

tion in full every five years, with annual supplements, might prove sufficient.

It is, of course, obvious that there must be a transition period and that, since a very large number of assistant nurses are now in employment in this country, some means must be found of admitting them to the Roll. It appears to us that a certificate from the matron of the hospital where they are now employed or from the co-operation or agency through which they are engaged is the only practical way of achieving this. Evidence should be required that such women have practised nursing of the sick for at least two years and are of good character.

In hospitals and other institutions we are satisfied that assistant nurses should only be employed under the supervision of a trained nurse. It is clearly impossible to attach a similar restriction to the employment of an assistant nurse in domiciliary nursing, but what we are concerned to ensure is that the patient is aware whether or not the services received are those of a trained State Registered Nurse or an assistant nurse. We would emphasize that our recommendation that a Roll should be established for assistant nurses is contingent upon the enactment of the safeguards for the public which we discuss in paragraph 165.

We believe that the institution of a Roll of Assistant Nurses would not only help to remove existing abuses but would do something to remedy the shortage of nurses. This special work would attract older women who may find their present occupation lacking in interest or who have been detained by home duties until too late to enter any other profession, but whose qualities and experience would make them particularly suitable for the work of an assistant nurse. Thus, many State Registered Nurses would be released for work which cannot be done by assistant nurses and for which State Registered Nurses are so badly needed. Needless to say the conditions of service for assistant nurses should be such as to make this career attractive to the right sort of woman and we recommend that their rates of salary should be regulated by the Salaries Committees and that they should be eligible for pension.

Perhaps we should add that we are aware that the Committee under the Chairmanship of Lord Alness which has been considering the position of nursing in Scotland has recommended against the recognition of a grade of assistant nurse. We have no doubt that the dimensions and character of the problem are totally different in Scotland and, in view of the evidence we have received, we are satisfied that the recommendations we make are the best means of meeting the situation in this country.

The Control of Nurses' Co-operations and Agencies.

We feel very strongly that the Nurses' Registration Act, 1919, is not affording to the general public the protection which it was designed to afford, and we are of the opinion that, excepting nurses in training, no persons other than State Registered Nurses or assistant nurses entered on the Roll should, habitually and for gain, engage in nursing the sick. It has been suggested to us that, as has been done in the case of the midwifery service, legislative steps to secure this end should be taken and we desire to reserve this matter for further consideration.

At the same time, we think that it is essential that the public should, as soon as possible, be afforded fuller protection than at present exists against the practising of nursing by totally untrained persons. We consider, therefore, that it should be made an offence for any agency or co-operation acting in connection with the employment of nurses to supply for gain the services of persons for the purpose of nursing the sick whose names are not entered on the Register or the Roll, or to fail to inform the applicant for the nurse's services to which of these two categories the nurse supplied belongs. In order that this prohibition may be made effective, local authorities should be empowered to license, register and inspect all such agencies and co-operations. As we state above in paragraph 165, our recommendation for the establishment of a Roll of Assistant Nurses is contingent upon the enactment of these safeguards.

We contemplate that every nurse supplied by an agency or co-operation for domiciliary or other nursing work will present to the person on whose behalf her services are required a card or printed slip stating her qualifications and that this card or slip will be returned to the agency or co-operation on completion of her engagement, with a written indication that it has been duly presented. This is the present practice of some of the best co-operations and agencies.

Designation.

The question of the proper designation to be applied to these assistant nurses is one of considerable difficulty and no small importance. Some of our witnesses hold strongly that whatever name may be selected it should not involve the use of the term "nurse" on the ground that these women do not hold the qualifications or do the work of State Registered Nurses, to whom the word "nurse" should alone be applied in order to avoid confusion and maintain the status of the nursing profession. Other witnesses maintained that the assistant nurse was in fact a nurse, though in a limited sphere, that such nurses had done and were doing useful work and that they were fully entitled to the status given by the term "nurse," though distinction between the assistant nurse and the State Registered Nurse was highly desirable.

It has been suggested to us that the term "nurse" should be legally defined as connoting a State Registered Nurse and that the same should be done for whatever appellation might be adopted for the assistant nurse, and that persons using these names who are not entitled to them should be liable to legal prosecution.

Some of our witnesses and individual members of the Committee have suggested that the assistant nurse might be known as "nursing aid," "invalid aid," "hospital aid," "nursing assistant," etc., but on the whole it appears to us that titles of this kind would never win popular acceptance. The word "nurse" is embedded in the structure of the language and it is impossible to expect that the assistant nurse, whatever her official title, would be known to the public other than as "nurse." It follows that it is not practicable, either, to limit the use of the term "nurse" to the State Registered Nurse. It is everyday practice to designate those who take care of healthy children "nurses" whether they are qualified or not. It is, moreover,

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