

had not had placed before them the fact that they should take the State examinations and also considered that both examinations should continue to be held.

Dr. Fawcett considered it essential that State Registration should be brought to the notice of every nurse entering a Mental Hospital, and what it meant to them to take or not to take the certificate of the General Nursing Council. He also expressed a wish to hear Professor Robertson's explanation of the failure of the majority of Mental Nurses to become State Registered. Dr. Fawcett also spoke of the impossibility of a statutory body delegating its powers to a voluntary association, and Miss Cox-Davies associated herself with the remarks of Miss Sparshott and Dr. Fawcett.

Professor Robertson having replied, the Chairman said that he had stated that he had received no suggestions as to how the present situation might be remedied. She thought he had received two quite definite suggestions. (1) That nurses in Mental Hospitals should be taught the value of Registration, and the duty or advisability of entering for the State examinations. (2) That the two examinations should continue, but that the Association's examination should be regarded in the same light as a hospital examination is looked upon by the Council in the case of nurses in other branches of nursing. Mr. Blackman had also made a third suggestion as to the question of fees, which she did not propose to open up again. Dr. Fawcett's question remained unanswered.

In conclusion, Miss Musson stated that the Council would consider the points raised at the interview, and a reply would be sent at the earliest possible moment, and Professor Robertson thanked the Council for having received the representatives of the Medico-Psychological Association and for allowing them to have such a free expression of opinion.

The Decision of the General Nursing Council for England and Wales.

The reply promised by the Chairman to the Royal Medico-Psychological Association was sent on June 15th. It informed the Association that the General Nursing Council for England and Wales believe "that in the best interests of the Nursing Profession, and for the reasons given in the Memorandum attached, they would fail in their duty should they depart from the position of requiring an independent examination for admission to the State Register for all branches of nursing—a privilege which has been gained for the profession by Act of Parliament. It is not the policy of the General Nursing Council as a statutory body to delegate its functions and powers, and its right to hold examinations, to any voluntary association. To do so would lead, sooner or later, to the multiplication of examinations qualifying for Registration, and a return to the confusion which the Nurses' Registration Act was established to reduce through the regulation of training and examination by one statutory body. This view had been expressed and supported by large bodies of nurses in this country. There is no question but that the State examination in Mental Nursing will always be conducted on behalf of the Council by Mental Specialists, both in the medical and the nursing subjects of the curriculum. The General Nursing Council for England and Wales is concerned with the registration, training and examination of nurses in England and Wales only, but has already by reciprocal agreement established satisfactory relations with many parts of His Majesty's Dominions as required by the Act.

"In conclusion the General Nursing Council regret that they are unable to accept the proposals of the Association."

It is with feelings of deep relief that Nurses on all parts of the State Register, General and Supplementary, will learn that the General Nursing Council for England and Wales have stood firm on this vital question.

Preliminary State Examination, May, 1929.

2,299 Nurses entered for the Complete Examination and 1,591 passed. Percentage of failures 27.2 per cent.

Final State Examination, May, 1929.

There entered for the Whole Examination: General Register, 1,539; Male Nurses, 1; Mental Nurses, 31; Mental Defective Nurses 1; Sick Children's Nurses, 80; Fever Nurses, 202. Percentage of Failures 22.3 per cent.

THE STATE REGISTER OF NURSES.

We have received a copy of the Register of Nurses for 1929, issued under the direction of the General Nursing Council for England and Wales, and although printed on thinner paper than formerly, it presents a most imposing appearance. When one remembers that less than a decade ago, hospital potentates and powers were expressing the pious opinion that there was no demand for State Registration in this country we wonder what they think of the stupendous crimson volume, containing close on 60,000 entries of the names, qualifications and addresses of intelligent nurses, who have availed themselves of the privileges of legal status and professional recognition. What is satisfactory is, that every issue of the Register contains more entries "By Examination," and the record of fewer semi-trained women, who were thrust on to the Register under Rule 9 (1) (g). The compilation of such a Register is a tremendous piece of work. It is well done and all concerned in its publication are to be congratulated. Personally, nothing gives us more pleasure than the sight and handling of it—we find it an indispensable work of reference.

MATERNAL MORTALITY.

Dame Janet Campbell (Senior Medical Officer of the Ministry of Health) in speaking on Maternal Mortality at the Conference on Maternity and Child Welfare, said that in order to secure the desired improvement in maternity nursing, it seemed necessary to prevent untrained women from practising at all as maternity nurses, though encouraging them to fulfil their proper function as home helps, and to limit recognised maternity nursing to women who were qualified midwives, to give these women a more adequate training in nursing, and to make it practicable for them to devote sufficient time and attention to all their patients. At present any person, trained or untrained, might undertake maternity nursing without let or hindrance.

What is really required is that women practising midwifery should hold the dual qualification of Registered Nurse and Certified Midwife, and until this standard is recognised and enforced, there will be little improvement in maternal mortality statistics.

The refusal of the late Minister of Health to place a Registered Nurse on the Committee to investigate the working of the Midwives Acts, proves that skilled nursing is not realised as an absolutely necessary factor in saving the lives of women in childbirth, by those members of the laity who are busy defining maternity nursing standards.

Let us hope that the British College of Nurses will, in the future, make the dual qualification of Nursing and Midwifery its standard for Fellowship. The more Grants the College allots to Registered Nurses for the purpose of adding midwifery to their qualifications the better.

OUR EXCHANGES.

Nursing literature is now poured out in such profusion that to tackle our exchanges monthly, becomes almost a hopeless task. As these journals are full of instructive matter we lose much by having little time in which to study them. But we never miss "The Public Health Nurse" so ably edited by Miss Ada M. Carr, R.N. This journal should be included in every nurse's library.

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