EXPLANATORY NOTE

(This Note is not part of the Order, but is intended to indicate its general purport.)

This Order relates to superannuation and other benefits to and in respect of members of the civil staffs employed under the Commissioner of Police of the Metropolis and the Receiver for the Metropolitan Police District and members of the staffs of the Metropolitan Police Courts. The Order, except Article 8, applies, with the necessary adaptations set out in the Schedule, most of the provisions of the Superannuation Act, 1949, which makes fresh provision as to the superannuation and other benefits to and in respect of persons in the civil service of the State. Part I applies the provisions of Part I of the Act regarding pensions to widows, children, etc., and the contributions to be made: Part II applies the provisions of Part II of the Act regarding pensions to nominated dependants and the contributions to be made: Part III, except Article 8, makes miscellaneous amendments in the Orders of the Secretary of State regarding the superannuation and other benefits to and in respect of the above-mentioned staffs, corresponding to the miscellaneous amendments made in the Superannuation Acts by Part III of the Act: Article 8 makes provision in regard to the staffs corresponding to section 2 of the Superannuation Act, 1946, which relates to the superannuation of late entrants to the civil service: Part IV applies the relevant provisions of Part IV of the Act which contains supplemental and general provisions and provisions as to certain special classes of case. By virtue of the power given by section 52 (2) of the Superannuation Act, 1949, certain provisions of the Order, in particular Article 1(1), which relates to the application of Part I of the Act, are made to take effect as from the 14th July, 1949, that is to say, the date of the passing of the Act.

MIDWIFE, ENGLAND

The Midwives Rules, Approval Instrument, 1949

1949 No. 1800

Made - - - - 23rd September, 1949

MH 109649.

Whereas the Central Midwives Board have framed Rules under the Midwives Acts, 1902 to 1936 to supersede all former Rules made by the Board thereunder;

And Whereas the Rules so framed by the Board as aforesaid are set out in the Schedule to this Instrument:

Now, therefore, the Minister of Health, in exercise of his powers under section 3 of the Midwives Act, 1902(a), and of all other powers enabling him in that behalf, hereby approves the said Rules so framed by the Central Midwives Board as aforesaid.

This Instrument may be cited as the Midwives Rules, Approval Instrument, 1949.

(a) 2 Edw. 7. c. 17.

SCHEDULE

GENERAL

1. These Rules may be cited as the Midwives Rules, 1949, and subject as hereinafter provided, shall come into operation on the first day of October, 1949.

2.—(i) In these Rules, unless the context otherwise requires, the following expressions have the meanings hereby respectively assigned to them:—

" Board " means the Central Midwives Board ;

" Midwife " means a woman whose name is on the Roll of Midwives ;

" Secretary " means the Secretary of the Board.

(ii) The Interpretation Act, 1889, applies to the interpretation of these Rules, as if these Rules were an Act of Parliament.

3. Section G of these Rules shall only come into operation on a date to be fixed by the Board, with the prior approval of the Minister of Health, which date shall not be a date less than twelve months after the date of the Minister's approval.

4. All former Rules made by the Board under the Midwives Acts, 1902 to 1936, are hereby revoked and section 38 of the Interpretation Act, 1889, shall apply to this revocation as if such Rules were an Act of Parliament.

SECTION A

RULES REGULATING THE PROCEEDINGS OF THE BOARD

Chairman and Vice-Chairman

1. A Chairman and Vice-Chairman shall be elected by ballot at the first ordinary meeting of the Board in the month of April in each year, and shall hold office until the first ordinary meeting in the month of April in the year following.

Casual Vacancies

2. Should the office of Chairman or Vice-Chairman fall vacant during the year, it shall be filled by election at the next ordinary meeting of the Board, and the member so elected shall hold office for the remainder of the year for which his predecessor was elected.

Meetings

3. The Board shall meet in each month, unless otherwise decided at a previous meeting, on a day to be fixed to suit the convenience of their members and at such other times as may be necessary. The Chairman or, in his absence, the Vice-Chairman may at any time convene a meeting of the Board, and the Secretary shall convene a meeting if required to do so by any three members of the Board by writing under their hands.

Notice

4. Not less than four days' notice of any meeting shall be given to each member of the Board, directed to such address as he or she may from time to time furnish to the Secretary.

Quorum

5. The quorum at a meeting of the Board shall be four.

Order of Business

6. The order of business at a meeting of the Board shall be as follows:—

(1) Minutes of the last meeting.
(2) Correspondence.
(3) Reports of Committees.
(4) Notices of motion.
(5) Business arising directly under the Acts.
(6) Statement of Accounts.
(7) Bills and claims.
(8) Any other business.
(9) Date of next meeting.

Provided that the Board may at any meeting vary the order of business on the ground of urgency or convenience.

Absence of Chairman and Vice-Chairman

7. In the event of the Chairman and Vice-Chairman not being present at any meeting of the Board, the Board shall elect a presiding Chairman for that meeting.

Agenda

8. No business which is not upon the Agenda Paper shall be discussed at any meeting of the Board (except routine business) unless the Chairman of the meeting shall declare such business to be of an urgent nature, and shall be supported by two-thirds of the members present and voting.

Voting

9. Every question, the manner of voting on which is not otherwise specified in these Rules, shall be decided on a show of hands by a majority of members present and voting, but any member may, except when the Board are sitting in Penal Meeting, call for a division, in which case the names for and against shall be taken down in writing and entered on the Minutes. In the case of an equality of votes the Chairman of the meeting shall have a second or casting vote.

Motions

10. Every motion or amendment shall be moved and seconded, and shall be reduced to writing and handed to the Chairman of the meeting (if so required by him), and shall be read, before it is further discussed or put to the meeting.

Notices of Motion

11. Every notice of motion shall be in writing, signed by the member giving the notice, and shall be given or sent to the Secretary, who shall insert in the Agenda Paper of the next ordinary meeting of the Board all notices of motion which he may have received, not less than one clear day prior to the day on which the Agenda Paper is sent out to members, in the order in which they have been received by him.

Rescinding of Resolution

12. No resolution of the Board shall be altered or rescinded at a subsequent meeting except upon a notice of motion of which a copy has been sent out to members by the Secretary fourteen clear days before such meeting.

Committees

13. There shall be the following Committees of the Board:—

(1) A Standing Committee consisting of the whole Board.
(2) A Penal Cases Committee.
(3) A Finance Committee.

The two latter Committees shall be appointed annually at the first ordinary meeting in the month of April, and shall hold office until their successors are appointed. Other Committees may be appointed for special purposes from time to time.

Reports

14. Every Committee appointed by the Board shall make a report of their proceedings to the Board, and the recommendations of every Committee shall, so far as practicable, be in the form of resolutions, to be considered by the Board; and the acts and proceedings of every Committee shall be submitted to the Board for approval, unless the resolution of the Board appointing the Committee shall otherwise direct in respect of all or any of the matters referred to it.

Every report from a Committee shall be submitted by the Chairman of the Committee (if present) who shall move that it be received by the Board, and on the motion being carried, the Chairman, or any other member of the Committee, may move to agree with the resolutions of the Committee, and such resolutions shall be considered *seriatim*. And the question that the report (if necessary as amended) be now approved shall be put from the Chair, but no debate shall be allowed thereon.

Bills and Claims

15. All bills and claims shall be examined by the Secretary and laid by him before the Finance Committee, who shall report them to the Board, and such bills and claims as are allowed shall be initialled by the Chairman of the meeting.

Cheques

16. All cheques for the payment of money shall be signed by two members of the Board, and countersigned by the Secretary or by the Assistant Secretary in the absence of the former.

Financial Statement

17. At every Monthly Meeting of the Board the Secretary shall present a statement in writing showing the receipts and expenditure of the Board for the current year up to the date of such Meeting, and showing the existing balance, if any, to the credit of the Board.

Decision of Chairman

18. The Chairman of the meeting shall decide upon any point of order or procedure, and his decision shall be final.

SECTION B

RULES REGULATING THE COURSE OF TRAINING, THE CONDUCT OF EXAMINATIONS, THE REMUNERATION OF EXAMINERS, THE ISSUE OF CERTIFICATES, AND THE CONDITIONS OF ADMISSION TO THE ROLL OF MIDWIVES

General

1. In the Rules of Section B, unless the context otherwise requires, the following expressions have the meanings hereby respectively assigned to them:—

"approved training institution" means an institution approved by the Board in accordance with the provisions hereinafter contained for the training of pupils, and in relation to either the first or second period of training means an institution approved in respect of that period;

"lecturer" means a person approved by the Board in accordance with the provisions hereinafter contained as a lecturer in subjects in which instruction is required by these Rules;

"teacher" means a person approved by the Board in accordance with the provisions hereinafter contained as a teacher of pupils, and the words "a teacher" may be read as referring to two or more such persons;

"the prescribed form" means such form as may be prescribed by the Board from time to time;

2.—(*a*) Notwithstanding anything hereinafter contained, the Board may refuse to register as a pupil, or to admit to examination or to the Roll of Midwives, or to issue a certificate to, any woman whom they consider to be physically, mentally, or morally unfit to be a midwife.

(*b*) In the event of a woman proposing to become a pupil or being a pupil presenting to the Board a birth, baptismal, marriage, or other certificate required by these Rules, which has been altered or falsified in any way, the Board shall be entitled to postpone her registration as a pupil or her admission to examination, or to refuse to register her as a pupil or to admit her to examination or to the Roll of Midwives.

3. The Board may dispense with the requirements of the Rules of Section B in any case in which they think fit.

Registration of Pupils

4. A woman proposing to become a pupil shall apply through the approved training institution at which she proposes to take the first period of her training to the Board, on the prescribed form and in her own handwriting, to have her name entered upon the Register of Pupils maintained by the Board, and shall at the same time produce—

(*a*) (i) if her name appears on the general part of the Register of the General Nursing Council for England and Wales, the General Nursing Council for Scotland, the Joint Nursing and Midwives Council for Northern Ireland, or the General Nursing Council for Eire, or on the part thereof containing the names of nurses trained in the nursing of sick children, by virtue of having passed the Examination of one of those Bodies or some other Examination recognized by the General Nursing Council for England and Wales, and she has had at least three years' training, or any equivalent therefor which may from time to time be recognized by the General Nursing Council for England and Wales, *evidence, satisfactory to the Board, that she has fulfilled the foregoing requirements; or*

(ii) in any other case, *evidence, satisfactory to the Board, as to the general education which she has had;*

(*b*) *a certificate of birth or of infant baptism,* or such other evidence as to her age as is satisfactory to the Board, and, if she is or has been married, *the certificate of marriage,* or such other evidence of marriage as is satisfactory to the Board; and

(*c*) *two certificates of good moral character* from persons of responsible position to the effect that they have known the applicant for a period of at least 12 months immediately prior to the date of her application, and that they are satisfied that she is trustworthy, sober, and of good moral character.

5. A woman shall not be registered as a pupil if she is under the age of 20 years or, save at the discretion of the Board in exceptional cases, if she is over the age of 40 years.

6. The names of all pupils who have been on the Register of Pupils for 5 years and have not been admitted to the Roll of Midwives shall be erased therefrom. The Board may, however, restore to the Register, for such period as they think fit, any name so erased.

7. A report from the approved training institution shall be made to the Board within 6 calendar months from the beginning of a pupil's first period of training if the general education of the pupil is inadequate or she is otherwise unsuited to be a midwife. On consideration of such a report the Board may remove the name of the pupil from the Register of Pupils.

