

that they know their work. Such knowledge cannot be acquired in three months, or even six. Our English women are not more but less scientific than their neighbours on the Continent, to whom one year's training is obligatory in Scandinavian countries, two years in France, Belgium, Holland and Italy."

At the new National Training School for Midwives at Woolwich, the outcome of the work of the Home for Mothers and Babies, of which it is hoped that the foundation stone will be laid during the present year, the shortest course given to candidates without previous nursing training will be one year, and this for a very low fee. In many cases, it is hoped to extend it for two years; and in the second year to give a small salary. The midwives will also be expected to return every three years for a week's post-graduate work. The institution will have ante-natal wards—the importance of which is increasingly recognized, and a separate block for complications. Special care will be given to infant feeding and infant care.

CENTRAL MIDWIVES BOARD.

At the meeting of the Central Midwives Board on March 31st, charges against ten midwives were investigated with the following results.

Struck off the Roll and Certificate Cancelled.—Susannah Adams (No. 4261), Mary Baker (No. 7460), Sarah Ann Bandy (No. 10719), Margaret Haddock (No. 9822), Betty Watson (No. 13719). *Severely Censured.*—Marion Newell (No. 12810), Coombe Hospital Certificate. Report from L.S.A. asked for in three and six months.

Cautioned.—Emilie Victoria Pocock (No. 32423), C.M.B. examination.

Sentence postponed for Six Months.—Mary Edwards (No. 18437), Harriet Hughes (No. 11409).

Adjourned for the hearing of further charges.—Sarah Ann Holder (No. 2703).

The case of Miss Pocock presented several points of interest. In the first place she ably conducted her own defence. Then it will be remembered that she appeared before the Board in December on a charge of not advising medical assistance in a case of twins suffering from inflammation of and discharge from the eyes, and was censured in this connection, a report of her work being asked for from the Local Supervising Authority in three and six months time. These reports have still to be received.

The principal charges in the indictment on this occasion were that the midwife treated the eyes of an infant by the application of silver nitrate without making any entry thereof in her Register, and that she did not, when sending notifications to the Local Supervising Authority, adequately describe the occasion for which medical help had been sought.

In regard to the first mentioned charge, the midwife had some ground for claiming that she interpreted Rule E.18, to which the Chairman drew her attention, to apply to drugs taken by

mouth. It runs, "A midwife must note in her Register of Cases each occasion on which she is under the necessity of administering any drug other than a simple aperient; the dose, and the time and cause of its administration." The Rule appears to need amending in order to indicate that hypodermic injections and the instillation of dangerous drugs into the eyes of an infant are also included.

Another interesting point was that made by Dr. Sandilands, Medical Officer of Health for Kensington. In the case of the infants whose eyes were in a condition necessitating, in the midwife's opinion, the instillation of nitrate of silver, Mr. Bertram, Solicitor to the Central Midwives Board, was desirous of obtaining the evidence of Health Visitors for the Borough of Kensington who could testify to having seen the eyes, and their condition. Dr. Sandilands, who attended, objected to their appearing, on the ground that it was very undesirable that these Health Visitors should be called upon to give evidence in such cases, or that their confidential reports should be utilised against midwives, a class of workers of much the same standing as themselves. In this case they would cease to make confidential reports. It was of the utmost importance for the success of their work that they should be on friendly terms with the midwives in their area. He considered that the proper persons to supervise and give evidence as to the midwives' work were the inspectors appointed by the Local Supervising Authority, not the Health Visitors. We agree with this view, and consider that the work of the Health Visitor should begin when that of the midwife concludes, otherwise there is bound to be overlapping and undesirable friction. It is the duty of a midwife to advise that medical help shall be called in in the case of inflammation of or discharge from the eyes of an infant, however slight, and if the midwife fulfils her obligations under the Rules of the Board in this respect the child's interests are adequately safeguarded.

In the present case a resident medical officer from Queen Charlotte's Hospital, who attended to give evidence before the Board, gave an account of the condition of the child's eyes when seen by him, which did not tally with the view taken of them by the midwife. She contended that she instilled the nitrate of silver merely as a precautionary measure, because the mother said the child's eyes were sticky in the morning, whereas the doctor observed a certain amount of inflammation.

A Bill "to secure the better training of Midwives in Scotland, and to regulate their practice" has been introduced into the House of Commons, supported by Mr. Ainsworth, Mr. Arthur Henderson, Mr. Robert Harcourt, Mr. Duncan Millar, and Dr. Chapple; it is down for a second reading on April 8th (as we go to press). Another Bill with the same object was introduced into the House of Lords by Lord Balfour of Burleigh on April 1st.

[previous page](#)

[next page](#)