rapidly that it was imperative that a suitable education for nurses must be evolved. If so much was expected of them much must be given to them.

It was the thirst for knowledge, the desire of women who entered our hospitals thirty years ago to perfect their services which was the great force behind the evolution of the training schools. Now the three years' standard of training was general, and a pupil who had worked in a good hospital, under supervision for that period, and availed herself of her opportunities, must be a skilful nurse at the end of that time. But standards varied greatly, and a woman desirous of qualifying herself to obtain the confidence of the sick and the public found that the work and standard of teaching varied so much in the different hospitals that it was largely a matter of chance whether she obtained a good education. There should be no element of chance where the safety of sick people was concerned, and if a good practical standard were required by a legally constituted Central Board such great inequalities could not exist.

Medical practitioners incorporated in their Bill the demand for an educational curriculum, and that evidence must be given of having attained a minimum standard before qualification—i.e., they must give evidence of sufficient knowledge before the lives of the people were placed in their hands. The medical faculty now demanded extraordinary skill from their nurses, and after a most critical operation the surgeon could leave the patient with confidence in the charge of a trained nurse. Those who claimed so much from the nurse must see that she was not expected to make bricks without straw.

Mrs. Fenwick then showed that to provide justly for nurses from the educational standpoint a comprehensive curriculum must be defined, and everything pointed to co-operation in the future between groups of hospitals, so that a nurse during her training should have at her disposal the best clinical material in the various branches of her profession. At present there was lack of organisation in this respect, because it could only be perfeeted from a centre. What registrationists asked was that Parliament should realise that within the last half century nursing had arisen as a profession for women, and that an expert Nursing Board, having State authority, should evolve an educational curriculum which every nurse would have to pass through, and to give evidence of having profited by, before being registered by the State as

It was useless to contend, as was sometimes done, that the order produced by uniformity would stultify progress. It was, in fact, necessary for progress outside the schools where the important work of nurses was carried on, and where the quality of a nurse's education was really tested.

Turning to the economic side, Mrs. Fenwick showed that when once members of a profession were qualified it was generally acknowledged that they had some sort of corporate rights. What rights had trained nurses in the body politic? On all sides the half skilled and the unskilled competed with them on equal terms, there was no protection for their skilled work. In olden days, in

connection with various Guilds and crafts, apprentices had to perfect themselves very thoroughly, but, when they had done so, their skill was protected.

It was not proposed to make the Registration of Nurses compulsory; there were degrees of sickness and feebleness, and it would be arbitrary to say that no one should nurse who was not registered. The registration of medical practitioners was not compulsory, but the moral force behind the Medical Acts gave them their weight. What thoroughly trained nurses who had given years of their lives to perfecting their work desired was that the State should give them a protected title—the legal title of "Registered Nurse"—if they were worthy of it. They wished to give a guarantee to the public that the public might know what they were paying for, and they had a right to go to the Government, who were the representatives of the people who were the State, and ask for this.

Mrs. Fenwick then dealt with the question of the "continuing guarantee," and the objection that you "cannot register character." The finest characters were, she said, formed by personal responsibility, and this was difficult to estimate without trust. The attitude of mind which concluded that unless under supervision a nurse would fail in moral rectitude was intolerable, and the cry that character could not be registered was a catch word. A system by which a probationer brought evidence to the training school of years of good conduct, who, for a term of three or four years, under keen, trained supervision in the wards and Home, continued in the paths of right doing, placed a lifetime of moral rectitude at the disposal of the Central Registration Authority. Such unimpeachable records would have to be submitted to the Board, and to anticipate that the mere fact of registering technical qualifications in addition would, by some mysterious process, leave the candidate devoid of all moral balance was absurd. Character would count as it had never done before under a system of central and unbiassed professional control.

Nurses, like medical practitioners, were the servants of humanity; only fine women could make fine nurses, and to fulfil her destiny a nurse must know humanity and study human environment in its widest sense, and thus bring herself into sympathy with the needs of her kind. Registration did not claim to make perfect; its aim was to improve, and to inculcate in trained nurses a sense of professional responsibility in which the honour of their profession would be in safe keeping.

THE NURSES' REGISTRATION BILL.
Miss Musson then called upon Miss M. Mollett,
Hon. Secretary of the Matrons' Council, to read
and explain the clauses of the Nurses' Registration
Bill.

Miss Mollett said she was glad to have something substantial in her hands, as nothing was more difficult than to glean after Mrs. Fenwick had harvested. The Bill in charge of the Right Hon. R. C. Munro Ferguson, M.P., P.C., in the House of Commons, was as it had left the Central Registration Committee, which was composed of delegates from eight important medical and nursing societies

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