

a different basis. Some thirty years ago, comparatively few gentlewomen went into General Hospitals, because they knew they would not be properly treated. But as soon as training schools were established, and trained women appointed, more gentlewomen were attracted to the work. It only required our Infirmaries to be properly organised to attract in the same way a superior class of workers. Dr. Fenwick then referred to the admirable manner in which the Infirmary at Halifax was organised under Dr. Dolan—the model being that of a General Hospital—much to the advantage of the ratepayers' pockets, and of the sick who were treated therein. The Matron was given full authority over the Nurses, responsible only to the governing body of the Hospital; Dr. Dolan, who is a non-resident Superintendent, being in general charge of the whole medical department.

Dr. PRINGLE drew attention to the fact that there is a difference between a resident and non-resident medical officer. When he is absent someone should be given the supreme control.

Miss LIDGETT said that, in her opinion, common-sense, good feeling, tact, compromise, give and take—all these qualities had had much to do with the harmonious working of the Poor Law Infirmaries. But, naturally, matters worked well where personal smallnesses are burnt up. Of course, there are Matrons, self-assertive and dogmatic; but there may be also Medical Superintendents, tyrannical and over-bearing. What happened then? Some rules should be framed which would prevent the friction which is likely to occur in such cases. That is the object of law. Law is not meant for people of absolute wisdom and absolute high principle. Law is meant for average people and people below the average.

Miss MOLLETT then proceeded to reply to a few of the points that had been raised by the various speakers. In the first place, she wished to dispel any idea that there had ever been friction between her and the Medical Superintendent she had worked under. She thought she was not a cantankerous person, and worked fairly amicably with most people. Dr. Toogood had raised a question as to the ordering of a Nurse to attend upon the patients. Of course, that would be part of the medical treatment, and in such a case the Medical Superintendent would be supreme. . . . It was suggested that there is a difference between most General Hospitals and Infirmaries in regard to the Medical Officers being resident or non-resident. As a matter of fact, in most Hospitals there is always a resident House Surgeon who is given absolute control of the surgical and medical work of the Institution, and yet he was not allowed to interfere with the authority of the Matron over her department. In her paper she had endeavoured to prove that it is possible for the Matron to be made responsible directly to the Board for the conduct of the female staff. The law should make it unnecessary for the Matron to have recourse to an untold amount of Tact. She would repeat that she believed Workhouse Infirmaries were better managed where the Matron and the Medical Superintendent each have their position defined.

Miss Mollett's Resolution, which was seconded by Miss Wilson, was then put to the Meeting and carried *nem. con.*

A hearty vote of thanks to Miss Mollett for her valuable and interesting paper, and to Mrs. Bedford Fenwick for presiding, concluded the Meeting.

Medical Matters.

THE REGISTRATION OF MIDWIVES.



The controversy on this matter has entered upon a new stage. A Meeting was recently held which was attended by a few well-known obstetric physicians, and the question of appealing to Parliament for an Act was thoroughly discussed. Sir Frederick Fitz-Wygram, who has, from the first taken a most active part in supporting legislation, frankly informed the Meeting that he did not believe that there was any probability of Parliament passing an Act which would render Registration compulsory. It is, moreover, most significant that the other gentlemen who have taken the most active part in proposing and supporting the idea of legislation were conspicuous by their absence from the Meeting in question. Meanwhile, fresh supporters have entered the field, and Dr. Herman stated that, in his opinion, the important Resolution recently passed by the General Medical Council, on the subject of the Obstetrical Society's Diploma for Midwives, might be regarded as a general threat only, and one which he did not think the Council would dare to enforce. We venture to think that Dr. Herman is unaware of the great force of medical opinion which lies behind the Council on this matter. It was finally agreed by the Meeting that an Act of Parliament should be sought for. So the issue is now clear. The Midwives' Institute is about to seek for an Act of Parliament. Upon its side it has some old supporters who are evidently wavering, and some new supporters who are evidently unaware of what they are undertaking. Against them, they have the great majority of the medical profession in this country, and we have not the slightest doubt as to the final issue of the conflict. In another column will be found a letter from a gentleman who has, from the first, taken a most active part in the promotion of legislation for midwives, which we commend to the attention of our readers.

Reflections

FROM A BOARD ROOM MIRROR.



PRINCESS CHRISTIAN of Schleswig-Holstein will open a fancy *fête* at the Albert Institute, Windsor, on February 13th, in aid of the charities of Holy Trinity Parish, Windsor.

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HER Royal Highness Princess BEATRICE, attended by Miss MINNIE COCHRANE, was present last week at the annual meeting of the Ryde

District Association for Nursing the Sick Poor in

[previous page](#)

[next page](#)