed that their names should be retained in the Roll with a special mark in order that they may still be under the supervision of the Local Authority, with a view to discontinuance of any practice whatever under "cover" of a medical practitioner, so that the recommendation of the General Medical Council in this respect may be given full effect.

MATERNITY AND CHILD WELFARE SCHEMES.

The Board has been consulted in regard to the position of Health Visitors, who are not inspectors of midwives, attending and advising in the management of the mother or infant in a confinement case, where there is a certified midwife in attendance, and recommendations have been made to the Supervising Authorities whereby full co-operation of the existing organisations is secured for the benefit of the mother and the child.

THE MIDWIVES' (IRELAND) ACT.

At the recent election held pursuant to the provisions of the Midwives (Ireland) Act, 1918, the following four registered medical practitioners were elected to act on the Central Midwives Board for Ireland:—Sir Andrew J. Horne, Sir William J. Smyly, Sir John William Byers, and Professor Henry Corby.

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