

is entered on the Mental Nurses' Register, may also be entered on the General Register, if the conditions are fulfilled, provided that at the time of registration every such nurse shall declare under which qualification it is desired to exercise any right to vote for the election of a direct representative.

It was proposed on behalf of the Fever Nurses' Association, and agreed that:—

"Any nurse who is admitted to the General Register, who holds a certificate of the Fever Nurses' Association, or its equivalent, granted under conditions approved by the Council, shall be entitled, on payment of a single registration fee of two shillings and sixpence, to have the words 'also trained in fever nursing,' added to her record in the Register."

RECOGNISED ACCOUNTANTS.

The London Association of Accountants was added to those recognised under the Act for the purpose of auditing the accounts of the General Council, in Clause 16.

NO AUTHORITY TO PRACTISE MEDICINE.

At the desire of the Delegates of the British Medical Association it was unanimously agreed to re-insert the following clause as Clause 23:

"Nothing contained in this Act shall be considered as conferring any authority to practice medicine, or to undertake the treatment or cure of disease."

SUMMARY.

THE GENERAL COUNCIL FOR THE REGISTRATION OF NURSES IN THE UNITED KINGDOM.

The increase in the size of the General Council was considered imperatively necessary, not only in order to provide for the adequate representation of the various interests involved, but also for the transaction of the large amount of business with which it will have to deal. When we contrast the permanent Council of twenty-one persons with the number of members of the General Medical Council, which controls a profession numerically much smaller than that of nursing, or with the Council of the British Medical Association, it will be seen that to meet the requirements of the Privy Council it has been restricted to the narrowest possible limits.

The principal alterations in this Clause are the provisions that a certain proportion of the direct representatives of the women nurses on the general register must be past or present Matrons of general training schools for nurses, that one of the direct representatives shall hold a qualification in fever nursing, that Scotland and Ireland shall each have two direct representatives instead of one, and that the male nurses, who are to have their own Supplementary Register, shall elect their own direct representative.

All these alterations are in the direction of strengthening the Council, and of giving effect to important principles.

In connection with the representation of medical interests the different branches of medicine have been allotted expert representation, *i.e.*, general medicine and surgery, psychology, infectious diseases, and public health, and following this precedent, the nurse representatives will now include the Matrons who are mainly responsible for the training and discipline of nurses, mental and fever experts, and male and female nurses.

On the first Council there is to be the same medical representation as when it is fully constituted, but until an electorate has been formed of registered nurses all those societies which have approved the principle, and been working to obtain registration, will be represented. As neither the Queen's nurses, nor Naval and Military nurses, have formed professional organisations, it has been provided that the Queen Victoria's Jubilee Institute, and the Admiralty and War Office conjointly may each appoint a nurse.

The notification of training in fever nursing against a nurse's name in the Register, when applicable, is also just. The registration of fever specialists as such would be a mistake from all points of view, but when a nurse has added fever training to her general experience she is highly qualified, and it is right that this should be recorded.

THE DIVISIONAL COMMITTEES.

The most important new clause provides for the appointment by the Council of Divisional Committees for England, Scotland, and Ireland, with duties as defined in the Clauses printed on page 142. Decentralisation of labour makes for efficiency, and we have always been in favour of national executives, provided that the final authority is vested in the General Council. This is obviously necessary if uniformity of standards, and a liberal policy are to be maintained. There should be nothing parochial about a professional registration system.

THE REGISTER OF MALE NURSES.

It is a matter of justice to women nurses, and of public convenience, that there should be a Supplementary Register of Male Nurses. Male nurses must always have a somewhat restricted sphere of professional work, as they must be more or less sex specialists. Obstetric and gynaecological work, and the nursing of women and young children, will not be included in their duties, they must therefore have a special curriculum of education and examination, and in consequence their own special register.

[previous page](#)

[next page](#)