

Progress of State Registration.

A very successful meeting was held at the Royal Devon and Exeter Hospital on Wednesday, April 19th, when Miss Amy Hughes spoke on the State Registration of Nurses.

Mr. S. P. Pope presided, and there was a large attendance, among those present being Lady Acland, Mrs. Robertson, Canon Hobson, Rev. F. F. Buckingham, Mrs. Buckingham, Mrs. N. V. Solly, Mr. J. H. Ley, Mrs. Ley, Dr. E. J. Domville, Mr. H. B. Varwell, Dr. Gordon, Miss Smale (Matron), Miss Kinninmont (Matron of the West of England Eye Infirmary), and many other members of the medical and nursing professions.

Miss Hughes commenced her address by remarking that few realised the responsibilities of nurses. She also thought that the true significance of the English word "nurse" had been overlooked, as it was used equally for nursemaids, and any untrained woman who attended the sick, as well as the highly skilled nurse.

It was now necessary to define the duties and responsibilities of trained nurses, for often the issues of life and death rested with them. Speaking particularly of private nurses, she said that they had certificates and were engaged upon these certificates, but she was sorry to admit that they were no guarantee of knowledge.

She had taken a number of hospitals, the number of beds varying from ninety to ten, all of which trained nurses for one, two, or three years, and the certificates given by them varied only in an infinitesimal degree to that of St. Bartholomew's, London.

Many general hospitals cannot undertake the whole of a nurse's training, therefore some get no typhoid, which is often one of the first diseases a private nurse is sent to.

If the term "trained nurse" is to express what it ought, something must be done; but at present there is no power which can enforce a minimum standard, and it was only just to nurses, medical men, and the public that there should be some guarantee.

Medical men were morally responsible for the nurses they sent to their cases, and the usual method was to telephone to their own hospital, where they knew the standard, if they did not actually know the nurse, and by a few questions they could easily find out if the nurse were capable of taking the case. But suppose the doctor was away in the wilds of Yorkshire and sent for a nurse from a large co-operation, how was he to judge then?

How is a doctor qualified, say in Belfast, to judge the value of the certificate of the West of England hospitals?

To many a certificate is a certificate, and there are many mistakes caused by this lack of standard.

A committee she knew complained of their district nurse as stupid, especially in surgical work, although they said she was certificated and fully trained. Inquiry disclosed the fact of a certificate from a fever hospital for two years' training, where, of course, she could not possibly receive surgical training. Miss Hughes quoted a London hospital where nurses were trained for three years, but received no training in women's diseases.

In such hospitals nurses find that after giving of their time and strength they are debarred from the army, naval, and colonial services. Therefore certi-

icates can represent so very little to either medical men or the public. On leaving hospital these certificates become the absolute personal property of the nurses, and no one has the power to deprive a nurse of her certificate, no matter what crime she commits.

Miss Hughes mentioned the recent case in Exeter, and said on the termination of the sentence that woman could recommence her career of nursing and stealing.

If nursing was to be the honoured profession it ought to be, there should be some means of protection. This could only be done by having a Central Council with the necessary powers granted by legislation.

There was also a tendency to use the services of nurses for the benefit of the hospitals, and sometimes Matrons would keep a nurse, knowing she was not entirely suitable. If there was a Central Authority there would be more care exercised in selecting nurses, and it would be to the ultimate interest of medical men, nurses, and the public.

The examination should be open to all who wished to work as trained nurses, and should not be so stiff as to necessitate cramming, nor so easy that anyone might get through. This would not tie them down to a dead level, for afterwards they might specialise.

Nor would it prevent other women nursing, but it would prevent them professing to be what they were not.

The principle had been granted to the Midwives; why not to nurses?

The Midwives' Bill had created a monopoly, but such powers were not sought by nurses.

Nursing was much more than giving medicine; it was being eyes, ears, and hands for the doctor during his absence, and this meant constant, intelligent watching.

Much had been said of the three years' standard, but this was fixed by a Select Committee of the House of Lords after careful investigation.

An effort must be made to level up and to give an all-round training. She also thought that to keep sufficient control over nurses there should be some system of reporting themselves.

Dr. Gordon said that the issue was quite clear. As medicine and surgery advanced, nursing had also advanced; it was, therefore, necessary to have nurses trained so that they could efficiently perform their duties, and there was no other way of ensuring this but by State Registration. What was proposed now for nurses was what was done fifty years ago for the medical profession, and it was proposed to do for nursing what had proved of such advantage to the medical profession, and he had much pleasure in proposing "That this meeting supports the principle of the registration of trained nurses by the State."

Mr. Harris, in seconding the resolution, said that State Registration would keep not only the nurses up to the mark, but their teachers also, and it would unify the education of nurses throughout the United Kingdom.

Mr. Bell said it was taking a leap in the dark, and he would oppose it, for if nurses must see all cases, the hospital would be out of the whole matter, and he thought it would level down and not up.

Miss Mary Burr, in supporting the resolution, said that it was possible to affiliate the general hospitals to the special ones, and so give an all-round training, and what was wanted was to raise the standard of those hospitals whose ideal was not so high as theirs.

Dr. Domville also spoke of the great benefit of a

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