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EDITORIAL.

NURSING UNDER THE NATIONAL INSURANCE ACT.

A proposition which has been made by the Queen Victoria's Jubilee Institute for Nurses, and which is being submitted to Approved Societies throughout the Kingdom, is that the "Queen's Nurses Association is prepared to nurse all insured persons for a capitation payment of 3d. per member per Annum."

The Queen's Nurses have a high reputation, and the standard now required of them is an excellent one, namely three years' general training, and, in addition, six months' training in district nursing, and in the special knowledge requisite in work of this kind, *i.e.*, sanitation and hygiene, etc.—a standard which insurance committees and approved societies could, with confidence, accept as implying competence on the part of those employed to nurse the insured sick.

But, we must point out that, in the outline of the scheme before us, no guarantee is given that if an arrangement is entered into by Approved Societies with the Queen Victoria's Jubilee Institute to nurse their members, that they are thereby assured that the nurses provided will be Queen's Nurses, and this, consequently, is a point on which they should seek precise information, and insist that if they enter into an agreement for the nursing of their sick members only Queen's Nurses should be employed for this purpose.

In towns and populous centres this will no doubt be the case, but, in country districts, it is by no means certain, because, affiliated to the Queen's Institute are County Nursing Associations, which employ some 1,000 "village nurses." These village nurses are certified midwives who have had not less than nine months' district and midwifery training. As the latter occupies at

least three months the assured training in general work extends over six months, not necessarily in a hospital. It has always been claimed as the *raison d'être* for these village nurses that the large majority of the cases attended by them are cases of child birth, and that it is better for them to have a little general knowledge than none at all. But it is not proposed that the provision of nurses at 3d. a head per insured person, shall include the nursing of either maternity or tuberculosis cases. We are therefore left with a guarantee of a few months' training in no way comparable with that of the Queen's Nurse, whose services will be available in towns.

From the point of view of Approved Societies it is certain that sickness whether in town or country is the same, and that therefore their sick members need the same quality of nursing wherever they may be resident. Indeed it is even more essential that a nurse should be experienced, and equal to all emergencies, in the country than in the town where a doctor's services are more readily accessible. Furthermore if the same capitation fee is paid per member in town and country the quality of the nursing service supplied should be the same.

Lastly, it is not apparent how 3d. per head per member can provide thoroughly trained nurses. At this rate the amount paid for 2,000 members produces £25, whereas the cost of a Queen's nurse is approximately £100 per annum. Is it reasonable to suppose that if medical attendance costs 7s. 6d. per member per annum that nursing can be provided for 3d.? At a meeting recently held at Brighton between representatives of the Queen's Nurses and Approved Societies a resolution approving the principle was withdrawn, and those present promised to lay the proposal before their societies and report to an adjourned meeting.

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