

High Places—a “catpaw” policy which is as unjustifiable, as we believe it to be untrue.

The fact is that Trained Nursing has passed through its term of probation, and has evolved from an inchoate domestic vocation into a highly skilled scientific profession. But what this transition has cost the pioneers in labour and *life* during the past quarter of a century, to keep alongside modern scientific medicine, had better not be estimated. Anyway, the Profession of Nursing is here, and what we trained nurses need both in justice to patients, rich and poor, and to ourselves is State Registration; to protect the thoroughly trained nurse and the sick from a whole floorful of frauds, who under existing conditions are “farmed out” or “patronised” by unscrupulous persons without let or hindrance. We trained nurses wish for an Act of Parliament to effect the compulsory Registration of Trained Nurses, that is of women who have completed not less than a three years’ training in the wards of a general hospital, who have been awarded a certificate of efficiency, preferably by a Central Examining Body. We want this Act to correspond to the Medical Act which forty years ago called into existence the General Medical Council, empowered to register the professional qualifications and exercise certain powers of control over the educational curriculum and the conduct of medical men.

A General Nursing Council should exercise the same powers in relation to Trained Nurses, and thus protect them, and those they are called upon to attend, from the ghoulish competition of ignorant and unscrupulous persons. No less comprehensive system can hope to overcome the difficulties in a satisfactory manner. The adoption of a high standard of training by individual training schools, or of vigilant censorship by Private Nurses’ Co-operations, has proved absolutely useless as an antidote to fraudulent dealing in bogus nurses.

We must have a Central Governing Body in which the preponderating power must be in the hands of trained nurses themselves—we are ready for such power. And the public has only to be aroused as to the risks it runs from the present chaotic condition of nursing affairs to speedily realise that its interests and those of the well trained, reputable, registered nurse are identical.

So, in season and out of season, we instruct the public. And anti-registrationists are fully alive to the necessity of keeping it in ignorance.

Annotations.

THE TREATMENT OF LUNATICS.

We rejoice to see that the Commissioners in Lunacy are noticing and warning Boards of Guardians against the illegal use of belts, anklets and wristlets in restraining violent lunatics and pointing out that persons using them are liable to prosecution. We could have hoped that this warning was unnecessary. It is also encouraging to learn that the London County Council proposes to introduce legislation for the provision of receiving houses for lunatics. It is to be hoped that in the near future the most improper system still in use in many Poor Law Institutions—of placing lunatics in the common wards with other inmates—may be discontinued. At last the question is under the consideration of the Lord Chancellor.

GUARDIANS AND NURSES.

The report which we print in another column of the inquiry into the friction between the East Preston Board of Guardians and Miss Rogers the Superintendent Nurse—once again demonstrates the imbecility of divided authority, and the impossibility of working the sick wards of a workhouse satisfactorily unless the Superintendent Nurse has rightful authority—in her own domain. The question of providing a separate supply of bed and other linen for the use of the lying-in ward—so, all important for the safety of parturient women—is just a detail which of course would never suggest itself to untrained Matrons and Guardians. Either the Matrons of our Workhouses having sick wards attached must be appointed from the ranks of trained nurses, or the Superintendent Nurse must have power to deal direct with the Guardians in all matters relating to her own department. A house divided against itself is sure to fall.

OUR HOSPITALS NEED COUNTRY BRANCHES.

The benefit of pure air both in health and disease is realised more emphatically day by day and in time we hope to see attached to all city hospitals a country branch—not merely for the use of convalescent patients, but for the reception and treatment of acute cases, which have little or no hope of recovery in the exhausted atmosphere of densely populated cities. We notice with pleasure that at the 18th Annual Meeting of the subscribers to the

[previous page](#)

[next page](#)