

LETTERS TO THE EDITOR.

Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.

STATE EXAMINATION AND HOSPITAL TRAINING SCHOOLS.

To the Editor of THE BRITISH JOURNAL OF NURSING.

MADAM,—Your comment in the December number on the failure of the General Nursing Council—England and Wales—to publish the list of those who failed in the State Examination, in order “to spare the hospitals,” gives rise to the suggestion that intending probationers be instructed to ask the hospitals when applying, for the syllabus of training and the examination record of the institution since the State Examinations were instituted. It used to be the fashion for the Maternity Training Schools to include such information when advertising.

Recently, *The South African Nursing Record* published correspondence referring to the large number of failures at a recent examination and demanding the reason.

It is to be deplored that years after the passing of the Nurses' Act, probationers should still be trained at the whim of the Hospital Authorities, and that after three to four years' work, and paying their examination fees, they should find themselves unable to cope with the questions set. If the cause be feeble-mindedness or a low educational standard, surely the authorities should have discovered that during the first six months, and warned the candidate she was unsuitable for training—it would have been kinder and fairer in the long run, but in failing to comply with the Act, the General Nursing Council has failed in its duty, and the hospitals are acting wrongfully towards their employées.

Yours, &c.,

J. B. N. P.

Glasgow,

January, 1926.

MIDWIFERY IN LONELY DISTRICTS.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I was very interested to read in the last JOURNAL of the efforts of Mrs. Mary Breckinridge, R.N., and the Kentucky Committee for Mothers and Babies, to bring help to these isolated mothers in the Kentucky mountains, in their dire need.

Every midwife is not cut out for the pioneer work described, and for facing the difficulties and dangers involved, in practising midwifery in such districts. But those who are possessed of steady nerves, initiative, and resourcefulness (all, be it noted, qualities essential to the successful midwife) could scarcely find a more useful and satisfying sphere of work. First, the high privilege of such workers is to bring hope, comfort and relief to lonely homes, where fear, discomfort, and pain prevail; not infrequently indeed to drive away the menace of death which threatens to devastate a happy home, and leave the breadwinner, and the little children desolate. For, with the trained midwife, the Angel of Life as a rule enters, and when, her work ended, she bids adieu to a smiling mother and a healthy baby, and passes on to take the benefit of her skilled knowledge to another home, surely the happiness which has descended on that lonely homestead envelops her also in its benediction, as well as the gratitude of the newly made mother whose health has been preserved unimpaired, and who has been saved suffering untold by her help.

I do not envy nurses in any part of the world who are unmoved by the prevalence of preventable suffering which they make no effort to relieve, or to qualify themselves to avert, because the work does not appeal to them, or because

they fear the displeasure of members of the medical profession who are unable to cope with the situation, but who fear a new form of competition. The first consideration of every nurse and midwife should surely be to promote the health of the community, and to prevent unnecessary suffering. But, rightly understood, the relation of doctor and midwife should be not competition but co-operation. That is becoming more and more understood in this country to the material benefit of both, as well as of mother and child.

I shall watch the development of the work in the Kentucky Mountains with the keenest interest and hope that you will tell us more about it.

Yours faithfully,

CERTIFIED MIDWIFE.

PENSIONS FOR HOSPITAL OFFICERS AND NURSES

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I note that in connection with the Draft Scheme of Pensions for Hospital Officers and Nurses, three main types of policy would be issued, one of them being for a fixed rate of annuity at the retiring age (55), or a certain sum at previous death. Presumably the latter passes to relatives or dependents. May I ask therefore whether an annuitant who takes out a policy on this basis would have the right to leave the annuity which would become due on her death to whoever she chooses, by will? It seems to me that this is a very important point, otherwise it would pass to her next of kin for whom she might not wish to make such provision. They might not need it, and there might be others who would greatly benefit thereby.

Yours faithfully,

STATE REGISTERED NURSE.

[We advise our correspondent to write to King Edward's Hospital Fund for London.—Ed.]

KERNELS FROM CORRESPONDENCE.

A STEP IN THE RIGHT DIRECTION.

Old Registrationist writes :—“At last I see it reported that the G.N.C. has done itself the honour to elect a Registered Nurse to the Chair of our Governing Body! Let us hope the contemptuous attitude it has of late years assumed towards its constituents may now cease, and by just and courteous dealing that it may earn the respect of the Nursing Profession, which at present it does not command.”

A late Member of the General Nursing Council writes :—“The slur on the Nursing Profession so fondly fostered by the Ministry of Health and Government nominees, that no professional member is capable of presiding as Chairman of the General Nursing Council has at last been exploded by the election of Miss Musson to that honourable position. Those of us who resented past humiliation in this connection, wish her every success. May I hope that for the future communications from Registered Nurses will not “be laid on the table,” in consequence be pitched into the waste paper basket by some salaried official. As we are called upon to contribute £20,000 a year for the upkeep of our Council's work, we have a right to criticise its proceedings if we choose, and I hope nurses will not in the future be discouraged from so doing by past uncouth methods of treatment.”

PRIZE COMPETITION QUESTION FOR MARCH.

Mention the varieties of artificial feeding, and the methods of their administration.

We regret that we have been unable to award a prize this month, no papers of sufficient merit having been received.

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