curriculum for the State Examination—and purporting to register nurses.

The Nursing Profession has a very useful example of organisation in the Medical Profession. The General Nursing Council combines the activities of the General Medical Council in its relation to teaching bodies, and the Nurses' Associations should in unity cover the ground of the British Medical Association.

Mr. Percy Edward Laurence, of The Grove, Witham, Essex, left a piece of land in Collingwood Road, Witham, for the erection of a Nurses' Home.

Mr. John Joyce, J.P., of Seabank House, Wallesey, left Miss Pollard, his nurse, £100.

The St. Peter-Port Nursing Association have recently purchased "Cordier House" as a residence for their three nurses, and also with a view to use part of it as a Maternity Home as soon as funds permit. The purchase has depleted the funds of the Association, and money is urgently required for current expenses, as well as for a necessary sanitary installation in the house.

A very successful sale of work was held last week at Fort Augustus, in aid of the Queen Victoria Nurses' Institute. The bazaar, which was opened by Lady Lovat, was held in a marquee in the Abbey grounds. There was a large attendance of visitors, including many from the shooting lodges and surrounding districts.

MENTAL NURSE INSPECTORS REQUIRED.

The seventh annual report of the Lunacy Board of Control has been issued and should be carefully studied. In it is the announcement that the Board hopes that a comprehensive measure to allow mentally sick people to be treated, for certain periods and in certain circumstances, without certification as lunatics, will be submitted to Parliament at the earliest practicable date. The important pronouncement also appears:

date. The important pronouncement also appears:
"The nursing of male insane patients by women under suitable arrangements is followed in a large number of cases by markedly beneficial results, and we approve of maintaining and extending the system."

The report deals at some length with recent complaints and allegations against asylum treatment.

In our opinion there would be fewer complaints if experienced Registered Mental Women Nurses had seats on the Lunacy Board of Control.

GENERAL NURSING COUNCIL FOR ENGLAND AND WALES.

The General Nursing Council is summoned to meet at the Ministry of Health, Whitehall, on Friday, September 30th, at 2.30 p.m. It will be a historic meeting, because for the first time the Council will consider Applications for Registration, and grant the title of "Registered Nurse" to those of whose credentials it approves. The list will not be an exhaustive one, owing to the opening of the Register during the holidays, but now that the Council has reassembled, the hundreds of applications awaiting consideration will receive attention. Already Headquarters realises the enormous task before it, but there is plenty of energy, both on the Council and in the Office, to deal with it.

One fact the profession must remember. As soon as possible after June 30th, 1922, the Rules provide that the first Register shall be published; further, that before December 23rd of 1922 the nominated Council must be replaced by the elected Council, so far as the nurses' 16 representatives are concerned, so that if nurses desire to vote for their own Governing Body, which remains in office for five years, they must be registered before that date.

CHILDREN'S ORTHOPÆDIC CENTRES.

The Central Committee for the Care of Cripples on the Organisation of Clinics for the Treatment of Children has drawn up the following Report:—

The types of children for whom such treatment may be suggested are:—

- r. Richets.—It is very doubtful whether physiotherapy is worth while. Minor cases are best treated at infant welfare centres by regulation of feeding and medicine and attention to hygiene. Major cases require either splinting or operation, or treatment in a residential institution where the hygiene and the diet are carefully supervised. Out-patient massage is waste of effort; it is impossible to give skilled massage to an infant.
- 2. Infantile Paralysis.—The treatment may be divided into (1) Prevention and correction of deformities: (a) splinting; (b) operative treatment; (c) use of walking apparatus. (2) Physio-therapy: (a) massage; (b) re-education of movement; (c) electrical treatment. These should be considered as a whole. In an early case splinting, massage, and electrical treatment of the appropriate muscles should be provided, followed at a slightly later stage by re-education of movement and by the

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