The British Journal of Mursina

## The Midwife.

## Central Midwives Board.

## Report of the Work of the Board for the Year Ended March 31st, 1948.

Although during the year under review the development of new policy has been inevitably delayed in view of the administrative reorganisation of the health services of the nation in readiness for the appointed day and by the expec-tation of early publication of the Minister's Midwifery Working Party report, the Board has, nevertheless, had an extremely busy year. The new edition of its Rules came into effect on October 1st, 1947, the first complete Midwives Roll since 1938 was published, the first post-war full-time residential course for the Midwife Teachers Diploma was commenced and the training of midwives in gas and air analgesia was vigorously pressed forward.

Rules regulating, supervising and restricting within due limits the practice of midwives.—The revised section E of the Board's rules, referred to in the last Annual Report, came into effect with the approval of the Minister of Health on October 1st, 1947. In issuing the Rules to local super-vising authorities the Board drew attention to the principles laid down in the new section.

In view of the manifest changes and improvements which have been brought about in recent years in the midwifery services of the country, the Board considered that the time had arrived to implement as far as practicable the views of the Departmental Committee on the Training and Employment of Midwives (1929) in so far as they were applicable to section E of the Rules.

Relevant sections of this Committee's report are :-

"We have reached the conclusion that the time has arrived when the present system of discipline, based as it is on a code of rules setting out in precise language what a midwife may and may not do, should be reconsidered and, we suggest, superseded. Such a code was, no doubt, necessary in the past, but we cannot regard the mode of its application as altogether consistent with the improved status and responsibility of the midwife which we believe it is in the national interest to promote. "To continue to apply the punitive methods suitable for

former days to the midwife of the present, and, more especially, of the future, would probably prove to be a mistaken policy—a policy which would militate in no small degree against the raising of her status to the level which all agree is her proper right and due. It is of doubtful wisdom to seek to apply, as criteria on which a midwife shall be punished for a dereliction of duty, rules purporting to cover, so far as human ingenuity can devise, every possible contingency that might be thought necessary to circumscribe her practice within proper limits,"

The Board's view is in accord with the finding of the Departmental Committee referred to above.

The rules which remain in section E are those which-

(i) relate to the duties required of a midwife under the

Midwives Acts, 1902-1936 and other statutes; and (ii) are framed to assist and direct the midwife in complying with the requirements of a local supervising authority in the execution of its powers and duties under the Midwives Acts, 1902-1936, and particularly those referred to in section 8 of the Midwives Act, 1902.

In the Board's view, the rules which are contained in the new section E of the rules are the minimum which are necessary to ensure a satisfactory standard of midwifery

practice, and to enable the local supervising authority to administer the service.

The notices concerning a midwife's code of practice are supplementary to the rules and are formulated for the guidance and protection of the midwife in carrying out the duties for which she is qualified and which she is legally entitled to undertake. These notices have been designed to recapitulate in a revised and rearranged form such of the rules referring to midwifery technique and practice as are set out in the old section E of the rules and which the Board has removed from the new rules.

The notices have been drawn up as briefly as possible in the belief that it is far more effective to indicate broad principles, for example : one instance of treatment outside a midwife's province, illustrations of the drugs which a midwife may carry and use, and so on. With particular reference to the notice on use of drugs, the Board has made a rule that a midwife must not on her own responsibility administer or use any drug, unless in the course of her obstetric training, whether before or after enrolment, she has been thoroughly instructed in its use and is familiar with its dosage and methods of application. Subject to this general ruling and the requirements of the Dangerous Drugs Regulations, the list indicates the general nature of the drugs which the Board considers a midwife may safely carry and use on her own responsibility.

Similar considerations apply in the notice on duties to the child. The Board regards it as a midwife's duty to take such steps to protect the eyes of the infant at the time of birth as the responsible medical authority considers necessary and desirable, but the Board no longer proposes to lay down a silver preparation as being the only prophylactic measure to be used for this purpose.

Roll of Midwives .- There were 76,872 names on the Roll of Midwives at March 31st, 1948, being 2,653 more than at March 31st, 1947.

During the year under review the Board was advised that it should carry out its statutory duty to publish the Roll of non-practising midwives, which had not previously been published since 1938. (Section 3(r) of the Midwives Act, 1926, requires this part of the Roll to be published every five years but the operation of this Section was suspended by Emergency Regulation until 1946.) The published Roll of non-practising midwives contains the names and lastknown addresses of some 53,996 midwives whose names were on the Roll at December 31st, 1945, but who did not practise during that year. Owing to the difficulties and delays of printing and publishing this Roll was not finally published until December, 1947.

The labour involved was considerable and the expense, which has not yet been finally ascertained from the Stationery Office, is likely to be appreciable. The Board considers that the benefits resulting from the publication of a complete Roll, i.e., a Roll containing the names of non-practising as well as practising midwives, do not justify this labour and expense and it will seek to be absolved from this statutory duty before 1953. In the meantime, however, each local supervising authority is required by Section 8 (5) of the Midwives Act, 1902, to maintain a copy of the Roll available for public inspection. Some authorities are obviously reluctant to purchase a document parts of which appear already to be out of date and to have little practical value.

Midwives Notifying Intention to Practise in 1947.--17,400 midwives notified their intention to practise in the year ended December 31st, 1947, in accordance with Section 10 of the Midwives Act, 1902. This is the highest number of

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