

12. A pupil whose first period of training extends over six consecutive calendar months shall during such period—

(a) attend a course of at least 40 lectures on the subjects enumerated in Rule B. 36, such course to extend over the whole of the period of training and to be supplemented by practical demonstrations and tutorial classes; at least five of the lectures and some of the practical demonstrations must be on the subjects enumerated (m) and (n) in Rule B. 36 and at least two of the lectures must be on the subjects enumerated (r) in Rule B. 36;

(b) conduct antenatal examinations on not less than 50 pregnant women and receive instruction in the care and supervision of women during the course of pregnancy including the booking of cases and the keeping of records;

(c) receive clinical instruction in the conduct of labour, including the witnessing of not less than 10 labours;

(d) attend not less than 10 labours within the approved training institution, making full examination, including abdominal palpation, during the course of labour and personally delivering the child and afterbirth;

(e) attend and nurse not less than 20 lying-in women and their children, in the case of patients nursed in the approved training institution during the time the patients are in such institution and in the case of patients nursed in their own homes during the 14 days immediately following labour;

(f) (i) attend clinical demonstrations on venereal diseases; and

(ii) receive instruction in the prevention and treatment of ophthalmia neonatorum and, wherever possible, attend Ophthalmic Hospitals or the ophthalmic departments of General Hospitals for the purpose of practical instruction in the treatment of inflammatory conditions of the eye.

The curriculum for the pupils who have not received general training and are required to spend 18 months in training before presenting themselves for the First Examination is then set out, followed by the curriculum for the second period of training.

Unless the Board otherwise determines in any particular case a person shall not be approved as a teacher for the purpose of Rule B. 13 (a) (i) unless she is a state certified midwife and also a general trained state registered nurse.

The First Examination, which is partly oral, clinical and practical, covers a wide range of subjects, including general physiology, the principles of hygiene and sanitation as regards home, diet and person; and the midwife's part in spreading a better knowledge of hygiene among the women she attends and a very thorough training in everything relating to the care of the lying-in mother.

The Second Examination is mainly oral, clinical and practical.

A certificate is awarded by the Central Midwives Board to those who are successful in gaining the first certificate.

This certificate bears the following note: "This certificate *does not* entitle the pupil whose name is inscribed herein to admission to the Roll of Midwives or authorise her to hold herself out as certified under the Midwives Acts, 1902 to 1936."

This immediately raises the question what is the position of the woman who is not a midwife, in relation to the Midwives Act which is "An Act to secure the better training of *Midwives* and to regulate their practice." Can the scope of an Act of Parliament be extended by approval of Rules by a Minister without Parliament, having the opportunity of discussing the pros and cons of such extension?

The General Nursing Councils control the education of Nurses. On the other hand, while the Central Midwives Board has defined a curriculum of training for Maternity Nurses the General Nursing Councils have not.

Points which Demand Attention.

The points to which we desire to direct attention are:—

1. The Central Midwives Board have under the Rules of Training and Examination of Section B, instituted an examination and taken power to award a certificate to women (the First Certificate) which bears the Note:

"This Certificate *does not* entitle the pupil whose name is inserted hereon to admission to the Roll of Midwives or authorise her to hold herself out as certified under the Midwives Acts, 1902-1936."

THE MIDWIVES ACT, 1902, is "An Act to secure the better training of Midwives and to regulate their practice."

Can the Act be extended to include the training, examination and certification of persons whom the Certificate expressly states are not entitled to admission to the Roll of Midwives? It would appear that the consideration of Parliament is necessary, and that opportunity for debate of the proposition should be provided, before this extension of the powers granted by Parliament under the Midwives Acts, to include not only midwives but nurses is sanctioned.

The various questions which arise could then be debated and voted upon, and, if sanctioned, the Certificate awarded should certainly carry the note that it does not entitle the holder to admission to the Register of Nurses, or to hold herself out as certified under the Nurses' Registration Act, 1919. The holder of this Certificate must, if she is not a State Registered Nurse on the General Part of the Register, have had eighteen months' training in maternity nursing, and presumably have been found competent in that branch. She need have had none in General Nursing, and, in this case, would be a danger to the public if she undertook to nurse general cases of illness.

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

In regard to the position of the General Nursing Council and the control of Maternity Nurses, we note that while undoubtedly Maternity Nursing should come under the General Nursing Councils that for England and Wales does not define a curriculum of training in Maternity Nursing. It would, therefore, seem that assuming the extension of the Midwives Act to include Maternity Nursing, the Central Midwives Board is in a strong position, but, that the whole question needs clarifying, and discussion by Parliament, is undoubted.

It will be realised that if Parliament sees fit to place Maternity Nursing under the Central Midwives Board, that such Nursing will in part fall into the hands of specialists, and that Maternity Nursing is one of the most lucrative parts of private nursing. Further, Registered Nurses who undertake the nursing of maternity cases will have to register under two authorities, and pay fees to both.

Will the General Nursing Council for England and Wales fulfil its obligations under the Nurses' Registration Act if it relinquishes control of Registered Nurses in regard to Maternity Nursing without question, or its obligation to the Nurses themselves?

And how will such an arrangement affect the question of reciprocity between the General Nursing Councils for England and Wales, and those for Scotland and Northern Ireland, when the conditions are not the same? Presumably Registered Nurses in these countries, if they wish to undertake Maternity Nursing in England and Wales, will be unable to do so unless they first obtain the First Certificate of the Central Midwives Board, for this undoubtedly will be demanded by the public as evidence of competence in Maternity Nursing should Parliament confirm the authority of the Board to grant such a certificate.

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