COURSE OF TRAINING

8.—(*a*) The training of a pupil shall comprise theoretical, practical and clinical instruction and attendance on, and nursing of, cases. Such training shall be at approved training institutions and under lecturers and teachers and shall be in two periods: (i) a first period which the pupil shall complete before presenting herself for the First Examination, and (ii) a second period which the pupil shall complete before presenting herself for the Second Examination;

(*b*) All practical instruction shall be carried out under the supervision of a teacher.

9. A pupil must, except during such holidays as may be permitted by the Board, devote the whole of both periods of her training to preparation for her examinations, and must not be engaged on any other work of whatsoever nature.

10. A pupil shall not begin her training until she has been notified by the Secretary that her name has been entered on the Register of Pupils, and immediately she begins the first period of training she shall forward to the Board a certificate signed by a teacher as to the date of the beginning of training. The Board may, however, waive compliance with this Rule in such cases as they think proper.

11. The first period of training shall extend over 6 consecutive calendar months in the case of pupils to whom Rule B. 4 (*a*) (i) applies and over 18 consecutive calendar months in all other cases.

12. A pupil whose first period of training extends over 6 consecutive calendar months shall during such period—

(*a*) attend a course of at least 38 lectures on the subjects enumerated in Rule B. 36, such course to extend over the whole of the period of training and to be supplemented by practical demonstrations and tutorial classes; at least 5 of the lectures and some of the practical demonstrations must be on the subjects enumerated in Rule B. 36 (*m*) and (*n*);

(*b*) conduct antenatal examinations on not less than 50 pregnant women and receive instruction in the care and supervision of women during the course of pregnancy, including the booking of cases and the keeping of records;

(*c*) receive clinical instruction in the conduct of labour, including the witnessing of not less than 10 labours;

(*d*) attend not less than 10 labours within the approved training institution, making full examination, including abdominal palpation, during the course of labour and personally delivering the child and afterbirth;

(*e*) attend and nurse not less than 20 lying-in women and their children, in the case of patients nursed in the approved training institution during the time the patients are in such institution and in the case of patients nursed in their own homes during the 14 days immediately following labour.

13. A pupil whose first period of training extends over 18 consecutive calendar months shall—

(*a*) during a period extending over not less than the first 6 months of her training—

(i) receive theoretical and practical instruction in the elementary principles of general nursing, the use of nursing appliances and the methods of taking and recording the pulse-rate, the temperature, and the respiration-rate, and

(ii) attend a course of theoretical and practical instruction in general anatomy, in the subjects enumerated in Rule B. 36 (*a*), (*b*) and (*c*), and in the physiology and hygiene of the normal infant;

(*b*) during the succeeding months of her training—

(i) attend a course of at least 38 lectures extending over a period of not less than 6 calendar months and otherwise complying with Rule B. 12 (*a*); such lectures to be supplemented by practical demonstrations and tutorial classes;

(ii) conduct antenatal examinations and receive instruction in accordance with Rule B. 12 (*b*);

(iii) receive clinical instruction in the conduct of labour, including the witnessing of not less than 20 labours;

(iv) attend not less than 10 labours in accordance with the provisions of Rule B. 12 (*d*);

(v) attend and nurse not less than 40 lying-in women and their children, in the case of patients nursed in the approved training institution during the time the patients are in such institution and in the case of patients nursed in their own homes during the 14 days immediately following labour.

14. On beginning her second period of training a pupil shall forward to the Board a certificate, signed by a teacher, giving the name of the approved training institution at which the training will be received and the date of the beginning of training.

A pupil may begin the second period of training after completing the first period and prior to passing the First Examination, but, if she is not successful at the First Examination on the first occasion on which she is entitled to enter for it, any part of the second period of training which she may have completed before passing the First Examination shall not be counted towards the period prescribed in Rule B. 16. Instruction received in the administration of nitrous oxide and air analgesia may, however, be counted towards that prescribed in Rule B. 17 (*b*).

15. A pupil who does not begin the second period of training within 6 months of passing the First Examination may be required by the Board to receive such further instruction, prior to beginning the second period, as the Board may prescribe.

16. The second period of training shall extend over not less than 6 consecutive calendar months *in all cases* and the pupil shall during such period—

(*a*) attend not less than 5 lectures delivered by one or more lecturers on the subjects enumerated in Rule B. 37;

(*b*) attend and take responsibility for the antenatal care of not less than 20 pregnant women, such responsibility including the booking of cases, the keeping of records, and the reporting of cases;

(*c*) attend and take responsibility for not less than 20 women during labour. Some of these cases may be taken at an approved training institution but at least 10 must be attended in the patients' own homes;

(*d*) attend and nurse not less than 20 lying-in women and their children. At least 10 of these must be attended and nursed in the patients' own homes during the 14 days immediately following labour. A case attended and nursed in the approved training institution must be attended and nursed during the time the patient remains in such institution;

(*e*) attend during at least five sessions at a Maternity and Infant Welfare Clinic approved by the Board for the purpose, and receive, at the clinic or elsewhere, practical instruction in the care and management of children, with special reference to the first month of life;

(*f*) attend clinical demonstrations on venereal diseases or lecture demonstrations on this subject which must be illustrated by means of films, slides or diagrams in colour, including instruction in the facilities provided for treatment.

17.—(*a*) During the second period of training, the pupil must keep careful and detailed records, in such form as the Board may prescribe from time to time, of all work done and training received (including full notes on mother and child). Such records shall be signed by a teacher as the Board may require.

(*b*) During either the first or second period of training a pupil-midwife shall receive theoretical and practical instruction in the administration of nitrous oxide and air analgesia as follows—

(i) 3 lecture demonstrations by a specialist anaesthetist, one of these lectures to include the emergencies of anaesthesia and the care of the unconscious patient;

(ii) the administration of nitrous oxide and air to at least 15 patients in labour by means of an apparatus approved by the Board under the general supervision of a specialist anaesthetist and under the detailed supervision of a midwife who is well qualified in the use of the apparatus or a resident medical officer who is similarly qualified.

It shall be the responsibility of the institution approved to provide the second period of training to ensure that a pupil-midwife has in fact received this instruction in nitrous oxide and air analgesia prior to entering for the Second Examination, and that certificates to this effect are submitted in accordance with Rule B. 32.

18. If in either the first or second period a pupil's training is interrupted owing to her own illness or other grave emergency the Board, on application made by the pupil through a teacher, may allow, subject to such conditions as they think fit, the training taken prior to the interruption to be counted towards the prescribed period of training. Every application must be accompanied by a medical certificate, or other evidence satisfactory to the Board, according to the nature of the emergency.

In cases of interruption of training for reasons other than illness of the pupil, grave emergency or the holidays permitted by the Board, the training received prior to such interruption cannot be counted.

Approval of Training Institutions

19. Applications for the approval of institutions for the training of pupils shall be submitted to the Board in the prescribed form.

20. An institution shall not be approved in respect of the first period of training unless—

(*a*) at least 500 confinements take place in it annually;

(*b*) it has antenatal beds and associated with it an antenatal clinic and a postnatal department;

(*c*) the medical staff includes one medical practitioner with special experience, satisfactory to the Board, in obstetric work; and.

(*d*) there is a resident medical officer, who may, if approved by the Board as of sufficient seniority and experience, also satisfy the requirement set out in (*c*):

provided that the Board may approve any institution which does not satisfy the foregoing requirements if such action appears to the Board to be desirable in the interests of the training of pupils.

21.—(*a*) An institution shall not be approved in respect of the second period of training unless the number of confinements dealt with annually within the institution and in districts associated with it for training purposes is at least 300, of which at least 100 are district cases; provided that the Board may approve an institution which does not satisfy these requirements if such action appears to the Board to be desirable in the interests of the training of pupils. An institution approved in respect of the first period of training may be approved also in respect of the second period of training.

(*b*) An institution shall not be approved in respect of instruction in the administration of nitrous oxide and air unless—

(i) the institution is one training pupil-midwives or medical students or is providing post-certificate courses for midwives or holding postgraduate courses for medical practitioners, or is otherwise considered by the Board as suitable for approval;

(ii) the institution has attached to it a specialist anaesthetist;

(iii) the resident medical officer or the midwife who would undertake the detailed supervision of the practical work is fully qualified in the use of the nitrous oxide and air apparatus on which the instruction at the institution will be based;

(iv) the institution is in a position to provide instruction of a high standard.

22. The Board in approving institutions shall take into consideration the number and the qualifications of the members of the permanent medical and nursing staff, the equipment for teaching purposes, the facilities for study by the pupils, and all other matters having relation thereto. The Board may cause the institution and the training therein to be inspected by a member or an officer of the Board or other competent person, whose report shall be considered when the question of approval is determined.

23. The Board may at any time limit the number of pupils in training at any one time in an approved training institution.

Approval of Lecturers and Teachers

24. Applications for the approval of persons as lecturers and as teachers shall be submitted to the Board in the prescribed form.

25. Unless the Board otherwise determine in any particular case, a person shall not be approved as a lecturer—

(*a*) in the subjects for the first period of training other than those enumerated in Rule B. 36 (*m*) and (*n*) unless he is a registered medical practitioner whose time is wholly devoted to obstetric and gynaecological work;

(*b*) in the subjects enumerated in Rule B. 36 (*m*) and (*n*) unless he is a registered medical practitioner who has had special experience, satisfactory to the Board, in the subjects in question;

(*c*) in the subjects for the second period of training unless he submits evidence satisfactory to the Board, showing that he has had practical experience which qualifies him to deal with the subjects in question.

26. The lectures on the subjects of Rule B. 37 must be delivered by the medical officer of health of a Local Supervising Authority or by a medical practitioner who is a member of the staff of such officer or, by permission of the Board, by a medical practitioner who has had experience satisfactory to the Board, in the subjects in question. Such persons shall be deemed to be persons approved by the Board as lecturers in the said subjects.

27. Unless the Board otherwise determine in any particular case, a person shall not be approved as a teacher unless—

(*a*) she has practised as a midwife for at least 3 years and produces evidence, satisfactory to the Board, that she is competent to teach pupils; and *either*

(*b*) she is on the staff of an approved training institution; *or*

(*c*) she is working in association with an approved training institution, and has attended at least 60 cases in the previous 12 months, and can provide adequate accommodation for, and facilities for quiet study by, her pupils.

28. Unless the Board otherwise determine in any particular case, a person shall not be approved as a teacher for the purpose of Rule B. 13 (*a*) (i) unless she is a state certified midwife and also a general trained state registered nurse.

29. The Board may limit the number of pupils received at any one time by a teacher.

30. Approval of a person as a lecturer or as a teacher shall be for a period not exceeding one year at a time.

CONDUCT OF EXAMINATIONS

31. A pupil shall present herself for the First Examination within 6 months of the date on which she completes her first period of training and shall present herself for the Second Examination within 6 months of the date on which she completes her second period of training.

A pupil who does not sit for examination in accordance with this Rule may be required by the Board to undergo such further training as the Board may prescribe before presenting herself for examination. The Board may waive the observance of this Rule in cases of illness of the pupil or other grave emergency.

32. A pupil shall not be entitled to be admitted to an examination unless her name is on the Register of Pupils and she produces certificates to the effect that she has undergone the training prescribed in these Rules. Such certificates must be in the prescribed form and must be signed by the lecturers and teacher, and countersigned by the Matron or Superintendent of Nurses of the approved training institution, unless such person is the teacher signing the certificate.

