

The Midwife.

MATERNITY AND CHILD WELFARE.

The General Purposes Committee of the London County Council reported to that authority on Tuesday, May 11th, that the Lewisham Metropolitan Borough Council in 1917 recommended that the undermentioned duties should be delegated to the metropolitan borough councils. (1) The local control and supervision of midwives under the Midwives Act, 1902. (2) The powers under the Children Act, 1908, relating to infants and young children who are nursed and maintained for reward. (3) The inspection of lying-in homes under the London County Council (General Powers) Act, 1915.

As the proposal was very controversial the Committee postponed its further consideration until after the war. In the interval, by the passing of the Midwives Act, 1918, the Council has ceased to have authority to delegate its powers under the Midwives Act, 1902, the powers of supervising the administration of Part 1 of the Children Act, 1908, have been transferred from the Home Department to the Minister of Health, and the position of the Metropolitan borough councils in relation to maternity and child welfare have been strengthened by the passing of the Maternity and Child Welfare Act, 1918.

The Committee recommended that for a period of one year, subject to review of the whole position at the end of that period (1) that the Council's infant life protection visitors (other than inquiry officers) be withdrawn within the area of the Metropolitan Borough of Lewisham. (2) That there be delegated to the Lewisham Metropolitan Borough Council the powers of the Council relating to the inspection of lying-in homes, on condition that in any case in which a nurse registered in respect of a lying-in home is a midwife there shall be joint inspection by officers of the Council and of the Borough Council.

The recommendation was carried.

We are glad that the position is subject to review at the end of a year, and regret that the recommendation has been carried. In our view the wider the area covered by inspectors the better. Local politics are apt to influence the appointment and the views of local inspectors, nor is the work always sufficient to employ a whole-time official and, consequently, the best qualified people may not apply.

Again, the right of delegating its powers has been withdrawn from the London County Council by the Midwives Act, 1918, in regard to the local control and supervision of midwives permissible under the 1902 Midwives Act, and, as was reported by the Public Health Committee of the L.C.C. to the Ministry of Health in September last: "The

registered persons in respect of seven out of twenty lying-in homes in Lewisham are midwives. Under the Midwives Act, 1918, the Council is precluded from delegating its powers under the Midwives Acts, so that inspectors of midwives, who are officers of the Council, must continue to visit at these seven homes if the Council's powers with regard to lying-in homes are delegated. In order that each authority may be fully cognisant of the whole of the work for which it would be responsible, it is suggested that in any case in which a midwife is the registered person in respect of a lying-in home, there should be joint inspection by officers of the two authorities."

This joint inspection appears to be unnecessary, irritating, and costly to the ratepayers.

THE DEVELOPMENT OF THE WORK OF MATERNITY AND CHILD WELFARE.

In the House of Commons on May 12th, Mr. Waterson asked the Minister of Health if he is aware that many municipal authorities find it impossible to develop the work of maternity and child welfare as it ought to be developed because of the heavy financial burden it entails; and, under such circumstances, he can make any recommendations to the Government for financial assistance to carry out a national obligation, and from which the State will benefit thereby?

Dr. Addison replied: The Government already distribute through my Department a grant of half the expenditure of local authorities and voluntary agencies on maternity and child welfare.

CENTRAL MIDWIVES' BOARD.

EXAMINATION PAPER. MAY 4th, 1920.

1. Where is the female bladder situated? What conditions can give rise to incontinence of urine during pregnancy and the puerperium?
2. What is meant by "pendulous belly"? What may be the effect of this on the course of labour, and how is it best dealt with?
3. A baby vomits. How would you proceed to investigate the cause, and how would you treat it before obtaining medical aid?
4. A primigravida engages you for her confinement. She is thirty-six weeks pregnant. What would lead you to suspect the presence of a contracted pelvis, and how would you prove it?
5. How does the abdominal and vaginal examination differ in a case of occipito-anterior and occipito-posterior presentation?
6. How do you recognise syphilis in the pregnant woman? For what other conditions is it necessary to send for medical help during pregnancy?

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