

House; the proposed enlargement will provide additional accommodation for 66 nurses, and will thus enable the whole staff to enjoy the necessary extra off-duty hours. The League hopes to make its fancy stall the stall of the function, and 75 per cent. of the takings are to be allocated to the League funds. All the help possible is invited from members. This stall is sure to be a great success—we all know what nurses can do when they have a mind to! The extracts from members' letters are full of information. They fly home from Montreal, Northern Rhodesia, Wellington, N.Z., and Baghdad. Royal Infirmary Bradford Sisters are carrying their skill far and wide—greatly to the benefit of mankind, we have no doubt.

The monthly issue of *The South African Nursing Record* always interests us immensely. The medical Editor does not, of course, always see eye to eye with us in the *finesse* of professional journalism, and quotes the commercial, lay edited home nursing papers as professional opinion! This by the way, but on the whole we recognise that our medical confrère has the good of our profession at heart. The question of whether midwives who are not general trained nurses have any right to be members of the South African Trained Nurses' Association has cropped up again. Some nurses disapprove of it, but the Editor, referring to a nurse's letter on the question, writes: "Another letter in this issue claims a word from us. It is that dealing with the subject of midwives and the T.N.A. It again is eloquent of the split that threatens to nullify all our efforts. It is utterly impossible to think of running two Associations. We must have only one, complete and undivided. We do again plead for unanimity and for harmonious working. No useful purpose can possibly be served by any two nursing sections getting up against each other, and we, as Editor of this journal, and neither a nurse nor a midwife, are in the position to appreciate the grave danger of any such split."

Our professional opinion is that if Trained Nurses and Midwives agree to form an association, its title should make this plain. We must claim that Trained Nursing is a profession on its own (we hope in the future it will include midwifery as medical education does), and that experience in midwifery does not constitute a woman a trained nurse, any more that it qualifies her as a general medical practitioner. We suffer greatly in England from the assump-

tion that certified midwives with a smattering of nursing are trained nurses—a standard accepted by the laity running county and rural Nursing Associations for the poor on the cheap, and we are looking forward to the time when our Registration Act will protect us from this injurious system. Trained Nursing and Midwifery are equally honourable professions for women, but they are distinct professions at present, and should not be confused in the public mind with one another. Nor should one cover the other with the resulting economic competition. How about male midwives being associated with general medical practitioners? Unthinkable, of course. This is just where the *finesse* of professional opinion counts.

At the opening of V.A.D. Headquarters at Leicester, it was announced that included in the work will be the formation of a Register of Qualified V.A.D.'s to assist the district nurses if required, or to help at the local hospitals in case of emergency; and to prepare plans for the immediate establishment of an emergency hospital if required.

The Hours of Employment Bill is not likely to be debated in Parliament until the autumn, and we learn that it is probable that the Minister of Labour will call a conference of representatives of the Nurses organisations to hear what they have to say as to being included in the Special Order. The College of Nursing, Ltd., together with the British Hospitals Association, are, we believe, working together against an eight hours day or 48 hours week, and urging that 56 hours weekly work should be the minimum for nurses. This is the result of so-called nurses' societies managed by powerful employers and their senior officials. Not that we are a very ardent advocate of nursing by the clock—but such questions should be settled by the workers themselves in consultation with employers—and not by the employer and his foremen for the worker.

THE PROFESSIONAL UNION OF TRAINED NURSES.

MEMBERS PLEASE NOTE!

The monthly meeting of the Public Health Section of the Professional Union of Trained Nurses, will be held at 17, Evelyn House, 62, Oxford Street, W.1, on Friday, July 30th, at 5.30 p.m.

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