The Midwife.

THE MIDWIVES' ACTS COMMITTEE OF THE L.C.C. AND THE DEPARTMENTAL COMMITTEE OF THE MIDWIVES' ACT.

The Midwives Acts Committee of the London County Council reported to the Council at its meeting on January 22nd that the Departmental Committee appointed by the Minister of Health on May 22nd, 1928, "to consider the working of the Midwives Acts, 1902–1926 with particular reference to the training of Midwives (including its relation to the education of medical students in midwifery) and the conditions under which midwives are employed, had invited the Council to give evidence before them.

The Committee defined specific matters to which they propose to give their attention in connection with their review of the present position as follows:— "(i) period of training of midwives; (ii) curriculum; (iii) available facilities for teaching both theoretical and practical subjects; (iv) desirability of differentiation in midwifery training schools according to the type of pupil to be trained; (v) qualifications for teachers of midwifery; (vi) post-certificate training; (vii) subsequent employment of midwives; (viii) need for inducements to secure well educated and well trained women in both rural and urban districts; (ix) the placing of maternity nursing on a more satisfactory basis; and (x) the training in midwifery of medical students."

The Midwives Acts Committee of the London County Council are of opinion that the experience which the Council has gained as the local supervising authority under the Midwives Acts justifies it in offering its views upon certain of the matters referred to above, and upon other matters arising out of its administration of the Acts, and that therefore the invitation of the Departmental Committee

should be accepted.

Comments and Proposals.

The Committee proposed to give evidence upon the following lines:—That, as regards the training and supply of midwives, in the opinion of the Council it is desirable-

(i) That the ideal to be aimed at should be the teaching and training of pupil midwives, as far as possible, at institutions adequately staffed, at which the whole course

of training (intern and extern) can be given.

(ii) That the teaching of midwifery should be given either by (1) medical practitioners with special experience in obstetrics or (2) fully trained nurses, certified as midwives, with definite experience of practical midwifery and holding a recognised teacher's certificate.

(iii) That all training courses for pupil midwives should be subject to frequent and thorough inspection by the

Ministry of Health.

(iv) That the administrative duties of the Central Midwives Board in connection with the approval of training centres, and of midwives or other persons desirous of undertaking the training of pupil midwives, should be transferred to the Ministry of Health, which should have the assistance of an advisory committee representative of local supervising authorities, medical practitioners and certified midwives.

(v) That post-certificate courses at specified intervals should be made compulsory for all practising midwives.

(vi) That the constitution of the Central Midwives Board should be amended so as to provide for the election of a smaller number of members than at present and for the

inclusion of a member possessing legal training.

(vii) That the penal procedure of the Central Midwives Board should be amended in order that the normal procedure should be for the prosecution of midwives against whom a prima facie case of malpractice, negligence or misconduct had been established by a local supervising

authority, to be conducted by the legal representative of the local supervising authority.

(viii) That powers should be conferred upon the Central Midwives Board to enable the Board to compel the attendance of witnesses and that evidence should be given on oath.

In connection with this they state:

The Question of General Education.

"From time to time questions have arisen as to the desirability of requiring that women wishing to adopt this profession should possess such general educational qualifi-cations as would enable them to derive full benefit from specialised courses of instruction in midwifery. . . . Various methods have been suggested for the purpose, e.g., certain recognised public examinations, such as the school-leaving certificate and/or personal interview of the applicant by the medical officer of health of the local supervising authority, the matron of a training school or some other suitable person. The position in the towns differs considerably from that in the areas of scattered populations, and we feel that it would be difficult, if not impossible, to apply such preliminary tests by way of examination which would be uniform throughout the whole country. We feel that the most satisfactory results would be obtained by personal interview by the heads of the training schools

to which the applicants desire admission.

"The rule Cr (I) (b) of the Central Midwives' Board requires that candidates for examination must have witnessed not fewer than ten labours and, in addition, have attended and watched the progress of not fewer than twenty labours. Our experience leads us to doubt whether this rule is strictly complied with, as pupil midwives are often moved from one case to another, which prevents their having sufficient opportunities for seeing a case in all its stages. Institutions which teach midwifery should be so staffed that they do not depend upon the work of the pupils, and are not compelled to arrange the work in order to get it done most easily rather than to the best advantage of the pupils. This condition of affairs should not be permitted. The extern work at certain institutions should be better supervised. In some cases, the midwife in charge only visits the pupil's district cases once or twice during the puerperium. There are still cases of training schools in which the district work of the pupils does not include the daily washing of the infant.

"Moreover, we have found in the course of our investigations into the practice of midwives that some midwives are apt to leave certain duties concerning both mother and child to handywomen who may also be employed at the respective cases. The rules of the Central Midwives Board in those respects are of a more or less general nature, and we are of opinion that the rules should specifically place upon the midwife the duties of washing the mother, the changing of her gown and bed-clothes, blanket-bathing, swabbing, changing of pads and taking records of pulse and temperature, and directions as to food, and, as regards the infant, attention to the eyes and cord and washing

and dressing, in each case daily for ten days.

"To rule C 5 of the Central Midwives Board is appended a footnote as follows: "It is desirable that whenever possible arrangements should be made for pupil midwives to (1) visit ophthalmic hospitals or the ophthalmic departments of general hospitals for the purpose of gaining direct experience of ophthalmia neonatorum, (2) observe cases of puerperal fever at hospitals or elsewhere, (3) observe cases of venereal diseases at a V.D. clinic, (4) attend infant clinics." We find, in practice, that many midwives are extremely ignorant with regard to the matters previous page next page