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## Editorial.

### REGISTRATION IN A NUTSHELL.

Although the State Registration of Trained Nurses has formed the subject of inquiry during two sessions by a Select Committee of the House of Commons, which unanimously reported in its favour, and a Nurses' Registration Bill has, after full debate, been passed by the House of Lords, there are still some people who do not understand what is involved in the demand.

Yet trained nurses are only asking that the State shall give them the authority to define the meaning of the term trained (or registered) nurse, in order to ensure to the community that the nurses they employ are skilled in their professional duties. No persons may use the terms registered medical practitioner, graduate or licentiate in dental surgery, and pharmaceutical chemist unless they have complied with the registration laws governing their respective professions. They must have passed through a definite curriculum and attained to the prescribed standard of professional education before they are admitted to their register, and on such admission their claim to professional recognition is based.

In the same way no woman may now take the title of certified midwife, or act as a midwife, except in the case of emergency, unless she has furnished the Central Midwives' Board with evidence of training and good moral character, submitted herself to its examination, and satisfied the examiners that she is competent to conduct normal cases of labour. The period of training may be brief and the scope of the examination limited to knowledge which it would be dangerous for a midwife to lack; but at least a beginning has been made—henceforth there is a line of demarcation between the trained and the

untrained, and although the midwife is probably the worst paid skilled worker in the community, it is evident that women value the opportunity of attaining the definite status conferred by admission to the roll, inasmuch as over 2,500 last year paid the requisite fee and entered for the Central Midwives Board's examination.

It follows that the movement for the registration of nurses is a movement for their systematic education of which their registration is the evidence, the guarantee which they offer to the public of their skill and efficiency. For a midwife there is one portal, and one only, by which she gains access to her profession—the examination of the Central Midwives' Board. But for the nurse there are at least 500 general training schools in the United Kingdom which are willing to certificate her, besides innumerable special hospitals and nursing homes.

The advantages of a uniform examination, followed by State Registration, are so obvious that it is incredible trained nurses should have been working for more than twenty years to obtain the necessary legislation. But their demand touches deeper issues than at first sight appears. It is an educational, an economic, a labour question; and when has the employer ever conceded the right of employees to organise, even in the public interest, without the most strenuous opposition? That is the question in a nutshell.

Registration laws for nurses have already been enacted in Cape Colony, Natal and the Transvaal, in the Dominion of New Zealand, in twenty-four of the United States of America, in Germany and Belgium. In India, Canada, Australasia, in various British Colonies, and in many American States, trained nurses are organised to obtain legislation—a proof of the widespread realisation of the need.

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