

mended that the Rule be forwarded to the Minister of Health for approval.

Next Meeting of the Council.

The next Meeting of the Council was fixed for Friday, December 16th.

THE STATE EXAMINATIONS.

THE GENERAL NURSING COUNCIL FOR ENGLAND AND WALES.

The results of the recent State Examinations are as under:—

Preliminary State Examination, October, 1938.

	Entered.	Absent.	Present.	Passed.	Failed.	Percentage of failures.
First entries	2,947	124	2,823	2,053	770	27.3
Re-entries—Whole exam.	611	24	587	273	314	53.3
" Part	334	20	314	219	95	30.3
" Total	3,892	168	3,724	2,545	1,179	—

Final State Examination, October, 1938.

Register.	Entered.	Absent.	Present.	Passed.	Failed.	Percentage of failures.
General—						
First entries	2,196	52	2,144	1,739	405	18.9
Re-entries—Whole exam.	208	8	200	121	79	39.5
" Part	359	9	350	241	109	31.1
" Total	2,763	69	2,694	2,101	593	—
Male—						
First entries	14	2	12	10	2	16.7
Re-entries—Whole exam.	2	—	2	1	1	50
" Part	5	—	5	5	—	—
" Total	21	2	19	16	3	—
Mental—						
First entries	77	5	72	55	17	23.6
Re-entries—Whole exam.	11	1	10	7	3	30
" Part	18	—	18	11	7	39
" Total	106	6	100	73	27	—
Mental Defect—						
First entries	3	—	3	2	1	33.3
Re-entries—Whole exam.	1	—	1	1	—	—
" Part	3	—	3	2	1	33.3
" Total	7	—	7	5	2	—
Sick Children—						
First entries	103	2	101	88	13	12.9
Re-entries—Whole exam.	4	—	4	3	1	25
" Part	12	—	12	7	5	41.7
" Total	119	2	117	98	19	—
Fever—						
First entries	287	8	279	231	48	17.2
Re-entries—Whole exam.	20	—	20	22	7	24.1
" Part	32	—	32	25	7	21.9
" Total	348	8	340	278	62	—

REMARKS.

Finance.

Why should changes in the investments made by the Council of cash variously contributed by the Registered Nurses be reported *in camera*? It is essential that the condition of our finances be given publicity.

NEW DRAFT RULE.

We note that the new draft Rule to give effect to the division of the Preliminary State Examination to which thousands of highly qualified Registered Nurses object, and which was passed by a majority lay vote, was also considered *in camera*, and upon the recommendation of the Education and Examination Committee forwarded to the Minister of Health for approval. Thus the Registered Nurses have not only been deprived of professional power through the demolition of the One Portal to the Register, but have now been legislated for *in camera*. Thus it would appear that the only method by which Registered Nurses can ascertain what powers or penalties have been drafted for their control is to appeal for information to the Minister of Health.

Queen Mary presented Long Service Medals and Bars to Ten Nurses of the Soldiers', Sailors' and Airmen's Families' Association on November 19th.

BENEFACTANT LEGISLATION.

Government's Cancer Campaign.

Trained Nurses will take a deep interest, we hope, in the following beneficent legislation proposed by the Government.

The Minister of Health recently introduced the Cancer Bill, to make further provision for the treatment of cancer; to authorise the Minister of Health to lend money to the National Radium Trust, and to prohibit certain advertisements relating to cancer.

The Government plans for a great campaign against the disease. The main object of the measure is to provide expert advice and treatment for all who suffer, or fear that they suffer, from cancer.

It is estimated that the campaign will cost £600,000, a year for England and Wales and £100,000 for Scotland, half of which will come from central funds.

Criminal Justice Bill.

Important changes which reflect the more enlightened view of crime and criminals taken in recent years are embodied in the Criminal Justice Bill which has been introduced in the House of Commons by the Home Secretary.

Two new types of prison sentences are proposed—corrective training and preventive detention.

BOMB-PROOF SHELTERS.

We are warmly in sympathy with Professor Haldane's demand for air-raid shelters, so urgent in its demands. In supporting this demand, Mr. A. G. Dickens, Fellow and Tutor of Keble College, Oxford, writes in the *Sunday Times*: "The case for air-raid shelters is so tragically clear, so urgent in its demands. We have the practical precept of Germany, with its thousands of shelters. We have the long-standing examples of Barcelona, Valencia, of Castellon . . .

"Yet we lack the beginnings of a scheme of air-raid shelters and thereby any hope of adequate protection for the civil population and its morale against the explosive bomb. Since even the politicians have recognised that the latter is the only effective weapon which a Continental aggressor could use against us, the omission appears all the more astounding. . . ."

Every nurse should rouse up her M.P. on this question of life and death if he is contentedly doing nothing on the matter.

THE SUFFERING IS APPALLING.

Sad letters are coming through from Palestine. A devoted nurse writes from the C.M.S. Hospital, Gaza: "Somehow, these days, one seems to have lost all account of time: our minds seem to be so busy wondering what is to happen to poor Palestine. The suffering is appalling. There are many sick people unable to get to hospital for treatment. One's heart aches thinking of the suffering in the villages. No one is able to travel without the special permits from the military and identification cards, so the people just have to remain at home. We have a fully-staffed hospital here of 70 beds and only have 15 patients. Four of our nurses are Arabs, the others Armenians. I am the only English Sister. We just hope and pray that something will be done soon; one dreads otherwise to think of what this winter will bring to many. Will you think of us sometimes, struggling along in this Holy Land trying to bring relief and yet with our hands tied?"

Surely, by some means, the sick should reach the comfort of the hospital relief awaiting them. Why are we as a profession so "happened doon," so dumb and unenterprising? Palestine, Abyssinia, China, Spain—what glorious fields for service and sacrifice! Alas! we have failed to render them.

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