

THE ROYAL SANITARY INSTITUTE.

CENTRAL MIDWIVES BOARD.

EXAMINATION FOR MATERNITY AND CHILD WELFARE WORKERS.

The Local Government Board and the Board of Education have recently issued Memoranda on Infant Welfare Work; and at the present time, when there is particular importance attaching to the rearing of a healthy population, a great deal of attention is being devoted to the various methods and agencies by which this may be ensured.

For the effective carrying out and administration of the measures designed, there is a need for workers well trained and with a high standard of qualification. In order to assist local authorities in the selection of suitable workers, the Royal Sanitary Institute have established an examination in sequence with the present standard examination for Health Visitors and for Inspectors of Nuisances, but requiring a wider experience and a more developed knowledge of the subjects pertaining to child welfare, including ante-natal conditions and the laws and regulations relating to and the organisation necessary for such work.

The examination will be supplemental to the Health Visitors' examination, the certificate for which is one of the qualifications named in the General Order of the Local Government Board (1909), relating to the office of Health Visitor and School Nurse.

The first examinations will be held in London on December 8th and 9th, 1916.

SYLLABUS.

Candidates will be expected to show a high standard of knowledge and a wide experience in all subjects relating to Child Welfare and Home Management, particularly those stated below.

Ante-natal work and after-care of the mother and infant.

Hygiene of infancy and childhood; children's ailments.

Principles of infant feeding; infants' foods; dietaries.

Home visiting and the advice that the infant welfare worker should be qualified to give.

Domestic economics.

Organisation and management of infant welfare centres.

A general knowledge of the agencies and institutions dealing with child welfare and relief.

Duties of Superintendent of Midwives.

Acts and Regulations relating to infant care and the protection of children, and Official Regulations and Memoranda having reference to maternity and child welfare centres, and duties of Health Visitors and other workers. The Midwives Act and Rules of the C.M.B.

A thorough knowledge of the sanitation of the home and its surroundings will also be required.

For regulations and further information, apply to the Secretary, Royal Sanitary Institute, 90, Buckingham Palace Road, S.W.

A Special Meeting of the Central Midwives Board was held at Caxton Hall, Westminster, on Friday, August 4th, for the purpose of hearing the charges alleged against two certified midwives. Sir Francis Champneys presided.

The first case taken was that of Mrs. Ellenor Strange (No. 4882), a midwife working in the area of the London County Council. Mrs. Strange was present, and was defended by her solicitor. Dr. Macrory, the inspector, and other representatives of the L.C.C. were also present. The charges were mainly in connection with neglecting to explain that medical help was necessary in cases of ophthalmia neonatorum. The charges were admitted in two of the cases, and denied, or withdrawn in others, but in one the baby was blind and in another practically so.

Mr. Matthews, who defended the midwife very ably, took up, in our view, an unfortunate line of defence when he addressed the Board on his client's behalf. The Board, he contended, had to deal with two sets of people, the first coming from an intelligent class, who were able to pass a stiff examination, and the second derived from a class whose experience and manipulation was good, but who would never be able to pass an examination. The first mentioned midwife would send for a doctor at once and place the responsibility upon him. The latter often had a conscientious feeling that, having been paid for a job, she must go through with it. That, he believed, was the motive actuating his client.

The Board decided to remove Mrs. Strange from the Roll, but the Chairman informed her that if the L.C.C. were persuaded later that she was thoroughly trustworthy she might apply to be reinstated.

The second case was a curious one. The charges against the midwife were (1) that she did not explain that medical help was needed in a case of serious hæmorrhage, and (2) that the patient, having died, she did not notify the Local Supervising Authority. The case against her broke down completely. It was proved that two medical men in succession were sent for when urgent symptoms arose, and that the second arrived within about thirty-five minutes of the call. The post-mortem disclosed a partially adherent placenta, and hæmorrhage behind it from the placental site. There was also a broken cord, which the midwife had tied at the end nearest the child and preserved for inspection.

It was alleged against the midwife that at the request of the mother she had taken the baby, which was crying, down into the kitchen to bath it, leaving the patient in charge of a relative. The chairman held that the rule of the Board did not require the midwife to remain in the patient's room.

The Board, after deliberating, found that no offence against the rules had been proved against the midwife, and the case was dismissed.

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