

**OTHER BUSINESS.**

The President drew the attention of the Council to the appointment of the Right Hon. Walter E. Elliot, M.C., M.P., as the new Minister of Health, who, in the past, had given valuable help during the passing of the Nurses' Registration Acts, 1919, and hoped he would continue to take an interest as a member of the medical profession in the advancement of a high standard of nursing and the general welfare of nurses.

**OBLIGATION.**

At the conclusion of the meeting a Member attended and took the Obligation, and was welcomed by the Council, with whom she took tea.

The meeting then terminated.

**FIXTURES.**

June 18th.—Monthly meeting of the Council, 2.30 p.m.

**THE ANNUAL MEETING.**

The Annual Meeting will be held on Monday, July 4th, at 39, Portland Place, London, W.1, at 3 p.m., at which the President will take the chair.

**AGENDA.**

1. The presentation of the Annual Report.
2. The Financial Report from the Treasurer.
3. The appointment of Auditors.

Reception and tea at 4.30 p.m. All Fellows and Members are cordially invited to attend the Annual Meeting and Reception, and thus encourage the Council in its arduous work for their professional interests, and prove their sympathy with one another.

**A PROFESSIONAL DUTY.**

We advise matrons and secretaries of nurses' organisations to obtain copies and study the memoranda being submitted to the Inter-Departmental Committee on Nursing Services. Those compiled by the British Medical Association, the London County Council, the Trades Union Congress, the General Nursing Council, the College of Nursing, the various Matrons' Associations, the Mental Nurses' Associations, and the Trades Union Nurses' Organizations should be compared. It will be seen that they are unanimous in recommending substantial reforms in the direction of what are termed "privileges," but which are in effect "rights" in so far as hours on duty and off duty are concerned, and which are already in practice in many well-organised nursing schools.

**The Crux of the Question.**

The crux of the question before the Departmental Committee is: Are nursing economic conditions to be defined by Parliament, or is the present unorganised system to prevail? Study Whitleyism.

Here's an example from  
A butterfly  
That on a rough, hard rock  
Happy can lie;  
Friendless and all alone  
On this unsweetened stone.

Now let my bed be hard  
No care take I;  
I'll take my care like this  
Small butterfly,  
Whose happy heart has power  
To make a stone a flower.

—W. H. Davies.

**THE PUBLIC HEALTH.****COST OF HOSPITALS.****RECOMMENDATIONS OF DEPARTMENTAL COMMITTEE ON CONSTRUCTION AND MAINTENANCE.**

The final report of the Departmental Committee on the cost of hospitals, dealing with the construction and maintenance of a variety of types of institution, including those designed to deal with maternity, chronic sickness and pulmonary tuberculosis, is published by H.M. Stationery Office (price 2s.).

The Committee was appointed by the Minister of Health to consider the capital cost of construction and the annual cost of maintenance of hospitals and certain other classes of public buildings provided by local authorities. Its first Chairman was Sir L. Amherst Selby Bigge, who resigned in 1936, and was succeeded by Mr. Adam Maitland, M.P.

In their First Report, published at the beginning of 1937, the Committee dealt with the Acute General Hospital. In their Final Report they deal with the remaining types of building covered by their terms of reference—viz., maternity accommodation, accommodation for sick children, and accommodation for cases of chronic sickness (all of which may be planned either as departments of general hospitals or as separate hospitals) and with residential institutions for pulmonary tuberculosis, mental hospitals, mental deficiency colonies, public assistance institutions, and baths and wash-houses.

As in the case of their First Report, the Committee have not attempted to express standards in terms of cost, but have concentrated on advising what should be regarded as reasonable requirements for the various types of buildings. The recommendations made in Section X of the First Report as to the methods of construction, materials and finishings of an Acute General Hospital are generally applicable to the buildings considered in this Report, with slight individual modifications, as in the case of Mental Hospitals. The Committee have not dealt with the protection of hospitals against air raids, this question being outside their terms of reference.

**THE MATERNITY DEPARTMENT.**

The Committee deprecate the building of small Maternity Departments, and consider that these departments can best be planned in association with General Hospitals, whether municipal or voluntary. The atmosphere of the maternity ward should be one of health rather than of illness, but the danger of septic infection and the ease with which it can be introduced into the wards and conveyed from one patient to another, make it essential to adopt special precautions; there should be special accommodation for "observation," and in some departments for "potentially septic" cases. The Committee favour wards containing four to six beds (maximum eight) and consider that there should be a liberal proportion of single-bed wards. They draw attention to the need for an Ante-natal Clinic in connection with each Maternity Department, with ample space for future extensions and for ante-natal beds in sufficient proportion.

**ACCOMMODATION FOR SICK CHILDREN.**

The Committee consider that there should be a liberal proportion of single-bed wards in institutions or departments for sick children, in order to prevent the spread of infectious diseases; there should always be isolation accommodation apart from the ward units. As open-air treatment is of special value for children, there should be either open-air wards, or verandahs, balconies and large windows.

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