

and stamps at a railway station. She pleaded she thought the cigarette case was her own, but when she found her mistake intended taking it back to the station when she went that way.

The Council considered the case *in camera*, and postponed their judgment for 12 months from the date on which her case came before the Courts.

The case of Doris Whittaker, S.R.N. 99331, deferred by Council on October 23rd, 1942, was considered *in camera*, and the Council agreed that the case be dismissed.

Next Meeting of the Council.

The next meeting of the Council was fixed for November 26th.

REMARKS.

WEAVING THE ROPE.

It will be noted in the above report that with the sum of £472 7s. allocated to purchase further equipment for the Assistant Nurses' department, that the Registered Nurses (without their consent) have now provided £1,272 7s. 10d. for the organisation of semi-trained women, competition with whom will soon become a serious economic question.—weaving the rope of our own demise, indeed!

We learn that Miss R. Dreyer, the naturalised German-Swiss-born Matron-in-Chief of the London County Council, is a very active member of the Assistant Nurses' Committee.

Our claim is that not one penny of the Registered Nurses' fees should be expended upon the organisation of the Nurses' Act, 1943—and that the Ministers of Health and Labour should have inserted in their de-grading Act provision by the Treasury for financing it.

NURSES ACT, 1943 (SECTION 18)—LIST OF NURSES.

The Nurses Act, 1943, requires the General Nursing Council to form and keep a List of any persons not being registered nurses or enrolled assistant nurses, who, within two years from the passing of this Act, apply, on a form provided for the purpose by the Council, for admission to the List. The List will be opened on November 1st, 1943. Applicants for admission to the List must hold *Certificates* issued by institutions which appear to the Council to be satisfactory for the purposes of this provision stating that they completed before the beginning of July, 1925, a course of training in nursing in the institution, and who satisfy the Council that they are of good character and have adequate knowledge and experience of nursing.

The fee for admission to the List is one guinea. Forms of application may be obtained on and after November 1st, from the Registrar, General Nursing Council for England and Wales, 23, Portland Place, W.1. Requests for forms should be accompanied by an addressed envelope.

GENERAL NURSING COUNCIL FOR SCOTLAND.

A meeting of the General Nursing Council for Scotland was held at the office in Edinburgh on October 22nd, 1943. Sir John Lorne MacLeod, G.B.E., LL.D., was in the chair.

We regret we did not receive the report until too late to insert it complete. Representatives were appointed to attend a Conference in London on November 19th next with the General Nursing Council for England and Wales.

Assistant Nurses' Committee.

The Council appointed Miss Jack, Miss Kaye, Miss Robinson, Dr. Clark, and Sir John Lorne MacLeod, to serve on the Assistant Nurses' Committee.

The same unjust provision in Rule 19 of the Nurses (Scotland) Act pertains as in England.

The General Nursing Council for Scotland may expend fees subscribed by Registered Nurses in support of the Assistant Nurses Roll if necessary.

THE INTERNATIONAL COUNCIL OF NURSES.

Dean Effie Taylor, R.N., President, International Council of Nurses, who is very anxious to keep the interests of the Council alive, writes from New Haven, U.S.A. :—

"I have received word from many more than a quorum of our Board Members and have consequently requested Miss Schwarzenberg to take up her duties as Executive Secretary of our Council. This had to be decided at this particular time because Miss Banworth is planning to take graduate work in Public Health, and we had to come to some decision. . . . I wish that I might go over and see you all. I cannot tell you how much I miss my dear friends in England. Things look brighter just now, and it is to be hoped that in the not too distant future we shall all meet again and all our little problems will fade into insignificance, as once again in peace and harmony we strive for the advancement of our profession. . . . Miss Schwarzenberg and I are looking forward to doing what we can this coming year to keep our Council Members together and advance the interests of our profession in every country where it is possible for us to make connections."

The only possible policy for the I.C.N., in our opinion, at the present time, is to keep its invaluable principles alive until such time as it can meet in peace—*let us hope for ever.*

In the meantime, we hope Miss Schwarzenberg is recording its history from 1925, as a continuation of its wonderful achievements from its foundation in 1899 to 1925—already recorded by its Founder and the late Margaret Breay, its Treasurer for 20 years, and which can be obtained from the National Council of Nurses' Office, 19, Queen's Gate, London, S.W.7, price 5s.

Next month we shall place on record the letters of greeting sent by Miss L. Dock, Miss M. Adelaide Nutting, and other American leaders of nursing, read at the Fiftieth Anniversary of the League of Nursing Education at Chicago. They make history. In the meanwhile, we place on record the great good news of the decision that "Nursing standards could not safely be lowered."

GOOD NEWS—NO APOLOGIES.

Not all the banquet programme was devoted to the past. Said the President, Miss Goostray, in part :—

"In these fifty years of our history, society has witnessed dynamic changes in its social, economic, and industrial life. Perhaps none of them has been so far-reaching as the changes which will come in the decade following the present war and, I believe, we shall see established a system of nursing education for whose educational soundness we shall have to make no apologies."

THE PRESENT.

The major problems discussed during the three days seemed to those observers present to be (1) Closer relationship with lay groups and thus with the community; (2) technique and problems associated with acceleration of the curriculum; (3) maintaining and raising standards of care and education; (4) centralisation of nursing education in co-operation with colleges and universities and the effects of closer university affiliation upon nursing education and recruitment.

STANDARDS.

In none of the discussions of the accelerated programme was there any suggestion that standards of Nursing education service could safely or desirably be lowered—although, admittedly, hospital nursing services are greatly pressed at the present time.

The above statement is indeed most encouraging to those of us who are out to prevent de-grading of Nursing standards in Great Britain, inevitable under the Nurses Acts, 1943—if not opposed. Construction, not destruction, must be our policy.

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