33. A pupil who intends to present herself for either examination must send notice of such intention and the sum of one guinea in payment of the examination fee to the Secretary at least 4 weeks before the date fixed for the commencement of the examination. The certificates of training required by Rule B. 32 shall be sent to the Secretary at the same time or at any subsequent date not being less than 7 days before the date fixed for the commencement of the examination. Until such certificates have been received and accepted by the Secretary a pupil shall not be deemed to have entered for the examination, but the fee shall not be returnable.

34. If a pupil who has paid the fee for entry to an examination is prevented by her own illness from completing her entry, or attending at or completing her examination, and she produces a medical certificate or other evidence of her illness satisfactory to the Board, the fee payable by her for admission to one subsequent examination shall, if the Board so determine, be ten shillings and sixpence.

35. The Secretary shall send to each pupil accepted for the First Examination, at the address furnished by her for the purpose, a card of admission to the written part of the examination, and shall personally or by deputy hand to each pupil attending the written part of the examination a card of admission to the oral part of the examination. The Secretary shall send to each pupil accepted for the Second Examination, at the address furnished by her for the purpose, a card of admission to that examination.

Any pupil presenting herself at either part of the First Examination, or at the Second Examination, without her card of admission will be liable to exclusion.

36. The First Examination shall be partly written and partly oral, and shall comprise the following subjects:—

(*a*) general physiology; the principles of hygiene and sanitation as regards home, diet, and person; the midwife's part in spreading a better knowledge of hygiene among the women she attends;

(*b*) infection; its causes and the means taken to prevent it; asepsis; antiseptics in midwifery and the way to prepare and use them; the disinfection of the person, clothing, and appliances; the use of rubber gloves and masks and the conditions in which it is advisable to use them;

(*c*) the anatomy and physiology of the female pelvis and its organs, and of the breasts;

(*d*) the physiology, diagnosis, and management of normal pregnancy; the hygiene and care of the pregnant woman and the unborn child; pelvic measurement, examination of the urine, estimation of blood-pressure and the significance of the findings thereof;

(*e*) the symptoms and signs suggesting departure from the normal in pregnancy;

(*f*) the physiology, mechanism, and management of normal labour;

(*g*) the symptoms and signs suggesting departure from the normal in labour;

(*h*) the physiology and management of the puerperium, including the taking and recording of the pulse-rate, the temperature and respiration-rate; the use of nursing appliances;

(*i*) haemorrhage complicating pregnancy, labour, and the puerperium; emergency treatment of patients suffering from loss of blood;

(*j*) other obstetric emergencies and their management by the midwife until the arrival of the doctor; preparations before the doctor's arrival and assistance during his attendance;

(*k*) complications of the puerperium, including puerperal fevers; their nature, causes, prevention, symptoms and signs; precautions adopted to prevent the spread to other patients;

(*l*) the care of the breasts under both normal and pathological conditions; the recognition of disturbance of their function;

(*m*) the physiology, hygiene, and management of the child (including the establishment and maintenance of breast feeding and artificial feeding), with special reference to the first month of life;

(*n*) the care of children born apparently lifeless; the management of premature, weakly, and abnormal children;

(*o*) signs of the diseases which may develop during the first month after birth, with special reference to ophthalmia neonatorum and the responsibilities of the midwife in connexion therewith, and to skin eruptions, and in particular pemphigus; congenital deformities for which immediate or early treatment may be essential or beneficial, e.g., imperforate anus or club foot;

(*p*) the venereal diseases (syphilis and gonorrhoea) in women and young children; their symptoms, signs and dangers, and the risks of contagion; the midwife's responsibility for advocating early and continued treatment;

(*q*) the use of such drugs and solutions as may be required in practice; the conditions which call for their use; their dosage and strength; the mode of administration or application and their dangers;

(*r*) maternal mortality, neonatal mortality and stillbirths; the meaning of these terms and the steps taken to reduce such mortalities.

37. The Second Examination shall be mainly oral, clinical and practical. A candidate will be required to answer questions on the records kept by her in compliance with Rule B. 17 and, in addition, may be required to answer, orally or in writing, elementary questions on social legislation, national insurance, social conditions, the duties of the midwife as described in the rules of the Board and her relationship with the Local Health Authorities, including co-operation with voluntary organisations.

38. A candidate detected copying from another candidate's paper or from a book or other document may be required to leave the examination room by the person in charge of the examination. Such candidate will not be allowed to complete the examination and will be liable to exclusion from all future examinations.

39. A pupil who has failed at either Examination of the Board and has not succeeded in passing the examination immediately following the one at which she has failed may be called upon to undergo such further training as the Board may prescribe before again presenting herself for examination. The Board may waive the observance of this Rule in cases of illness of the pupil or other grave emergency.

Scale of Remuneration of Examiners

40. The scale of remuneration of the examiners shall be such as may from time to time be recommended by the Board and approved by the Minister of Health.

Issue of Certificates: Admission to Roll of Midwives

41. The name of a candidate successful at the First Examination shall be entered on the record maintained by the Board of all pupils who have passed that Examination. A Certificate, to be known as the First Certificate, in the form set out in the Schedule to Section B, shall be awarded to each candidate successful at the First Examination whose first period of training has extended over 6 consecutive calendar months in accordance with the terms of Rule B. 11. The entry of a pupil's name on such record or the award of such First Certificate shall not entitle a pupil to admission to the Roll of Midwives or authorize her to hold herself out to be certified under the Midwives Acts, 1902 to 1936.

42. A Certificate, in the form set out in the Schedule to Section B, shall be awarded to each candidate successful at the Second Examination, and every such candidate shall be admitted to the Roll of Midwives.

43. The names of all women admitted to the Roll of Midwives shall appear on the Roll (or, if the Roll be divided into two parts, on the appropriate part thereof) in alphabetical order.

SCHEDULE TO SECTION B

Certificates awarded by the Board

The First Certificate

(See Rule B. 41.)

Central Midwives Board

Date.....

We hereby certify that.....has completed the first period of training prescribed for pupil-midwives and has passed the First Examination of the Central Midwives Board.

.....Chairman.

.....Secretary.

Note.—This Certificate *does not* entitle the pupil whose name is inscribed hereon to admission to the Roll of Midwives or authorize her to hold herself out as certified under the Midwives Acts, 1902 to 1936.

Certificate of Enrolment as a Midwife

(See Rule B. 42.)

Central Midwives Board

Date.....

No.....

We hereby certify that.....having passed the First and Second Examinations of the Central Midwives Board, and having otherwise complied with the rules made in pursuance of the Midwives Acts, 1902 to 1936, is entitled by law to practise as a Midwife in accordance with the provisions of the said Acts and subject to the said rules.

.....Chairman.

.....Secretary.

SECTION C

RULES REGULATING THE GRANT BY THE BOARD OF DIPLOMAS IN THE TEACHING OF MIDWIFERY TO MIDWIVES PRESENTING THEMSELVES FOR EXAMINATION FOR SUCH DIPLOMAS

1. A diploma to be known as the Midwife Teachers Diploma shall be awarded by the Board to any midwife who has been successful at the Midwife Teachers Diploma Examination, referred to hereinafter as the examination.

2. Unless she is exempt as provided for hereinafter, a candidate for the examination must satisfy the following requirements:—

(*a*) she has attained or will attain the age of 25 years prior to the date of the examination at which she presents herself;

(*b*) her name appears on the general part of the Register of the General Nursing Council for England and Wales or the General Nursing Council for Scotland or the Joint Nursing and Midwives Council for Northern Ireland or the General Nursing Council for Eire or on the part thereof containing the names of nurses trained in the nursing of sick children, by virtue of having passed the examination of one of these bodies or some other examination recognized by the General Nursing Council for England and Wales;

(*c*) her name appears on the current Roll of Midwives maintained by the Board and for a period of at least 3 years she has been certified as a midwife in England and Wales or in any part of His Majesty's dominions in which there is for the time being in force any Act or ordinance for the certification and registration of midwives under a public authority and which admits to its register midwives certified by the Board on reciprocal terms;

(*d*) for a period of at least 2 years during the period of 3 years immediately prior to the date of Part I of the examination at which she presents herself—

(i) she has held a post in one or more institutions approved by the Board for the training of pupil-midwives and as part of her duties has assisted in the training of pupil-midwives; or

(ii) she has assisted in the training of pupil-midwives in the district under a teacher who has been approved by the Board for the conduct of such training and who has also been specially approved by the Board for the conduct of the training of candidates for the examination; or

(iii) she has obtained other practical teaching experience satisfactory to the Board;

(*e*) within the period of 2 years immediately prior to the date of Part I of the examination at which she presents herself she has attended a course of instruction, approved by the Board, in the subjects included in the syllabus of the examination: provided that—

(i) the Board may exempt from this requirement any candidate who works in a place which is a long distance from any institution conducting a course of instruction in preparation for the examination;

(ii) a candidate who within the period of 3 years immediately prior to the examination at which she presents herself has attended a course of lectures in Public Health and Hygiene in preparation for the examination for the Health Visitors Certificate may be excused, at the discretion of the Board, from attendance at that part of the course of instruction which consists of lectures on Public Health and Social Service;

(*f*) prior to the date of Part I of the examination at which she presents herself she has completed a course of instruction in the administration of nitrous oxide and air analgesia.

3. A midwife who has been approved by the Board as a teacher of pupil-midwives for a period of at least 2 years and whose approval as such has not lapsed shall be exempt from the requirements enumerated in Rule C. 2 (*a*), (*d*) and (*e*).

4. The examination shall be held in two Parts at such times and at such places as the Board may determine. Part I of the examination shall be partly written and partly oral; Part II of the examination shall be oral and practical and shall include the conduct of a clinical demonstration and of a tutorial class, at both of which pupil-midwives shall be present as an audience and may address questions to the candidates. At each part of the examination candidates will be examined with a view to testing their knowledge of midwifery and their ability to teach pupil-midwives.

5. The syllabus of the examination shall comprise the subjects enumerated in the Schedule to Section C.

6.—(i) Application for admission to each part of the examination shall be made on the form prescribed by the Board. The completed form, together with the fee for examination, must be received by the Secretary, in the case of an entry to Part I of the examination, at least 21 days before the beginning of that part of the examination, and in the case of an entry to Part II of the examination, at least 14 days before the beginning of that part of the examination. A candidate, other than one to whom the provisions of Rule C. 3 apply, must send with the form of application for admission to Part I of the examination, the names of two referees who can give the Board such information as they may desire as to the candidate's experience in midwifery and in the teaching of pupil-midwives and as to her general fitness for the examination. Until the Board has received such information from the referees they shall not be under any obligation to admit the candidate to the examination.

(ii) A candidate shall not be admitted to Part II of the examination until she has satisfied the examiners at Part I of the examination.

7. The fee for examination shall be 2 guineas in respect of each part of the examination.

8. If a candidate who has been accepted for admission to either part of the examination is prevented by her own illness or other grave emergency from attending at or completing her examination she may be permitted to re-enter for the same part of the examination on one occasion only without payment of any further fee.

9.—(i) An unsuccessful candidate at either part of the examination may, at the discretion of the examiners, be required to attend a course of instruction approved by the Board, or to obtain further experience, before presenting herself again for examination.

(ii) If a candidate fails on 3 occasions at either part of the examination she may, at the discretion of the Board, be refused admission to such part at any future examination.

10. The examiners may award a mark of distinction to any candidate who has shown exceptional merit in both parts of the examination.

11. The Board may dispense with the requirements of the foregoing rules in any case in which they think fit.

12. The scale of remuneration of the examiners shall be such as may from time to time be recommended by the Board and approved by the Minister of Health.

