

THE BRITISH JOURNAL OF NURSING

WITH WHICH IS INCORPORATED
THE NURSING RECORD
EDITED BY MRS BEDFORD FENWICK

No. 1,660.

SATURDAY, JANUARY 24, 1920.

Vol. LXIV

EDITORIAL.

SOME PROBLEMS OF THE MINISTRY OF HEALTH.

Trained nurses have a two-fold reason for keeping themselves acquainted with the problems and work of the Ministry of Health. It is the Government Department which henceforth will control the public services dealing with the health of the people, and, further, the Minister of Health is the Minister who will be intimately concerned with the working of the Nurses Registration Act for England and Wales, and who will represent the interests of trained nurses in the House of Commons.

The report of an address given by Sir Robert Morant, K.C.B., to the Public Health and Insurance Committee of the National Council of Women (not expressing his own views, or those of the Ministry, but trying to show what some of the difficulties are that need to be solved), recently published in its Occasional Paper, is therefore of much interest.

Sir Robert pointed out that the formation of a Ministry of Health had made no alteration in the powers of local authorities; it had touched only the Central Departments in Whitehall, bringing together such Central Departments as were connected with Health, and which had hitherto been separate, namely, the Local Government Board, the Insurance Commissioners, certain powers of the Privy Council with regard to midwives and of the Board of Education with regard to the Health of School Children.

The important point for his audience to consider was the nature of the legislation for *local* bodies which would have to follow upon this union in Whitehall, and the way in which it would affect the existing local authorities. At present there was no one local body whose duty it was to look after the health of the inhabitants

of its area *as a whole*, and to make proper provision for all the requisite health services of the people on modern standards.

The transference and concentration of all the existing powers and duties of the various local bodies would not cover all aspects of public health, and a scheme was needed, governing the whole of a given city or district, which would embrace all statutory health functions, and bring also the voluntary agencies in suitable relations with them.

Sir Robert Morant put forward the question as to whether, if the Poor Law Guardians were abolished, the Rural District Councils, the County Councils, or a larger area of administration were desirable. Many people, he said, considered that a much larger area of administration was needed if we were to get rid of what they regard as the overmastering power of local vested interests.

Again, he pointed out that it would obviously not be sufficient to rely purely on *voluntary* hospitals as the responsible body for making provision for the whole needs of an area. Who should be responsible? It must be someone's duty, not privilege, to care for the sick. Then there were the clinics for special complaints, and centres for infant welfare. They must be brought near the homes of the people, but, in doing so, one would be brought up against the general practitioners, who might say that their private practice would be taken away. Again, there was at present no authority that had specifically been made responsible by Parliament for the provision and upkeep of General Hospitals, or of a comprehensive system of medical provision for an area; and the whole question teemed with such administrative difficulties that health workers all over the country should devote their minds to trying to think out a practical solution of some of these problems.

[previous page](#)

[next page](#)