

voluntary one. It was not proposed, as is done in the case of midwives under the Midwives' Act, to prevent unregistered persons from practising. The Nurses' Bill would protect persons who had attained a certain standard; it would not touch others.

Asked if she considered that communications made to the Board in regard to nurses should be privileged, Miss Hughes preferred not to give a definite opinion, as she did not clearly understand the question of privilege. She considered, as under the Midwives' Board, that any nurse feeling herself aggrieved should have the right of appeal. She thought the practical likelihood of legal actions by aggrieved nurses would be small, as no one would be removed from the Register unless the case against her was so clear that it would not be worth her while to contest such removal. When the General Medical Council, or Solicitors, removed one of their number, actions at law did not follow.

There would, in her opinion, be no difficulty in supplying the demand for nurses if Registration were enforced; the supply would rather be increased, as more women would be attracted to enter the profession, and more opportunities for efficient education would be afforded if Registration were established. She was certain of it. In connection with the value of the certificate of a central independent body, Miss Hughes showed that the certificate given by the London Obstetrical Society overshadowed those of the individual hospitals. Midwives willingly paid £1 1s. to obtain it. The fee was no deterrent, and, if midwives—who are of a much poorer class, as a rule, than nurses—would pay a guinea, nurses, she was convinced, would pay £2 2s. or £3 3s.

She believed that, if Registration were established, associations which have now considerable difficulty in selecting nurses would welcome the change. It was impossible now to differentiate between the value of certificates. A hospital of ten beds could not afford the same experience as one of fifty. Again, certificates of the same institution varied in value at different times. The efficiency of the training, especially in the smaller schools, depended largely upon the Matron, and a school which at one time was efficient might go down because the talent of the present holder of the position of Matron was not so marked as that of her predecessor.

Uniformity could never be obtained but by a Central Board, which would find out the weak points of the schools and raise the standard of education.

Miss Hughes was of opinion that training in the schools of well-organised infirmaries should be recognised. They afforded excellent experience in the care of chronic and convalescent cases, which the hospitals did not. Her experience in connection with the Nurses' Co-operation went to prove that the public required private nurses largely for cases of this nature.

Women drawn from the ranks of upper-class domestic servants made good private nurses. They seemed to adapt themselves to the requirements of the households they entered better than those of superior station. The expense of requiring them to have a three years' training would not prevent their adopting nursing as a profession. Many of those she had in her mind had received their training in good hospitals.

As inspector of county nurses, Miss Hughes said she

heard many opinions as to the desire for Registration of Nurses on the part of the public. Such a desire had been expressed to her in nearly every one of the nine counties she visited.

She had known about 1,200 nurses. Out of that number she roughly estimated she had known twenty incompetent and about four fraudulent ones.

She thought nurses, after their hospital training, should present themselves for examination by a Central Board. She thought large associations of nurses, as the Queen's Jubilee, which had a nurse representative on the Midwives' Board, should have one on the Nursing Board.

Asked if it were not a fact that the ladies dominated the Midwives' Board, and that ladies had been appointed as examiners when they had never had any anatomical training, Miss Hughes said she did not know it. She was not conversant with the proceedings of the Midwives' Board, as she was not a member. Did she know that those who desired to get the Nursing Board established would dominate it when it was formed? Miss Hughes was not aware of it, but was very pleased to hear it.

In reply to questions as to the County Nursing Associations, she said that women who worked under them were trained in midwifery; they were also taught a certain amount of nursing in the homes of the poor by skilled nurses.

She was strongly in favour of a Central Board and registration after examination. She believed nurses would willingly pay the necessary fee to be saved from the present competition with the untrained.

A Member said that Miss Hughes's experience as to "bad" nurses bore out his own. He had had a considerable experience of nurses and had known about 1,200. He did not know of ten bad cases—about that.

In regard to the earnings of private nurses, they earned usually £2 2s. a week (with board, lodging, and washing in addition when at work). If they were paid a salary by an institution, the average was £35 a year. Thus the institution which employed a nurse had the balance of £65 and maintained her when not at work. If nurses worked in connection with Co-operations, they had the whole of their earnings with the exception of a small percentage—usually $\frac{1}{4}$ and sometimes 5 per cent.—which they paid for the maintenance of their office.

Dr. Hutchinson said the nurse was the worst-paid person, for what she did, of any member of the community. Would it not be well to register institutions rather than individual nurses?

Miss HUGHES was strongly against this. Nurses were working women and had a right to take their personal responsibilities on their own shoulders. There were as sensible a body of women as were to be found in the United Kingdom, and it would be very unfair if their whole value were bound up with that of an institution.

If an attempt were made to shift responsibility from the nurse to the institution it would only put the question further back.

Miss Hughes considered the State certificate should be a certificate of technical efficiency. The Matrons and the schools which had them under close inspection for three years should certify to the moral character of candidates presenting themselves for examination. If they were not inclined to give such a certificate to a Central Board, then they should not send them out to the public as competent nurses.

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