SCHEDULE TO SECTION C

SYLLABUS OF SUBJECTS OF THE MIDWIFE TEACHERS DIPLOMA EXAMINATION

(*a*) Anatomy and Physiology.

(1) General Anatomy.

(2) General Physiology; the circulatory system; the blood; the respiratory system; the digestive system; metabolism; the excretory systems; the nervous system; muscle action; ductless glands; elementary chemistry in so far as it explains the meanings of the terms osmosis and diffusion.

(3) Special Anatomy of the female pelvis; the pelvic organs and the breasts.

(4) Special Physiology; physiology of the ovary and the pituitary with special reference to the endocrines associated with pregnancy; ovulation; menstruation; implantation; elementary embryology including maturation, fertilization, and the development of the placenta and the membranes.

(5) Elementary bacteriology.

(*b*) Midwifery.

(1) Normal Pregnancy; diagnosis of pregnancy; physiological changes seen in pregnancy; the size and general characteristics of the foetus at different periods of pregnancy; multiple pregnancy, antenatal care; physical examinations; attention to the breasts.

(2) Abnormal Pregnancy:

(i) *The Haemorrhages of Pregnancy:*
extra-uterine pregnancy; abortion; carneous mole; hydatidiform mole; accidental and unavoidable haemorrhages and their treatment.

(ii) *Toxaemia of Pregnancy:*

etiology and pathology; albuminuria of pregnancy; eclampsia; pernicious vomiting of pregnancy; acute yellow atrophy.

(iii) *Displacement of the Gravid Uterus:*

(iv) *Tumours complicating Pregnancy:*

(v) *Maternal Disorders associated with Pregnancy:*

heart disease; nephritis; pyelitis; tuberculosis; nervous disorders; chorea, insanity, neuritis, herpes; diabetes and other forms of glycosuria.

(vi) *Diseases of the Foetus, Placenta and Membranes:*

polyhydramnios and oligohydramnios; malformation of the foetus.

(3) Normal labour: theories of the causation of onset; clinical course; the physiology of labour—the first, second, and third stages; the anatomy of the birth canal; mechanism in normal labour (including O.P.); the diagnosis of labour; the conduct of normal labour; analgesics.

(4) Abnormal labour:

(i) *Malpresentations:*

mechanisms in the face, brow, breech, shoulder and complex presentations; presentation and prolapse of the umbilical cord; the moulding of the foetal skull;

(ii) *Anomalies of the Genital Passage:*

the types of contracted pelvis; mechanisms of labour in contracted pelves; treatment of labour complicated by contracted pelvis including induction and trial of labour; anomalies of soft parts; tumours complicating labour;

(iii) *Anomalies of the uterine contractions and of the auxiliary forces:*

inertia; tonic contraction; Bandl's ring; obstructed labour; ruptured uterus;

(iv) *Emergencies and Accidents of Labour:*

post-partum haemorrhage; inversion of the uterus; shock; lacerations of the genital canal; prolonged labour—first and second stages.

(5) Normal Puerperium: physiology of the puerperium; management; general nursing care; management of breast feeding; post-natal care.

(6) Abnormal Puerperium: clinical manifestations; prevention, diagnosis and treatment of puerperal infection; diseases of the breast; other disorders of the puerperium—chorion carcinoma, puerperal insanity, sudden death, heart failure, pyelitis and cystitis.

(7) The New-born Child: the physiology and care of the new-born child; artificial feeding; the care of the premature child; disorders of the new-born child—congenital malformations, trauma, gastro-intestinal disorders, syphilis, skin diseases and affection of the umbilical cord, ophthalmia; asphyxia; cerebral haemorrhage; cephalhaematomal caput succedaneum.

(8) Obstetric Operations: technique and instruments used for—induction of abortion, induction of premature labour, version, delivery by the forceps, Caesarean section, destructive operations, symphysiotomy and pubiotomy.

(9) General: venereal diseases; new growths—cancer of the breast and of the uterus and fibroids, the recognition of their symptoms; note-taking and record keeping; a short summary of the history of midwifery.

(*c*) Public Health and Social Service.

(1) The general principles of the public health legislation.

The powers and duties of the Ministry of Health.

The types of local authorities and the chief health functions of each, especially those of Local Health Authorities.

The duties of the various local government officers in relation to public health:—

Clerks of local authorities,
Medical Officers of Health,
Surveyors,
Directors of Education,
Supervisors of Midwives,
Health Visitors,
Sanitary Inspectors,
Home nurses,
School nurses.

The midwife in relation to public health.

(2) The Midwives Acts, 1902-1936.

The powers and duties of the Central Midwives Board.
The rules of the Board.

(3) (i) *The Control of Infectious Diseases:*

Public Health Act, 1936 (Part V) and Public Health (London) Act, 1936 (Part IX); Notification; action taken, including methods of disinfection, on notification, especially in the case of puerperal pyrexia and ophthalmia neonatorum; action necessary to prevent the spread of pemphigus neonatorum (bullous impetigo of infants).

(ii) *Environmental Hygiene:*

Sanitation of dwellings; removal of household refuse; nuisances; pure food; pure water.

(4) Public Services for the individual:

National Health Service Act, 1946.

National Insurance Act, 1946: types of benefit.

National Assistance Act, 1948.

The law relating to the employment of women after confinement.

The Lunacy and Mental Treatment Acts (puerperal mania); the Mental Deficiency Acts (the circumstances in which a pregnant defective can be dealt with).

(5) Special provisions for the care of children:

Child welfare work.

The Children Act, 1948.

The child life protection sections of the Public Health Act, 1936, and the Public Health (London) Act, 1936.

Neglected children (Children and Young Persons Act, 1933).

The adoption of children (Adoption of Children Act, 1926).

(6) (i) The law relating to Nursing Homes.

(ii) The law relating to abortion.

(iii) Voluntary maternity and child welfare agencies, specially those for the welfare of the unmarried mother and her child; Adoption Societies; Babies' Homes; other voluntary social agencies, including organisations for domiciliary midwifery and district nursing.

(iv) Elementary vital statistics:

Notification and registration of births.

Registration of deaths and of stillbirths.

Neonatal mortality; infantile mortality; birth and death rates; maternal mortality.

(*d*) The Principles and Methods of Teaching with special reference to the theoretical and practical instruction of pupil-midwives.

SECTION D

RULES REGULATING THE PROCEEDINGS OF THE BOARD ON COMPLAINTS MADE TO THE BOARD RELATING TO THE CONDUCT OF A MIDWIFE AND ON THE RESTORATION TO THE ROLL OF A NAME REMOVED.

PROCEDURE ON COMPLAINTS MADE TO THE BOARD RELATING TO THE CONDUCT OF A MIDWIFE

1. When it is alleged to the Board that a midwife has disobeyed any of the Rules from time to time laid down under the Midwives Acts, 1902-1936, by the Board or has otherwise been guilty of misconduct:—

(*a*) the Board shall, when such allegation is made by a person other than a Local Supervising Authority, notify any Local Supervising Authority who appears to be concerned; and

(*b*) if the case is one in which investigation by a Local Supervising Authority is desirable the Board shall request the Local Supervising Authority to investigate the case and to report whether in their opinion a *prima facie* case of disobedience or misconduct has been made out;

(*c*) the Secretary shall lay every such allegation before the Penal Cases Committee (hereinafter called "the Committee") for consideration, as required by Rule D. 2.

Such disobedience or misconduct is hereinafter referred to as "the offence."

2.—(*a*) The Secretary shall so soon as reasonably practicable lay before the Committee all information in his possession relating to the offence including any report of the Local Supervising Authority which he may have received.

(*b*) The Committee may, if it thinks fit, direct investigations to be made by the Secretary or a Solicitor or any other person, and may inquire of the midwife what explanation she has to offer. The results of any such investigation or inquiry shall (except there be good reason for not so doing) be communicated to any Local Supervising Authority concerned.

(*c*) After consideration of the information before it, including the results of any investigation or inquiry directed by it, the Committee shall report to the Board whether the case is one in which proceedings ought to be commenced for the removal of the name of the midwife from the Roll.

(*d*) In making such report the Committee may take into consideration matter which would not be admissible as evidence at the hearing before the Board, but may if it thinks fit decline to take into consideration matter not verified by statutory declaration.

(*e*) If the Committee reports that proceedings ought not to be commenced the case shall not proceed further unless the Board otherwise direct. Before so reporting the Committee shall give to any Local Supervising Authority concerned the opportunity of submitting further observations thereon.

(*f*) When it has been decided that proceedings shall not be commenced, the Board shall notify the fact to the midwife and any Local Supervising Authority concerned and may notify any other person who has complained.

3.—(*a*) If the Committee reports, or the Board direct, that proceedings should be commenced, the Secretary shall, in a case in which the offence has been brought to the notice of the Board by a Local Supervising Authority or in which a Local Supervising Authority have at the request of the Secretary or the Committee made a report, and in any other case in which the Committee so directs, forthwith send to the Local Supervising Authority a notice asking whether the Local Supervising Authority desire to undertake the conduct of the case.

(*b*) If within seven days after receipt of such notice or such further time as the Committee may allow the Local Supervising Authority give notice that they desire so to do, they shall undertake the conduct of the case.

(*c*) In any other case the conduct of the case shall be undertaken by the Secretary or such other person as the Committee may direct.

(*d*) Provided always that if a Local Supervising Authority having given notice of their wish to undertake the conduct of the case shall subsequently at any stage in the proceedings decline to continue the conduct of the case the Committee may itself direct the Secretary or such other person as the Committee may appoint to conduct the case and in that event the conduct of the case shall be continued by the Secretary or other person appointed as though the Local Supervising Authority had not originally undertaken the conduct thereof.

(*e*) The Authority or person for the time being undertaking the conduct of the case is hereinafter referred to as the Complainant.

4.—(*a*) A Local Supervising Authority, if they are the Complainant, shall forthwith furnish the Board with a statement specifying the nature and particulars of the charge against the midwife, and shall send to the Board copies of any statutory declaration, any certificate of conviction, and any other documentary evidence intended to be used as evidence against the midwife.

(*b*) The said statement shall be prepared in a form suitable to be sent to the midwife and, so far as possible, in accordance with the directions and in the form contained in the First Schedule to Section D.

5.—(*a*) So soon as practicable the Board shall send to the midwife a notice which shall contain the following particulars:—

(i) It shall state the date on which the Board intend to hear the case and require her to attend before the Board on such date.

(ii) It shall require her to forward to the Secretary seven days before the day appointed her Certificate and such other documents kept or used by her in the course of her duties as may be specified in the notice.

(iii) It shall require her to send to the Secretary not less than seven days before the day appointed an answer in writing to the charge brought against her.

(*b*) A copy of the Rules of Section D shall be enclosed with the notice which shall call specific attention to Rule D. 9 (*b*).

(*c*) There shall also be enclosed with the notice a copy of the statement of the nature and particulars of the charge against the midwife furnished by the Local Supervising Authority under the last preceding Rule or in a case where the Local Supervising Authority are not the Complainant a like statement prepared by the Secretary.

(*d*) Such notice together with the copy of the Rules of Section D and statement shall be posted to the midwife on such a date as to allow at least fourteen clear days between the date of posting and the day appointed for the hearing of the case.

6. The Secretary shall immediately upon receipt of the midwife's answer to the charge inform the Complainant, if a Local Supervising Authority, of the substance of the answer to the charge furnished by the midwife. Where such answer makes a charge against any Local Supervising Authority, the Local Supervising Authority charged, if not the Complainant, shall be informed of the nature of the charge made against them and be given the name of the Complainant.

