

words, he has made it possible to *nominate every person who sits upon the Board himself*. Is it likely, therefore, that the Nurses can have any confidence in such a constitution? I say emphatically "No," and I say more—that Mr. Fardon's tactics have been reprehensible in the highest degree, and that I for one mean to speak out at the Public Meeting concerning these facts. What we Nurses ought to demand is a Constitutional Government, in which each member will have liberty to speak and act according to her conscience, and to see to it that our Founders and leading Matrons sit on the Council and Executive irrespective of the nomination of the Hon. Officers. If we have not the courage to demand this measure of justice, and to enforce it, the sooner the Hon. Officers are given rope enough, and our Register is swamped by untrained persons, the better, because we can then bring our wrongs before Parliament, and prove that our interests are also the public interests.

Yours truly,

A MEMBER OF THE GENERAL COUNCIL.

THE REGISTRATION OF ASYLUM ATTENDANTS AS NURSES.

To the Editor of "The Nursing Record."

MADAM,—I am very glad to see that Miss Wingfield is taking up the subject of the Registration of Mental Nurses by the Royal British Nurses' Association, and that the members will have an opportunity of expressing their opinion on the matter.

I would be the last to depreciate the work done by Asylum Attendants. Ministering to "the mind diseased" calls not only for special training, but for an unusual amount of tact, patience, and self-sacrifice on the part of those who undertake it; but these qualifications and this training cannot prepare them for the Nursing of operation cases, or of such cases as typhoid fever and pneumonia. Yet if they are placed on the Register with Trained Nurses, the general public will accept them as such, and discredit will be brought on the whole body when they are found ignorant of the duties of a Trained Nurse. In this way the position of the present members will suffer, and in the future the *imprimatur* of the Association will be worthless, because it will give no assurance that the Nurse has received proper training. Mental Attendants have no more right to be registered as General Nurses than have Midwives, and they are just in the same position with regard to their qualifications—they are only trained to undertake one branch of the work.

How would the Medical Council deal with persons who, being thoroughly qualified dispensing chemists, wanted to insist that this gave them a right to practise as medical men? Would the medical man sit by with folded hands while he saw the highly qualified dispensing chemist entering into competition with him, and taking charge of his patients? Let anyone who reads the *Lancet* or *British Medical Journal* answer this question. Or why do Medical Practitioners object to Midwives being registered; is it not because they fear that Registration would have a tendency to encourage the Midwife to take upon herself work which should only be in the hands of the skilled practitioner?

If such fears affect the medical profession, is it strange that qualified Nurses should look with more than doubtful eyes on such a measure as the proposed Registration of Mental Nurses by our Board?

Besides, as has been pointed out, the qualified Nurse naturally expects to be paid in proportion to her qualifications, whereas the unqualified Nurse must be content to take less; and the result will be that the public, who have no means of distinguishing beforehand between the two Nurses, will take the cheapest (buying their experience too late), and the highly-qualified Nurse will be starved out of the field. (This has, I believe, been the experience of some of the medical profession when in competition with unqualified men.)

When this state of things is arrived at, the Royal British Nurses' Association will have brought about a result the very opposite of that for which the Charter was granted. Whether this be the aim of our present Executive Committee I am not careful to enquire, but as this is the point to which I believe we are drifting, I shall do my best to warn trained Nurses to consider well whether the risk they incur in becoming members of the Association does not outweigh the prestige which was formerly attached to the letters M.R.B.N.A.

I am, Madam,

Yours faithfully

H. C. POOLE.

Member of Council R.B.N.A.,
Matron, East Lancashire Infirmary, Blackburn.

A NURSING DEFENCE UNION.

To the Editor of "The Nursing Record."

DEAR MADAM,—I remark in an "Echo" in your issue of the 12th inst., that in alluding to a case where a poor Nurse was falsely accused of theft by a patient who occasionally "was not quite master of herself" you opine that a Nurses' Defence Union will have to be established—Why not? Medical men have found it absolutely necessary, and have more than one society for the purpose of protecting themselves from unjust accusations.

It is not so long ago that one innocent member of the Royal British Nurses' Association was described as a thief by name by Mr. H. C. Burdett in his paper because her name appeared on the Register, and happened to be the same as that of a guilty person. No apology was ever offered to this lady by Mr. Burdett, although he was informed of the gross injury he had inflicted on an innocent woman, who owned herself too poor to protect herself. Had we had a Defence Union in those days, we could have helped to protect our innocent colleague.

Again, the attempted persecution of another of our members by "Thorne and others" in the beginning of this year, and just lately the legal proceedings in the "righteous cause" of liberty and free speech—for which our much-respected member, Miss Breay, has been made to suffer—all point to the necessity for taking steps to protect those of our colleagues unjustly accused, and also to help those who have the courage,—single-handed—to fight common wrongs.

Yours truly,

E. M. F.

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