SECTION I.—ORDER OF REFERENCE, ITEMS 1, 4, AND 6

To consider and recommend standards of care for mothers and infants in State and private maternity hospitals, wards, and annexes.

How best to establish uniformity in maternity nurse training, pediatric care, and research.

To what extent have nursing standards in obstetrical care been affected consequent upon staffing difficulties?

The Conference first discussed the questions of the standards laid down for the care of mothers and infants in all maternity institutions.

The Director of the Division of Nursing indicated in detail (Addendum II) the steps that had been taken to ensure a uniform high standard of teaching and practice in all such institutions. It was explained that this was largely governed by the detailed instructions laid down in the two pamphlets, H-Mt. 20, "The General Principles of Maternity Nursing, including the Management and Aseptic Techniques of Labour and the Puerperium," and H-Mt. 18, "The Technique of Isolation, Medical Asepsis and Disinfection of Maternity Hospitals." These instructions not only guided the training and examination of all pupil maternity nurses and midwives, but were also applicable to the practice of all non-training private maternity hospitals and to the open annexes of Board Hospitals. They were enforced by regular inspections. In the periodic revision of these pamphlets authoritative professional opinion was sought on all the matters involved and overseas developments were considered. The practice of private maternity hospitals was further controlled by regulations laid down in H-Mt. 33, "Regulations Governing Private Hospitals"; the same regulations apply, by decision of the controlling authorities, in a number of open annexes of Hospital Boards.

The Conference was satisfied that the requirements were sound and thorough and had in the main been successful in their purpose. It was clear that the tribute paid to

the nursing staffs by the Director-General of Health was warmly endorsed.

Nevertheless, it was evident, however excellent the maternity provision made by many Hospital Boards may be, that there was some ground for uneasiness and uncertainty regarding the powers of application and enforcement of standards in certain Hospital Board institutions, particularly the "closed" portions, to which it is recognized that the regulations in H–Mt. 33 in their present form cannot possibly be applied. The Director of Maternal Welfare gave some specific instances which, if proved, could not but be regarded as serious departures from the generally accepted standards and which she considered to be largely due to the fact that the same supervisory authority which was applicable to private maternity hospitals did not apply to the "closed" wards of public hospitals.

The Conference was in no position to investigate the instances referred to by Dr. Gordon, and certain of them were emphatically denied by other members. It appeared to the Conference that such imperfections as had occurred had been isolated and exceptional and due to a necessity to accept admissions in the face of difficulties of accommodation and staffing; that there was no evidence that any harm had come to any maternity patient in any of the instances referred to; and that such imperfections were in certain cases at any rate temporary and were rectified at the first opportunity. Nevertheless, the Conference felt that steps should be taken to end any possible confusion and to

correct any anomalies.

The Conference, therefore, resolved—

"That every child-bearing mother and every new-born infant shall be cared for under standardized regulations no matter where they are nursed, and that to this end the existing regulations be revised."

A very full discussion took place in which the importance of developing special departments for the handling of abnormal obstetric-cases in all hospitals of any size was emphasized. These units would operate on the "closed" principle and would be