7. The Secretary shall send to the midwife as soon as may be and in any event not later than four days before the day appointed for the hearing copies of any statutory declaration, certificate of conviction or documentary evidence intended to be used against her.

8. The case shall be heard at a Special Meeting of the Board of which at least four days' notice shall be sent by the Secretary to every member of the Board and to the Local Supervising Authority.

9.—(*a*) The Complainant, if a Local Supervising Authority, shall be represented at the hearing by a barrister or solicitor, not being the medical officer of health or an assistant medical officer of health of the Complainant.

(*b*) The midwife may be represented or assisted at the hearing by a friend or adviser who may be a barrister or solicitor. Provided that the Board may decline to allow her to be so represented unless she has given four days' notice of her intention to be so represented.

10. The procedure at the hearing of the case shall be as follows:—

(*a*) The Complainant or his representative may shortly state to the Board the facts of the case and the charge alleged against the midwife and shall then submit to the Board the evidence which is offered in support of the charge.

(*b*) The midwife or her friend or adviser shall be entitled to cross-examine any witness called against her, which expression includes any person whose statutory declaration is used as evidence against her and who is present at the hearing. Any person who is cross-examined may be re-examined by the Complainant or his representative.

(*c*) The midwife or her friend or adviser shall then be invited by the Chairman to tender evidence in answer to the charge and to address the Board.

(*d*) The Complainant or his representative shall be entitled to cross-examine any witness called for the midwife, which expression includes the midwife (if she give evidence) and any person whose statutory declaration is used as evidence by the midwife and who is present at the hearing. Any person who is cross-examined may be re-examined by the midwife or her friend or adviser.

(*e*) All evidence, whether for the Complainant or the midwife, shall be given orally or by a statutory declaration.

(*f*) In any case where it appears to the Board that it is expedient in the interests of justice that a person who has made a statutory declaration should attend for cross-examination the Board shall reject the statutory declaration unless such person attends for that purpose.

(*g*) The Board, the Complainant or the midwife may, as part of the case, refer to any relevant matter contained in the midwife's register of cases or any other record kept by the midwife in the course of her duties.

(*h*) The Complainant and the midwife shall, subject to legal objection, produce before the Board all documents within their possession or power respectively which may be required or called for and do all other things which during the proceedings on the charge the Board may require.

(*i*) The witnesses called for or against the midwife shall, if the Board think fit, be examined on oath or affirmation.

(*j*) The Board shall have power to administer oaths to, or take the affirmation of, the witnesses called for or against the midwife.

(*k*) The Complainant or the midwife may sue out a writ of subpoena ad testificandum or of subpoena duces tecum but no person shall be compelled under any such writ to produce any document which he could not be compelled to produce on the trial of an action.

11. If the midwife does not attend either personally or by a friend or adviser the Board may proceed to hear and decide upon the charge in her absence provided that upon a satisfactory explanation of her non-attendance being subsequently given the Board may, if they think fit, reopen her case.

12.—(*a*) If and when the Board have found the charge against the midwife to be proved either in whole or in part the Board may, if they think fit,

(i) require the Secretary to report whether the midwife has previously been censured, cautioned, suspended, or had her name removed from the Roll of Midwives, or has been otherwise dealt with by the Board;

(ii) require any Local Supervising Authority who may be in a position to provide information to report upon the conduct of the midwife prior to the date of conviction by the Board.

The midwife, if present, or, if he be present, her friend or adviser, shall be entitled to submit her observations thereon before sentence is passed.

(*b*) If the Board find the charge against the midwife to be proved either in whole or in part they may either censure or caution the midwife or direct that her name be removed from the Roll of Midwives and cancel her Certificate, either with or without prohibiting her from attending women in childbirth in any other capacity, or may suspend her from practice as a midwife for such period as they shall think fit, or may postpone sentence on such conditions as they may think fit. The determination of the Board as to any of these matters may be made either at the time when a charge is proved or at any future time.

13. If a Complainant fails to comply with any of the Rules or fails in the opinion of the Board to conduct the case with due diligence the Board may direct that the same shall be conducted by the Secretary or such other person as the Board may direct, or, if they think fit, summarily dismiss the charge.

14. Notice in writing of the removal of the name from the Roll and of the cancelling of the Certificate shall be sent by the Board by post in a registered letter to the midwife and to all Local Supervising Authorities concerned.

15. Any notice or document required by these Rules to be sent to the midwife shall be sent by post in a registered letter to the last known address or to the enrolled address of the midwife.

16. The Board may waive any non-compliance with any of these Rules in any case where such waiver would not cause injustice, and shall do so when waiver is required in the interests of justice.

17. Subject to the provisions of these Rules the Board may adjourn and otherwise regulate their proceedings in such manner as they think proper.

Procedure on Restoration to the Roll of a Name Removed under the Foregoing Provisions

18. Application for the restoration of a name to the Roll of Midwives shall be made in writing addressed to the Secretary and signed by the applicant, stating the grounds on which application is made. In cases where the cancelled Certificate has not already been returned to the Board, it must be sent in with the application, or a statutory declaration made as to its previous loss or destruction.

19. The application must be accompanied by a declaration made by the applicant, setting forth the facts of the case and stating that she is the person originally enrolled. The declaration shall be in the form set out in Form (1) of the Second Schedule to Section D.

20. The statements in the application and declaration must also be supported by the certificate of the Local Supervising Authority of the district in which the applicant was resident at the time when her name was removed from the Roll of Midwives (and if at the time of her application she be resident in another district, then by the certificate of the Local Supervising Authority of such district also). These certificates shall be in the form set out in Forms (2) and (3) of the Second Schedule to Section D. The statements in the application and declaration must also be supported by the certificates of at least two persons, being Justices of the Peace, Ministers of Religion, or registered Medical Practitioners, or other persons of recognized standing, who were and are well acquainted

with the applicant before and since the removal of her name. Each of these certificates must testify to the applicant's identity and present good character, and they shall be in the form set out in Form (4) of the Second Schedule to Section D. The Board may, in such cases as they think proper, dispense with the production of any of the certificates hereinbefore referred to.

21. The application, when duly supported by the declaration and certificates as hereinbefore provided, shall be considered at a meeting of the Board, made special for the purpose, of which at least 4 days' notice shall be sent by the Secretary to each member. The Board may adjourn the consideration to a future date or require further evidence or explanation from the applicant. They may also require her to undergo a further period of approved midwifery training before the restoration of her name to the Roll of Midwives.

22. After consideration of all the circumstances of the case, as submitted to them in accordance with the provisions of these Rules, the Board may, if they think fit, direct the Secretary to restore the name of the applicant to the Roll of Midwives and to issue a new Certificate to her on payment of the fee of ten shillings and sixpence.

23. A copy of the Rules of Section D and of the Forms prescribed in the Second Schedule thereto shall be supplied by the Secretary to intending applicants on demand.

FIRST SCHEDULE TO SECTION D

DIRECTIONS AS TO THE STATEMENT TO BE FURNISHED UNDER RULE D4

1. The statement should specify whether the offence charged is disobedience to a Rule of the Central Midwives Board or is other misconduct, and in the case of disobedience to a Rule the particular Rule alleged to have been disobeyed should be referred to.

2. Full particulars should be given of

(*a*) the nature of the offence charged;

(*b*) the relevant dates;

(*c*) the name and address of patient concerned, if any;

(*d*) any other relevant matter.

3. The statement should be as nearly as possible in the following form:—

IN THE MATTER of the Midwives Acts, 1902-1936

and

IN THE MATTER of A.....B.....

State Certified Midwife No.....

The following charge is made by the

County / County Borough } Council of.....

being the Local Supervising Authority for the district of.....
(OR by the Secretary of the Central Midwives Board) against you A.....B....., State Certified Midwife, No..... viz.

Here insert charge on the lines of the specimen charges given below. Separate charges should be set out under separate counts.

Signed:

Clerk of the { County / County Borough } Council of.....

(OR Secretary of the Central Midwives Board.)

SPECIMEN CHARGES

1. That being in attendance on.....of.....you, between the.....day of.....19..and the.....day of.....19.., were guilty of misconduct in that

(*a*) you did not on the.....day of.....19..take and record accurately the temperature of the patient;

(*b*) you entered records of temperature on the.....day of.....19.. of the patient when in fact you had not taken it.

---

2. That you are guilty of misconduct in that

(*a*) you are of unsober habits;

(*b*) you being in attendance on.....of.....on or about the.....day of.....19..were the worse for drink and unable to perform your duties.

---

3. That you are guilty of misconduct in that you were on the.....day of.....19.. convicted at the Court of Summary Jurisdiction, held at.....of

Here follow terms of conviction.

---

4. That being in attendance on.....of.....between the.....day of.....19..and the.....day of.....19..

(*a*) you disobeyed Rule E. 12* of the Rules of the Central Midwives Board in that an abnormality, viz. loss of blood by your patient having occurred during pregnancy on the.....day of.....19.., you did not forthwith call to your assistance a registered medical practitioner;

(*b*) you disobeyed Rule E. 12* of the Rules of the Central Midwives Board in that in calling in medical aid on the.....day of.....19.. in consequence of an emergency, viz. rigor with raised temperature, you did not use for this purpose the form prescribed in Form (*b*) of the Schedule to Section E properly filled in and signed by you.

---

5. That being in attendance on.....
of .....
between the.....day of.....19..
and the.....day of.....19..
when she was suffering from a condition which may raise suspicion of infection, viz., puerperal fever, you disobeyed Rule E. 16† of the Rules of the Central Midwives Board in one or more of the following particulars, viz.:—

(*a*) you did not without delay notify the Local Supervising Authority of the fact.

(*b*) you did not before visiting another patient, viz.....have yourself disinfected to the satisfaction of the Local Supervising Authority.

---

6. That you are guilty of misconduct in that being then in charge of .....of.....you on or about the.....day of.....19.. when she was in labour left the patient without giving an address by which you could be found without delay.

---

* *Or Rule E. 44.* † *Or Rules E. 29, 48 or 59.*

SECOND SCHEDULE TO SECTION D.

FORMS OF DECLARATION AND CERTIFICATE REQUIRED UPON AN APPLICATION FOR RESTORATION OF NAME TO THE ROLL OF MIDWIVES.

Form (1) *Declaration by Applicant.*

(See Section D. (19)).

(1) I, the undersigned*..... * Insert full name.

of*..... * Insert address.

HEREBY DECLARE that the following are the facts of my case and the grounds on which I seek the restoration of my name to the Roll of Midwives.

(2) On the*.....day of.....19.. my name was duly enrolled by virtue of the following qualification, viz.,*..... * Date of Certificate granted by the Central Midwives Board.

..... * Qualification appearing on Certificate.

(3) At an inquiry held on the*.....day of.....19.. the Central Midwives Board directed my name to be removed from the Roll of Midwives and my certificate to be cancelled. * Date of inquiry.

(4) Since the removal of my name from the Roll I have been residing at*.....and my occupation has been*..... * Insert place of residence. * Insert occupation.

(5) It is my intention if my name is restored to the Roll to practise as a midwife at*..... * Insert proposed place of practice.

..... * Insert proposed place of practice.

(6) The grounds of my application are*..... * All the facts and reasons in support of the application should be stated shortly and clearly.

..... * All the facts and reasons in support of the application should be stated shortly and clearly.

(Signed)..... * All the facts and reasons in support of the application should be stated shortly and clearly.

Date.....19..

Certificates in Support of Application.

Form (2). (See Section D. (20).).

