ment to register agreement with their plea that the moment the fighting ends the regulations shall go.

They are convinced that this is the will of the great majority of the people of Britain.

The immediate cause of the new move is the mention in the Government's employment White Paper of the need for the retention of controls as part of the plan to stabilise prices for a time after the war.

No class of professional workers has suffered such disastrous injury as the Registered Nurses during the War. Love of control by Ministers of women's work of which they know nothing. In this connection we have before us the portraits of Mr. Ernest Brown—late Minister of Health, Mr. Ernest Bevin, Minister of Labour—and Lord Horder—responsible for the de-grading of standards of nursing efficiency through the Nurses' Act, 1943, which constitutes the Minister of Health an absolute autocrat where nurses are concerned. We propose to write a short pamphlet on the subject when its injurious policy, in all its absurdity, will be made manifest.

In the meanwhile let us do everything in our power to have a young, fresh House of Commons when the election of a new Parliament takes place—let our motto be "No autocratic control. Consult the Will of the people."

## THE REGISTER OF NURSES, 1944.

The Register of Nurses, printed and published under the direction of the General Nursing Council for England and Wales in pursuance of the Nurses' Registration Act, 1919, appears in three volumes, and contains the names, qualifications and addresses of nurses on the General Part of the Register, and Volume 3, those of nurses in the Supplementary Part—Male, Mental, Mental Defectives, Sick Children's and Fever Nurses. It is indeed a monumental work, and is, as usual, excellently printed and produced, and contains the records of upwards of 100,000 nurses. We greatly admire and value the volumes sent to us as a gift, which have a special antique stand in our office, and will, no doubt, be in constant use.

The price of the Register is £2 2s., and should be available in all Public Libraries for the use of the community. That the House of Commons library did not contain these volumes, may be the reason that our legislators and their staff appear vastly ignorant on the professional status and invaluable work of Registered Nurses.

## THE PASSING OF A GREAT LADY.

Those of us who remember the Victorian Era learned with sorrow of the death of Her Royal Highness the Princess Beatrice, youngest and last surviving child of Queen Victoria.

She was a great lady, sympathetic with suffering, a devoted daughter, wife and mother, an example to the women of the Empire, who deeply sympathised with her in her many sorrows. In her this country and Empire loses a royal Princess who upheld with dignity the fine Victorian traditions; and those of us brought up in those traditions, mourn her loss sincerely.

## RISKS TO HEALTH.

We note in the daily Press that three Chairmen of leading London hospitals have recently drawn attention to the shortage of domestic labour in institutions with which they are connected, and the resulting difficulty of adequate cleanliness. It takes little imagination to realise the consequent risks to health in the domestic department.

For instance, how about dish-washing, a necessary

daily performance?

This reminds us of an interesting article we read recently in the Journal of the Western Australian Nurses, A.T.N., under the heading "Spread of Infection: Through Poor Methods of Dish Washing":—

In an investigation into the spread of influenza

In an investigation into the spread of influenza through improper washing of dishes, it was found that there were twice as many cases amongst that group who rinsed their dishes in luke-warm water, against the group whose dishes were washed with soap and hot water. One study, by experimenters named Curry, Howoritz and Horning, gave the following culture results from washed dishes in U.S.A.:—

Restaurants. Drug Stores. Taverns.

| Streptococci        | 6.1%  | 4.0%    | 33.0% |
|---------------------|-------|---------|-------|
| Staphylococci       | 20.2% | 20.0%   | 31.0% |
| Pneumonococci       | 1.5%  |         | 10.0% |
| Typhoid Colon Group | 7.6%  | . 28.5% | 37.0% |

Unfortunately, information available is not complete, but one is led to surmise that utensils used in the last group (taverns) were of glass, and so gave a higher percentage of germs collected, because of inadequate means of sterilising by boiling water.

Germs of tuberculosis, trench mouth, and the virus of influenza are difficult to cultivate from such sources. Every day there are people eating and drinking in our public restaurants, whose mouths are hot-beds of infection of all types from 'flu and common cold, to syphilis and T.B.

How much the spread of infection of these diseases is due to improper dish-washing cannot be estimated.

Although many germs do not live long, the quick turnover in the use of utensils during the rush hours leaves much to be desired in their cleansing. Especially is this so in milk bars and soda fountains, where glasses are subjected to a brief flushing and a mere rubbing up on a cloth which is far too often moist and overworked.

The only safe means of protection is to institute someform of sterilisation which is easily worked and easily understood.

Once when a girl was asked not to unseal and handle toothbrushes marked "sterile" in a Perth store, she replied, "Oh, that is only a trade name." People who operate gadgets for sterilising drinking vessels should understand the process that they carry out.

Drinking glasses demand the first consideration. Practically everyone uses a glass. They are easily broken and chipped, and also they come into direct contact with the lips, and cannot be scalded as can forks, spoons and cups.

Dr. H. H. Williams, the Commissioner of Health in Dayton, Ohio, commenced experiments in 1924 to solve this problem. Inspectors were sent around the various.

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