Living together in small district communities each nurse would contribute say 30s. a week to board and lodging, and have remainder of the ± 3 3s. for personal expenses, travelling, dress, washing, etc.

The margin of earnings beyond $\pounds 3$ 3s. could be reserved for insurance, sick fund, etc., and after these claims satisfied, any excess might be divided as a bonus at end of the year in some proportional

manner agreed upon. On the patients' side the economy would be :----1.-The saving from charges of whole time

nurse, which at current rate is not less than $\pounds 3$ 3s. 2.-The saving of extra charges for washing,

travelling expenses, now usually demanded. 3.—The board of the nurse, sleeping accommodation-often difficult to provide-and accommodation during unemployed times.

For the cases in classes 2 and 3 the scale of fees would necessarily be lower, and the D.N.A.'s might consider some such scale as the following ; 28. 6d. or 3s. for a single visit; 12s. 6d. weekly for a daily visit; 2 daily visits 15s. to \pounds 1; attendance on operation, 5s. to 10s.

GENERAL NURSING COUNCIL FOR SCOTLAND.

The fortnightly Meeting of the Council was held on Wednesday, 3rd inst., twelve members being present.

The Draft Rules for existing nurses were again considered. Miss Gill, R.R.C., Lady Superintendent of Nurses, Royal Infirmary, Edinburgh, raised the question of the position taken up by the Scottish Board of Health who proposed, under the powers conferred on them by the Scottish Act, to hold the Certificate issued by them for proficiency in Fever nursing as a qualification for admission of existing nurses to the General Register. After discussion, it was arranged that the Scottish Board of Health should be asked to receive a deputation of the Nursing Members of the Council, who hold strong views against the Board's decision.

Miss Milnes, Director of the School of Social udy and Training, Edinburgh University, Study and moved that the Register should contain a separate part for Mental Defective Nurses. It was arranged that the Registrar should communicate with the Board of Control for their views before the Council finally decided on this question.

The Chairman, Captain Charles B. Balfour, C.B., raised the question of a separate Register for Cottage Nurses, and the Registrar was instructed to communicate with the English Council and the Scottish Board of Health for their views.

It was remitted to the Rules Committee to frame Rules under Section 3 (1) (d) of the Act in regard to removal and restoration to the Register.

The following Education and Examination Committee was appointed :-

Dr. H. E. Fraser, Medical Superintendent. Royal Infirmary, Dundee, Convener.

Dr. A. K. Chalmers, Medical Officer of Health, Glasgow.

Colonel D. J. Mackintosh, C.B., M.V.O., Superintendent, Western Infirmary, Glasgow. Miss Kathleen L. Burleigh, Matron, Royal

Hospital for Sick Children, Edinburgh. Miss Annie Gill, R.R.C., Lady Superintendent of Nurses, Royal Infirmary, Edinburgh.

Miss Elizabeth T. Jones, School Nurse, Edin-burgh Education Authority.

With the Chairman, Captain Charles B. Balfour, C.B., ex-officio.

We entirely sympathise with the Nursing Members of the Scottish Council. The laity have insisted on a Supplementary Register of Fever Nurses being set up; it is, therefore, entirely unreasonable to place such specialists on the General Nurses' Register.

The question of a Register for Cottage Nurses should be strenuously opposed. It means per-petuating the present iniquitous system of semitrained cheap nurses for the poor, lowering nursing standards, and the registered nurses' We hope the nursing profession throughstatus. out the United Kingdom will strongly oppose it. This Journal is ready for the fray.

THE PROFESSIONAL UNION OF TRAINED NURSES.

At a meeting of the Public Health Section of the Professional Union of Trained Nurses, held the 10th day of September, 1920, at 17, Evelyn House, 62, Oxford Street, W.I., the following resolution was carried unanimously :—

"That all three-year trained and certificated Nurses employed in Public Health Work, appointed either as Health Visitors, School Nurses, Infant Welfare and Crêche Workers, Tuberculosis Visitors, or any other branch of work usually allotted to Health Visitors, should receive a salary of not less than :-

Commencing salary, rising by £25 per annum to maximum of ;---

Minimum	Bo	nus	as	per		
Basic	Civil Service				Total.	
Salary.	Scale.					
£260	£210	17	6		£470 I7 6	
£325	240	2	б	••	565 2 6	

Chief Health Visitors and Superintendents. Minimum :--

 $\pounds 350 \dots \pounds 251 7 6$ £601 7 6 . .

Note .- These salaries are based on present economic conditions.

We should like to bring to your notice the fact that the Professional Union of Trained Nurses is the only Nurses' Association in England, Scotland and Wales, registered under the Trades Union Act.

Copies sent to all Local Authorities throughout England.