To be given by the Medical Officer of Health of the Local Supervising Authority of the area in which the midwife was resident at the date of the removal of her name from the Roll, or other Officer or representative of the Local Supervising Authority duly authorized by resolution of the Authority or a Committee thereof.

I.....

of.....

certify as follows:—

(1) I am (Medical Officer of Health) (duly authorized by resolution dated.....) of the Local Supervising Authority within the area of..... Alter as the case may be.

(2) A.....B.....the person whose name formerly appeared in the Roll of Midwives with the following address and qualification, viz.:—

Address .....

Qualification.....

was on the.....day of.....when her name was ordered to be removed from the Roll (and is now) resident in the said area.*

* *In case the applicant is not now resident in the area in which she formerly resided the words within the brackets should be deleted and the Certificate of the Local Supervising Authority in whose area she formerly resided (Paragraph (2)) should continue as follows:—*

"I am informed and believe that she now resides in the area of the Local Supervising Authority of the County of....."

(3) The Local Supervising Authority have caused inquiry to be made, and as the result of such inquiry I certify that to the best of my knowledge and belief the said.....is now trustworthy, sober and of good moral character.

(4) The Local Supervising Authority are aware that since the removal of her name from the Roll the said.....has been residing at.....and her occupation has been.....*

* *In case the facts in regard to intermediate residence and occupation are within the knowledge of the Local Supervising Authority they may be stated. Otherwise the paragraph can be omitted.*

(5) The Local Supervising Authority are aware of the circumstances in which the name of.....was removed from the Roll of Midwives but see no objection to the restoration of her name to the Roll.

Signature.....

Position and authority for signing.....

Date.....19..

Form (3). (See Section D. (20).)

To be given by the Medical Officer of Health of the Local Supervising Authority of the area in which the midwife is residing if other than the one in which she resided at the date of the removal of her name from the Roll, or other Officer or representative of the Local Supervising Authority duly authorized by resolution of the Authority or a Committee thereof.

I.....

of.....

certify as follows:—

Alter as the case may be.

(1) I am (Medical Officer of Health) (duly authorized by resolution dated.....) of the Local Supervising Authority within the area of.....

(2) A.....B.....the person whose name formerly appeared in the Roll of Midwives with the following address and qualification, viz.:—

Address .....

Qualification.....

is, I am informed, the same person as..... who is now resident at

Address .....

in the area of the said Local Supervising Authority.

(3) The Local Supervising Authority have caused inquiry to be made and as the result of such inquiry I certify that to the best of my knowledge and belief the said.....is now trustworthy, sober and of good moral character.

(4) The Local Supervising Authority are aware that since the removal of her name from the Roll the said..... has been residing at.....and her occupation has been.....*

* *In case the facts in regard to intermediate residence and occupation are within the knowledge of the Local Supervising Authority they may be stated. Otherwise the paragraph can be omitted.*

(5) The Local Supervising Authority are aware of the circumstances in which the name of.....was removed from the Roll of Midwives but see no objection to the restoration of her name to the Roll.

Signature.....

Position and authority for signing.....

Date.....19..

Form (4). (See Section D. (20).)

I.....

of.....

certify as follows:—

(1) * I am.....

(2) I have been and am well acquainted with the said..... .....both before and since her name was removed from the Roll of Midwives.

(3) The said ..... is the person whose name formerly appeared in the Roll of Midwives with the following address and qualification:—

Address* .....

.....

Qualification* .....

(4) The said ..... is now trustworthy, sober and of good moral character.

(5) I have read paragraph (4) of the application (Form (1)) and the statements therein contained are to the best of my knowledge, information and belief true.

Signature .....

Address .....

Position and authority for signing.....

Date.....19..

* State whether Justice of the Peace, Minister of Religion, or registered Medical Practitioner or other particulars of position entitling the signatory to give a Certificate under Rule D. (20).

* Insert address and qualification as formerly given in Midwives Roll.

SECTION E

RULES REGULATING, SUPERVISING, AND RESTRICTING WITHIN DUE LIMITS THE PRACTICE OF MIDWIVES

PART I. RULES APPLICABLE TO ALL MIDWIVES

DESIGNATION

1. The proper designation of a midwife is "State Certified Midwife" thus, *e.g.*,

Mary Smith,
State Certified Midwife.

Such woman may, if she so desires, use the initial letters S.C.M. in place of the above description, but the use of any other initial letters indicating that she is certified under the Midwives Acts, 1902 to 1936, is not permitted.

Provided that:—

(i) a midwife who has been successful at the examination for the Diploma in the teaching of midwifery may add the letters M.T.D. after the letters S.C.M.;

(ii) a midwife to whom the description is appropriate may add the words "Municipal Midwife" or "County Midwife" after the words "State Certified Midwife" or the initial letters "S.C.M." or "M.T.D." as the case may be.

CHANGE OF NAME OR ADDRESS

2. A midwife must notify:—

(*a*) any change of name to the Board, and, if she has given notice of intention to practise during the year, to every Local Supervising Authority to which such notice has been given, and furnish the Board with such evidence verifying the change as in any particular case the Board may require;

(*b*) any change of address to the Board, and, if she has given notice of intention to practise during the year, within 7 days of such change, to every Local Supervising Authority to which such notice has been given.

PART II. RULES RELATING TO MIDWIVES PRACTISING AS SUCH IN DOMICILIARY PRACTICE

GENERAL

3. In this Part of Section E, unless the context otherwise requires, the following expressions have the meanings hereby respectively assigned to them:—

"practising midwife" means a woman whose name is on the Roll of Midwives and who is practising or acting as a midwife;

"lying-in period" means a period being not less than 14 days nor more than 28 days after the end of the labour during which the continued attendance of the midwife on the mother and child is requisite;

"notice of intention to practise" means the notice required to be given by a midwife under Section 10 of the Midwives Act, 1902, of her intention to practise as a midwife.

"Schedule" means the Schedule to Section E.

NOTIFICATION OF INTENTION TO PRACTISE

4. Whenever a midwife gives notice in writing of intention to practise she shall send to the Local Supervising Authority the form prescribed in Form (*a*) of the Schedule, duly completed and signed by her.

RESPONSIBILITY OF A MIDWIFE

5. If after the end of her attendance on a case a practising midwife resumes attendance within 28 days after the end of labour on account of the mother or child suffering from an illness connected with the confinement, all these Rules (in so far as they are appropriate to the case) shall apply.

Register of Cases

6. A practising midwife must enter in a personal register of cases kept in a form approved by the Board every case which is delivered by her in the capacity of a midwife.

Records of Pregnancy, Labour and Lying-in Period

7. A practising midwife must keep records of her observations and treatment of her patient during pregnancy, labour, and the lying-in period, using for such purpose either the form prescribed by the Board from time to time or a form in which such prescribed form is incorporated without amendment.

Preservation of Records

8. A midwife must not destroy or arrange for the destruction of official records required to be kept by these Rules. If she finds it impossible or inconvenient to preserve them, she must hand them to the Local Supervising Authority.

Facilities for Inspection

9. A practising midwife must give the medical officer of health of the Local Supervising Authority or any registered medical practitioner on the staff of such officer or any supervisor of midwives of the Local Supervising Authority every reasonable facility for the inspection of her personal register of cases and other records, her appliances, such part of her residence as is used for professional purposes, her methods of practice, and, when the authority deem it necessary for preventing the spread of infection, must allow herself to be medically examined.

Treatment Outside a Midwife's Province

10.—(*a*) A practising midwife must not, except in a grave emergency, undertake any treatment which is outside her normal province. The question whether in any particular case such treatment was justified will be judged on the facts and circumstances of the case.

(*b*) A practising midwife must not on her own responsibility 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 administration or application.

11. A practising midwife must forthwith note in her personal register of cases each occasion on which she administers or applies in any way any drug, other than a simple aperient, the name and dose of the drug, and the date and time of its administration or application.

Calling in Medical Aid

12. A practising midwife must call in a registered medical practitioner in all cases of illness of the patient or child or in the case of any abnormality becoming apparent in the patient or child during pregnancy, labour or the lying-in period, or in the event of the resumption of her attendance within 28 days after the end of the labour in the circumstances stated in Rule E. 5. She must also send or hand to the registered medical practitioner the form prescribed in Form (*b*) of the Schedule, properly filled in and signed by her. The conditions referred to in this Rule shall be deemed to be emergencies for the purpose of Section 14 of the Midwives Act, 1918.

13. A practising midwife must notify the Local Supervising Authority of the area in which the patient is residing for the time being, whenever medical aid has been called in for the patient or child, whether by the midwife or by the patient or by the patient's friend or relative, by sending to them forthwith a copy of the form prescribed in Form (*b*) of the Schedule.

14.—(*a*) If a registered medical practitioner has been called in and attends on account of an emergency as defined in Rule E. 12, the midwife must obtain her instructions direct from such practitioner and must carry out the instructions she receives. If the midwife receives only verbal instructions, she must keep a note of such instructions in her records.

(*b*) If the emergency on account of which medical aid has been called in is a condition which threatens immediate danger to the life of the patient or child, the midwife must remain with and do her best for the patient or child until the crisis has passed.

15. When during the attendance of a registered medical practitioner called in in accordance with Rule E. 12, and within 28 days after the end of labour, a new emergency arises other than and unconnected with the emergency for which medical aid has already been called in, the midwife must fill in and sign in respect of the new emergency the form prescribed in Form (*b*) of the Schedule and hand or send the completed form to the practitioner in attendance and notify the Local Supervising Authority in accordance with the provisions of Rule E. 13.

Disinfection

16. If a practising midwife has been in contact with a person, whether or not a patient suffering from any condition which is or may reasonably be suspected to be infectious, or if she herself is liable to be a source of infection, she must without delay notify the Local Supervising Authority or Authorities of the fact, using for the purpose the form prescribed in Form (*c*) of the Schedule, and before going to any maternity patient she must, unless the Authority relieve her of the obligation, carry out or allow to be carried out to the satisfaction of the Local Supervising Authority such measures of disinfection as the Local Supervising Authority may prescribe.

Artificial Feeding

17. A practising midwife must forthwith notify the Local Supervising Authority of the area in which the patient has been attended of each case in which artificial feeding is adopted in addition to or in place of breast feeding and must use the form prescribed for the purpose in Form (*d*) of the Schedule.

Notification of Deaths and Stillbirths

18. If the patient or child dies or if the child is stillborn a practising midwife who was in attendance at the time of death or stillbirth or who was called in immediately afterwards must, whether or not a registered medical practitioner was present at the same time, notify the Local Supervising Authority of the death or stillbirth, using for the purpose the form prescribed in Form (*e*) of the Schedule.

Laying Out a Dead Body

19.—(*a*) A midwife must not lay out a dead body for burial except in the case of a patient upon whom she has been in attendance at the time of death in the capacity of a midwife, maternity nurse or nurse.

(*b*) After laying out a dead body for burial a midwife must notify the Local Supervising Authority on the form prescribed in Form (*f*) of the Schedule, and if there are any grounds for suspecting that the person has died as the result of an infectious condition, the midwife must notify the Local Supervising Authority and act in accordance with Rule E. 16.

PART III. RULES RELATING TO MIDWIVES WHEN ACTING AS MATERNITY NURSES IN DOMICILIARY PRACTICE

General

20. In this Part of Section E, unless the context otherwise requires, the following expressions have the meanings hereby respectively assigned to them:—

"midwife" means a woman whose name is on the Roll of Midwives;

"maternity nurse" means a midwife who, in any maternity case, is acting under the direction and personal supervision of a registered medical practitioner who

(i) has been engaged to deliver the patient;

(ii) has been notified of the onset of labour; and

(iii) continues to be in charge of and responsible for the case throughout the lying-in period.

