

profession that recognised and comprised unqualified persons? Still in the same paragraph, it is stated that the public has no means of distinguishing between the trained and untrained nurse except by asking the nurse to state her qualification. What has happened to the Nurses' State Register? It is forgotten for the moment or fades conveniently out of sight!

This Report has much to say about "control," but wherein lies the control? "It is you" said the speaker, "who are going to be controlled." All this competition from this "large body" of unqualified women is going to reduce the demand for your services and, consequently your salaries and the number of positions open to you. Moreover, there is another point. Some of you may have noted that, on occasions when a matter of great import to the nurses has been under consideration in the General Nursing Council, the professional vote (the nurses' vote) has been considerably in the majority, but this majority becomes a minority of the Council all too often because of the inclusion of the votes of those on the Council who are not Registered Nurses. Now these Assistant Nurses will have some fee to pay for admission to the Roll, though we note that they are to be treated tenderly in this respect. Surely, if they pay this fee, they will have to be given a voice in the Council. This is in accordance with precedence and justice. But when their representatives do come on to the Council are they going to support the opinions of the Registered Nurses or that of the lay and medical members? I don't think the former will be the course they adopt, they are bound to be in competition economically and otherwise with the Registered Nurses. You will note from the Report that the fee for admission to the Roll of Assistant Nurses is to be "as reasonable as possible." There is no mention of a retention fee from them such as the Registered Nurses are called upon to pay. Presumably, they are to share our fine building in Portland Place, the services of the Registrar and many other benefits and necessities while the Registered Nurses foot the bill and meet the taxes. When the transition period is over, they are not asked to pass a written examination because (according to the Report) they could not. They are to have a test in practical nursing and it is suggested that this implies assessors who would be senior State Registered Nurses. Some of us will not think very highly of the moral, professional qualities of mind in those nurses who, for pelf, are going to contribute in this way towards the degradation of their Act. It is stated that, during the transition period, because a very large number of these unqualified persons are now being employed, some means must be found of admitting them to the Roll. Was there ever a more astounding declaration of expediency? The certificate of the matron of the hospital where they are employed, or the co-operation or agency through which they are engaged, is judged to be "the only practical way of achieving this"—in other words the proprietress of a servants' agency which supplies nurses could give the certificate that is to place these women under the protection of our Act and into competition with the Registered Nurses.

We might refer to the difference of opinion on the word "Roll" of Assistant Nurses. Unless and when the impress of the State is definitely put, the word Register, Roll and List must mean very much the same. The State Register and the State Roll will therefore mean much the same thing to the public and the nurses, for the two titles will be in effect similar and there will be endless confusion. Even before this Report left the Committee this confusion arose for the nurses on the Committee. They don't like the words "Roll of Assistant Nurses" but prefer the title "Registered Invalid Attendants." But *surely* if you use the word Registered, it implies a Register.

When we come to the paragraph dealing with Co-operations and agencies we are asked to adopt a system that belongs rather to the seventeenth century than our own. In the early part of that century the doctors were asking that they be registered by what was equivalent then to a local authority, in order to bring about distinction between them and barbers. Now they have got their Registration Act and so have we, and it is a pure anachronism to petition for interference and control from a lay body for one composed of professional State Registered Nurses. Are you to take a sort of ticket of leave from some local body before you can nurse the sick and what is meant by the "local authority"? The term is used so broadly that it is impossible to say who they are who are to control your professional Co-operations, or what sort of surprise packet you are to have if this Recommendation is adopted. Let it be made a penal offence for a Co-operation to say it is sending out Registered Nurses when it isn't doing so, just as it is for a nurse to call herself Registered when she is not, and the difficulty is got over.

In concluding Miss Macdonald said that she would beg the nurses not to be blind to this grave threat to their profession. Some are wilfully blind and some prefer to turn round and go to sleep and then their vision becomes the more blunted to like events in the future. "Do not, I beg of you," said the speaker, "be of those who see the light only when the candle (the opportunity for resistance) has gone out."

We regret that, owing to the limitations of space, we can only give the main points from the speeches of those who supported and spoke on this and the second resolution.

Resolution 1, seconded by Miss G. J. Blacklock.

In seconding that moved by Miss Macdonald, Miss Blacklock, S.R.N., said that she wished to speak mainly from the point of view of the private nurse, but first she emphasised in what directions the adoption of the Recommendation would prove a menace to the sick. Nurses would find themselves in the heartrending position very often of coming in to nurse a hopeless case in which, had they been called in earlier, careful and skilled nursing would have triumphed. She referred to the lowering of the status of the nurse in private practice that the Recommendations relating to the Assistant Nurses and Co-operations were bound to bring about. She also emphasised the serious economic depreciation that threatened.

An Expression of Medical Opinion.

Dr. Burnett Rae, speaking from the point of view of the medical man, said that if he thought that the nurses present were out to further their own interests at the expense of the sick he would not be on the platform. The medical profession believes sincerely that the honour and dignity of that profession, so far from being inconsistent with the interests of the public are in line with it, and so it is also with the nursing profession. A state of confusion, disharmony and a sense of injustice in that profession will not help the sick. Nurses have a *right* to object to any confusion of unqualified with those who are qualified and registered by the State. It is said that the proposal implies a different grade of nurse. There is no objection to "grading," but the grading should be up—not down. That is *essential* if your profession is to progress and develop. In claiming this you are only asking the conditions that obtain in other professions. Even the ministry of the Church is jealous—and rightly jealous—of its honour and of the special qualifications required of its members.

One can understand quite readily the reason for this. Recommendation of the Inter-Departmental Committee. There is a shortage of nurses. When there is not enough labour or money to go round, what is the usual remedy?—

[previous page](#)

[next page](#)