

THE MANCHESTER MIDWIVES' SUPERVISING COMMITTEE.

Much information concerning the working of the Midwives Act can be gleaned from the report of the Manchester Midwives' Supervising Committee for 1910. The number of midwives who notified their intention to practise in that city was 159, of whom 47 obtained admission to the Midwives' Roll through having been in practice at the time that the Act was passed, and 70 per cent. were certificated. Of the 19,212 births which took place during the year, 57 per cent. in Manchester were attended by midwives, while, in the adjoining borough of Salford, 75 per cent. of the total deliveries were conducted by midwives.

Of the 131 cases of puerperal fever which occurred during the year, in 41 cases midwives alone were present at the confinements, and in 67 doctors alone. The *British Medical Journal* suggests, as a partial explanation of the larger amount of infection occurring in the practice of medical practitioners, "the fact that in most cases where doctors alone attend, the personal cleansing of the patients, and the general attendance, has to be left to unskilled relatives or neighbours, as the patients cannot afford to engage both a doctor and a skilled nurse, while in the midwives' cases both the labour and the subsequent attendance is entirely carried out by the trained midwife herself." This is surely a strong argument for the employment of midwives by patients of limited means, and the skilled attendance rendered by the midwife during the puerperium, as well as at the confinement, is one cause of her popularity.

The vexed question of the payment of medical fees when a doctor is summoned to the help of a midwife in a necessitous case is dealt with by the Committee, which has a flexible income limit for such cases, the fees paid varying from 2s. 6d. to £1 1s., according to the nature and difficulty of the case. Under this scheme 497 applications for fees were received from medical men, and considered by the Medical Sub-Committee, which recommended that payment should be made in 432 cases, amounting to £425. Of the 65 applications rejected the patient's income was above the scale limit in 42 cases, 21 did not fulfil the conditions under which the fee is paid, and 2 were referred to Boards of Guardians.

Our esteemed contemporary points out that "the fact that only 2 out of 497 cases were adjudged by the Supervising Committee to be paupers is a forcible comment on the procedure now recommended by the Local Government Board. Since the Manchester City Council decided itself to pay these fees, the Local Government Board has recommended that Boards of Guardians, not Town Councils, should hold themselves responsible for such cases. If that had been done in Manchester, either the whole of the 432 cases for which the Supervising Committee paid would have been pauperized, or, what is more probable, many of them, rather than submit to be pauperized, would

have refused to accept medical aid, though the midwives advised it and the Committee afterwards confirmed them as suitable cases for medical aid."

During the year four midwives were reported by the Committee to the Central Midwives' Board for negligence and misconduct, and in one legal proceedings were taken against a woman for practising habitually and for gain, although her name had been removed from the Midwives' Roll. She was fined £2 and costs, and, on conviction of the same offence at a later date, was imprisoned for a month. (Was this the woman, we wonder, who complained that she had not had time to earn enough to recoup herself for the fine of £2 previously imposed!)

On the second occasion the magistrate drew attention to the fact that if her statement were true, some medical man was helping her to break the law, in which case, we presume, he was covering unqualified practice, and liable to be cited to appear before the General Medical Council.

An extensive outbreak of ophthalmia occurred in the practice of one midwife, and, on investigation, was found to be due to the direct application of perchloride of mercury to the corneæ; in fact, not to carelessness but to an excess of misdirected zeal.

A special ophthalmic nurse has now been appointed to visit every case to see that proper medical aid is obtained, and to assist the mothers in carrying out directions. Two special nurses have also been appointed to deal with septic cases, and to investigate the causes of stillbirth and other kindred matters.

We observe, with pleasure, that the Supervising Committee, which carefully considered the rules under which midwives work, as recommended by the Central Midwives' Board, suggested, amongst other amendments, that the period of training of midwives should be increased from three to six months, and that more attention should be given to practical instruction.

There is a general consensus of opinion amongst those responsible for the practical training of midwives that three months is too short a time, but so long as the Central Midwives' Board sanctions this period of training, it is very difficult for schools which are competing keenly for pupils to lengthen their course of instruction. The average brain may temporarily absorb in three months sufficient knowledge to pass the examination, but rarely retains a large amount of it for purposes of practical usefulness subsequently. Unless the pupil is a trained nurse, a three months' training is an inadequate preparation for the grave responsibilities which subsequently devolve upon a midwife.

CONTRARY TO THE MIDWIVES ACT.

In connection with an inquest in the Lambeth Coroner's Court, it having been proved that a trained nurse and pupil midwife from Guy's Hospital had attended a case as midwife, the jury expressed the opinion that the hospital authorities ought, on all occasions, to send a "certified midwife" to such cases.

[previous page](#)

[next page](#)