" lying-in period " means a period being not less than 14 days nor more than 28 days after the end of labour during which the continued attendance of the midwife on the mother and child is requisite.

" Schedule " means the Schedule to Section E.

Notification to Local Supervising Authority of Intention to Act as a Maternity Nurse

21. A midwife before holding herself out as a maternity nurse or beginning to act as a maternity nurse in any area, must give notice, on the form prescribed in Form (*g*) of the Schedule of her intention so to do to the Local Supervising Authority and shall give a like notice in the month of January in every year thereafter during which she continues to act as a maternity nurse in such area. Such notice shall be given to the Local Supervising Authority of the area within which such midwife usually resides or works, and a like notice, on the prescribed form, shall be given to every other Local Supervising Authority within whose area such midwife at any time acts as a maternity nurse, within 48 hours at the latest after she begins so to act. But no such notice, whether original or subsequent, shall be necessary if, on any occasion when such notice is required under this rule, such midwife has previously given notice to the appropriate Local Supervising Authority of her intention to practise as a midwife in their area.

Instructions of Doctor in Charge of Case

22. A midwife acting as a maternity nurse must obtain her instructions concerning the care of the patient from the registered medical practitioner in charge of and responsible for the case and must faithfully carry out such instructions.

Register of Cases

23. A midwife acting as a maternity nurse must enter in a personal register of cases kept in a form approved by the Board every case which she attends as a maternity nurse at the time of labour.

Records of Pregnancy, Labour and Lying-in Period

24. A midwife acting as a maternity nurse must keep records of her observations on the patient (i) if she visits or attends on the instructions of the doctor at any time before the commencement of labour; (ii) if the doctor is not present during the whole course of labour; and (iii) during the lying-in period, using for the purpose either the form prescribed by the Board from time to time or a form in which such prescribed form is incorporated without amendment.

Preservation of Records

25. A midwife acting as a maternity nurse must not destroy or arrange for the destruction of official records required to be kept by these Rules. If she finds it impossible or inconvenient to preserve them, she must hand them to the Local Supervising Authority.

Treatment outside a Midwife's Province

26. A midwife acting as a maternity nurse must not, except in a grave emergency, undertake any treatment outside her normal province. The question whether in any particular case such treatment was justified will be judged on the facts and circumstances of the case.

27. A midwife acting as a maternity nurse must forthwith note in her personal register of cases each occasion on which she administers or applies in any way any drug, other than a simple aperient, the name and dose of the drug, and the date and time of its administration or application.

Facilities for Inspection

28. A midwife acting as a maternity nurse must give the medical officer of health or any registered medical practitioner on the staff of such officer or any supervisor of midwives of any Local Supervising Authority to which such midwife is required to send a notice in accordance with the provisions of Rule E. 21 every

reasonable facility for the inspection of her personal register of cases and other records, her appliances, her methods of practice, and, when the authority deem it necessary for preventing the spread of infection, must allow herself to be medically examined.

DISINFECTION

29. If the midwife acting as a maternity nurse has been in contact with a person, whether or not a patient, suffering from any condition which is or may reasonably be suspected to be infectious or if she herself is liable to be a source of infection, she must without delay notify the Local Supervising Authority or Authorities to which she has sent a notification in accordance with the provisions of Rule E. 21, using for the purpose the form prescribed in Form (*c*) of the Schedule and must carry out or allow to be carried out to the satisfaction of the Local Supervising Authority such measures of disinfection as the Local Supervising Authority may prescribe.

NOTIFICATION OF DEATHS AND STILLBIRTHS

30. If the patient or child dies or if the child is stillborn a midwife acting as a maternity nurse who was in attendance at the time of death or stillbirth or who was called in immediately afterwards must, whether or not a registered medical practitioner was present at the same time, notify the Local Supervising Authority of the death or stillbirth, using for the purpose the form prescribed in Form (*e*) of the Schedule.

LAYING OUT A DEAD BODY

31.—(*a*) A midwife must not lay out a dead body for burial except in the case of a patient upon whom she has been in attendance at the time of death in the capacity of a midwife, maternity nurse or nurse.

(*b*) After laying out a dead body for burial a midwife must notify the Local Supervising Authority on the form prescribed in Form (*f*) of the Schedule and if there are any grounds for suspecting that the person has died as the result of an infectious condition, the midwife must notify the Local Supervising Authority and act in accordance with Rule E. 29.

PART IV. RULES RELATING TO MIDWIVES IN AN INSTITUTION WHICH HAS A RESIDENT MEDICAL OFFICER AND WHERE THE NUMBER OF MATERNITY BEDS IS 15 OR MORE

GENERAL

32. In this part of Section E, unless the context otherwise requires, the following expressions have the meanings hereby respectively assigned to them:—

"practising midwife" means a woman whose name is on the Roll of Midwives and who is practising or acting as a midwife;

"notice of intention to practise" means the notice required to be given by a midwife under section 10 of the Midwives Act, 1902, of her intention to practise as a midwife.

NOTIFICATION OF INTENTION TO PRACTISE

33. Whenever a midwife gives notice in writing of intention to practise, she shall send to the Local Supervising Authority the form prescribed in Form (*a*) of the Schedule duly completed and signed by her.

TREATMENT OUTSIDE A MIDWIFE'S PROVINCE

34.—(*a*) A practising midwife must not, except in a grave emergency, undertake any treatment which is outside her normal province. The question whether in any particular case such treatment was justified will be judged on the facts and circumstances of the case.

(*b*) A practising midwife must not on her own responsibility 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 administration or application.

35. When a practising midwife administers or applies in any way any drug, other than a simple aperient, she must forthwith make a proper record of the name and dose of the drug and the date and time of its administration or application.

PART V. RULES RELATING TO MIDWIVES PRACTISING AS SUCH IN AN INSTITUTION (INCLUDING A NURSING HOME) WHICH DOES NOT FULFIL THE REQUIREMENTS OF PART IV OF SECTION E

General

36. In this part of Section E, unless the context otherwise requires, the following expressions have the meanings hereby respectively assigned to them:—

"practising midwife" means a woman whose name is on the Roll of Midwives and who is practising or acting as a midwife;

"lying-in period" means a period being not less than 14 days nor more than 28 days after the end of labour during which the continued attendance of the midwife on the mother and child is requisite;

"notice of intention to practise" means the notice required to be given by a midwife under section 10 of the Midwives Act, 1902, of her intention to practise as a midwife.

"Schedule" means the Schedule to Section E.

Notification of Intention to Practise

37. Whenever a midwife gives notice in writing of intention to practise she shall send to the Local Supervising Authority the form prescribed in Form (*a*) of the Schedule duly completed and signed by her.

Register of Cases

38. A practising midwife must enter in a personal register of cases kept in a form approved by the Board every case which is delivered by her in the capacity of a midwife.

Provided that this rule shall not apply to a midwife in a hospital, nursing home or similar institution where a register or record is kept which incorporates the requirements prescribed in the case record approved by the Board.

Records of Pregnancy, Labour and Lying-in Period

39. A practising midwife must keep notes of her observations and treatment of her patient during pregnancy, labour and the lying-in period, using for such purpose either the form prescribed by the Board from time to time or a form in which such prescribed form is incorporated without amendment.

Provided that this rule shall not apply to a midwife in a hospital, nursing home or similar institution where a register or record is kept which incorporates the requirements prescribed in the case record approved by the Board.

Preservation of Records

40. A midwife must not destroy or arrange for the destruction of official records required to be kept by these Rules. If she finds it impossible or inconvenient to preserve them she must hand them to the Local Supervising Authority or the institution for which she works.

Treatment outside a Midwife's Province

41.—(*a*) A practising midwife must not, except in a grave emergency, undertake any treatment which is outside her normal province. The question whether in any particular case such treatment was justified will be judged on the facts and circumstances of the case.

(*b*) A practising midwife must not on her own responsibility 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 administration or application.

42. When a practising midwife administers or applies in any way any drug, other than a simple aperient, she must forthwith make a proper record of the name and dose of the drug and the date and time of its administration or application.

FACILITIES FOR INSPECTION

43. A practising midwife must give to the medical officer of health of the Local Supervising Authority or any registered medical practitioner on the staff of such officer or any supervisor of midwives of the Local Supervising Authority every reasonable facility for the inspection of her personal register of cases and other records, her appliances, her methods of practice and, when the authority deem it necessary for preventing the spread of infection, must allow herself to be medically examined.

CALLING IN MEDICAL AID

44. A practising midwife must call in a registered medical practitioner in all cases of illness of the patient or child, or, in the case of any abnormality becoming apparent in the patient or child, during pregnancy, labour or the lying-in period. She must also send or hand to the registered medical practitioner the form prescribed in Form (*b*) of the Schedule, properly filled in and signed by her. The conditions referred to in this Rule shall be deemed to be emergencies for the purpose of Section 14 of the Midwives Act, 1918.

45. A practising midwife must notify the Local Supervising Authority of the area in which the institution is situated whenever medical aid has been called in for the patient or child, whether by the midwife or by the patient or by the patient's friend or relative, by sending to them forthwith a copy of the form prescribed in Form (*b*) of the Schedule.

46.—(*a*) If a registered medical practitioner has been called in and attends on account of an emergency as defined in Rule E. 44 the midwife must obtain her instructions direct from such practitioner and must carry out the instructions she receives. If the midwife receives only verbal instructions, she must keep a note of such instructions in her records.

(*b*) If the emergency on account of which medical aid has been called in is a condition which threatens immediate danger to the life of the patient or child, the midwife must remain and do her best for the patient or child until the crisis has passed.

47. When during the attendance of a registered medical practitioner called in in accordance with Rule E. 44 and before the patient is discharged from the institution, a new emergency arises other than and unconnected with the emergency for which medical aid has already been called in, the midwife must fill in and sign in respect of the new emergency the form prescribed in Form (*b*) of the Schedule and hand or send the completed form to the practitioner in attendance and notify the Local Supervising Authority in accordance with the provisions of Rule E. 45.

DISINFECTION

48. If a practising midwife has been in contact with a person, whether or not a patient, suffering from any condition that is or may reasonably be suspected to be infectious, or if she herself is liable to be a source of infection, she must without delay notify the Local Supervising Authority or Authorities of the fact, using for the purpose the form prescribed in Form (*c*) of the Schedule, and before going to any maternity patient she must, unless the Authority relieve her of the obligation, carry out or allow to be carried out to the satisfaction of the Local Supervising Authority such measures of disinfection as the Local Supervising Authority may prescribe.

NOTIFICATION OF DEATHS AND STILLBIRTHS

49. If the patient or child dies or if the child is stillborn a practising midwife who was in attendance at the time of death or stillbirth or who was called in immediately afterwards must, whether or not a registered medical practitioner was present at the same time, notify the Local Supervising Authority of the death or stillbirth, using for the purpose the form prescribed in Form (*e*) of the Schedule.

Laying out a Dead Body

50.—(*a*) A midwife must not lay out a dead body for burial except in the case of a patient upon whom she has been in attendance at the time of death in the capacity of a midwife, maternity nurse or nurse.

(*b*) After laying out a dead body for burial a midwife must notify the Local Supervising Authority on the form prescribed in Form (*f*) of the Schedule and if there are any grounds for suspecting that the person has died as the result of an infectious condition, the midwife must notify the Local Supervising Authority and act in accordance with Rule E. 48.

PART VI. RULES RELATING TO MIDWIVES ACTING AS MATERNITY NURSES IN AN INSTITUTION (INCLUDING A NURSING HOME) WHICH DOES NOT FULFIL THE REQUIREMENTS OF PART IV OF SECTION E

General

51. In this Part of Section E, unless the context otherwise requires, the following expressions have the meanings hereby respectively assigned to them:—

"midwife" means a woman whose name is on the Roll of Midwives;

"maternity nurse" means a midwife who in any maternity case is acting under the direction and personal supervision of a registered medical practitioner who

(i) is resident in, or attached to the institution, or who has been engaged to deliver the patient;

(ii) is notified of the onset of labour;

(iii) either delivers the patient or is present in the labour room at the time of delivery and personally supervises and directs the midwife; and

(iv) continues to be in charge of and responsible for the case throughout the patient's period of stay in the institution.

"lying-in period" means a period being not less than 14 days nor more than 28 days after the end of the labour during which the continued attendance of the midwife on the mother and child is requisite.

"Schedule" means the Schedule to Section E.

Notification to Local Supervising Authority of Intention to Act as a Maternity Nurse

52. A midwife before holding herself out as a maternity nurse or beginning to act as a maternity nurse in any area must give notice, on the form prescribed in Form (*g*) of the Schedule, of her intention so to do to the Local Supervising Authority and shall give a like notice in the month of January in every year thereafter during which she continues to act as a maternity nurse in such area. Such notice shall be given to the Local Supervising Authority of the area within which such midwife usually resides or works, and a like notice, on the prescribed form, shall be given to every other Local Supervising Authority within whose area such midwife at any time acts as a maternity nurse, within 48 hours at the latest after she begins so to act. But no such notice, whether original or subsequent, shall be necessary if, on any occasion when such notice is required under this Rule, such midwife has previously given notice to the appropriate Local Supervising Authority of her intention to practise as a midwife in their area.

Instructions of Doctor in Charge of Case

53. A midwife acting as a maternity nurse must obtain her instructions concerning the care of the patient from the registered medical practitioner in charge of and responsible for the case and must faithfully carry out such instructions.

Register of Cases

54. A midwife acting as a maternity nurse must enter in a personal register of cases kept on a form approved by the Board every case which she attends as a maternity nurse at the time of labour.

Provided that this rule shall not apply to a midwife acting as a maternity nurse in a hospital, nursing home or similar institution where a register or record is kept which incorporates the requirements prescribed in the case record approved by the Board.

Records of Pregnancy, Labour and Lying-in Period

55. A midwife acting as a maternity nurse must keep notes of her observations on the patient (i) if she visits or attends on the instructions of the doctor at any time before the commencement of labour; (ii) if the doctor is not present during the whole course of labour; and (iii) during the lying-in period, using for the purpose either the form prescribed by the Board from time to time or a form in which such prescribed form is incorporated without amendment.

Provided that this rule shall not apply to a midwife acting as a maternity nurse in a hospital, nursing home or similar institution where a register or record is kept which incorporates the requirements prescribed in the case record approved by the Board.

Preservation of Records

56. A midwife acting as a maternity nurse must not destroy or arrange for the destruction of official records required to be kept by these Rules. If she finds it impossible or inconvenient to preserve them she must hand them to the Local Supervising Authority or the institution for which she works.

Treatment Outside a Midwife's Province

57. A midwife acting as a maternity nurse must not, except in a grave emergency, undertake any treatment which is outside her normal province. The question whether in any particular case such treatment was justified will be judged on the facts and circumstances of the case.

Facilities for Inspection

58. A midwife acting as a maternity nurse must give the medical officer of health or any registered medical practitioner on the staff of such officer or any supervisor of midwives of any Local Supervising Authority to which such midwife is required to send a notice in accordance with the provisions of Rule E. 52 every reasonable facility for the inspection of her personal register of cases and other records, her appliances, her methods of practice, and, when the authority deem it necessary for preventing the spread of infection, must allow herself to be medically examined.

Disinfection

59. If a midwife acting as a maternity nurse has been in contact with a person, whether or not a patient, suffering from any condition which is or may reasonably be suspected to be infectious or if she herself is liable to be a source of infection, she must without delay notify the Local Supervising Authority or Authorities to whom she has sent a notification in accordance with the provisions of Rule E. 52, using for the purpose the form prescribed in Form (*c*) of the Schedule, and must carry out or allow to be carried out to the satisfaction of the Local Supervising Authority such measures of disinfection as the Local Supervising Authority may prescribe.

Notification of Deaths and Stillbirths

60. If the patient or child dies or if the child is stillborn, a midwife acting as a maternity nurse who was in attendance at the time of death or stillbirth or who was called in immediately afterwards must, whether or not a registered medical practitioner was present at the same time, notify the Local Supervising Authority of the death or stillbirth, using for the purpose the form prescribed in Form (*e*) of the Schedule.

Laying out a Dead Body

61.—(*a*) A midwife must not lay out a dead body for burial except in the case of a patient upon whom she has been in attendance at the time of death in the capacity of a midwife, maternity nurse or nurse.

(*b*) After laying out a dead body for burial a midwife must notify the Local Supervising Authority on the form prescribed in Form (*f*) of the Schedule and if there are any grounds for suspecting that the person has died as the result of an infectious condition, the midwife must notify the Local Supervising Authority and act in accordance with Rule E. 59.

SCHEDULE TO SECTION E

PRESCRIBED FORMS

62. For the purpose of the preceding rules the use of the following forms shall be compulsory:—

Form (a): Notification of Practice

I. *Particulars required under Section* 10, *Midwives Act,* 1902.

To the Local Supervising Authority of .....

I, ... A. B. .....

present address .....

permanent address (if different from above) .....

.....

holding a certificate of the Central Midwives Board, No. .....,

Date ....., 19 ..... hereby give you notice of my INTENTION TO PRACTISE as a midwife within your area during the year 19.....

(and within 48 hours in the event of having practised outside any area notified as above)

I, ... A. B. .....

residing at ..... and

pursuing my calling at .....

ACTED AS A MIDWIFE AT .....

within your area on the ..... day of ..... 19 .....

II. *Particulars required under Rule E.* 4, 33, *or* 37, *of Section E. of the Rules of the Central Midwives Board.*

(i) I last notified my intention to practise as a midwife on .....:

..... 19 ..... to the Local Supervising Authority of .....

.....

(ii) I attended a post-certificate course of instruction in accordance with the rules in Section G of the Rules of the Central Midwives Board at .....

Home / Hospital from ..... 19 ..... to ..... 19 .....

(iii) ‡The number of cases I attended during the past year was as follows:—

	In the area of the Authority to which this form is sent.	In the areas of other Authorities.
(*a*) as a midwife	.....	.....
(*b*) as a maternity nurse	.....	.....

(iv) I, ...

*(*a*) practise independently or from a Nursing Employment Agency.

*(*b*) am employed by†.....

Signed ..... State Certified Midwife.

Date ..... 19 .....

NOTE.—*Section II to be completed in all cases except when notifying within 48 hours of having practised outside the area.*

* *Delete as appropriate.*

† *Here state Hospital, Nursing Home, Local Authority, District Nursing Association, as the case may be.*

‡ *The information in sub-section (iii) is only required of midwives in domiciliary practice.*

Form (b): Form for sending for Medical Aid. (See Rules E. 12, 13, 15, 44, 45 and 47.)

No..... Date.....

This notice is sent in respect of *.....

Address.....

Medical aid is sought by†.....

on account of.....

Date of confinement.....

‡The case is urgent.

Sent to (name of doctor or institution).....

at (address).....

Time of sending message { By telephone..... / By messenger.....

Signed.....State Certified Midwife.

Address .....

NOTE.—*Information as to stage of labour and other particulars should be given.*

* *Here fill in name of patient.*
† *Here insert "me," "patient," "patient's relative/friend" as the case may be.*
‡ *If the case is not urgent, cross this out.*

Form (c): Form for Notification of Liability to be a Source of Infection. (See Rules E. 16, 29, 48 and 59.)

To the Local Supervising Authority of.....

I, the undersigned, being a midwife holding the Certificate No.....of the Central Midwives Board, hereby notify that on the.....day of.....19..
I was §in attendance upon, or §in contact with

Name.....

Address.....

a person suffering from a condition which is, or is suspected to be infectious, viz.,

.....

or I §am myself suffering from, or §have recently suffered from

.....

Signed.....State Certified Midwife.

Address.....

Date.....

§ *Strike out the words not applicable.*

Form (d): Form for Notification of Artificial Feeding. (See Rule E. 17.)

To the Local Supervising Authority of.....

I, the undersigned, being a midwife holding the Certificate No.....of the Central Midwives Board, and being in attendance on

Name.....

Address.....

hereby notify that on the.....day of.....19.. †.....was adopted *in addition to / *in place of breast feeding because ‡.....

.....

The child was born on the.....day of.....19..

In cases where the patient was delivered in an Institution the following information should also be given, whenever possible:

The patient is expecting to leave the institution on or about the.....day of.....19.. and proposes to go to the following address.....

.....

Signed.....State Certified Midwife.

Address.....

Date.....

* *Strike out the words not applicable.*
† *Name of food.*
‡ *Give reasons.*

Form (e): Form for Notification of Death or Stillbirth. (See Rules E. 18, 30, 49 and 60.)

To the Local Supervising Authority of.....

I, the undersigned, being a midwife holding the Certificate No.....of the Central Midwives Board, hereby notify that on the .....day of.....19.. at *A.M. / *P.M. the following death occurred in my practice *before / *after the arrival of the registered medical practitioner.

Name of deceased.....Age.....

Address.....

or

Name.....

Address.....

was delivered *by me / *before my arrival of a stillborn child.

Signed.....State Certified Midwife.

Address.....

Date.....

NOTE.—*This form must not be used for burial purposes. The midwife can obtain a form of Certificate of Stillbirth from the Registrar of Births and Deaths.*

* *Strike out the words not applicable.*

Form (f): Form for Notification of having Laid Out a Dead Body for Burial. (See Rules E. 19, 31, 50 and 61.)

To the Local Supervising Authority of.....

I, the undersigned, being a midwife holding the Certificate No.....of the Central Midwives Board, hereby notify that on the.....day of.....19.. I *prepared or *assisted to prepare the dead body of

Name of deceased.....Age.....

Address.....

*on whom I was in attendance at the time of death *(a) as a midwife, *(b) as a maternity nurse, *(c) as a nurse.

If the body is that of a stillborn child, here state so.....

.....

If the body is that of a person suspected of having died as the result of an infectious condition, here state so.....

.....

Signed.....State Certified Midwife.

Address.....

Date.....

* *Strike out the words not applicable.*

Form (g): Form for Notification to Local Supervising Authority of Intention to Act or of having Acted as a Maternity Nurse. (See Rules E. 21 and 52.)

THIS NOTICE TO BE SENT BEFORE BEGINNING TO ACT AS A MATERNITY NURSE AND A LIKE NOTICE IN THE MONTH OF JANUARY IN EACH YEAR

To the Local Supervising Authority of.....

I. *(a) I, ...

Address .....

being a State Certified Midwife holding the Certificate No.....dated the.....day of.....19.. of the Central Midwives Board hereby give you notice, in accordance with the provisions of Rule *21 and *52 in Section E. of the Rules of the Central Midwives Board, OF MY INTENTION TO ACT AS A MATERNITY NURSE within your area during the year 19..

Dated this.....day of.....19..

Signed.....

(and within 48 hours in the event of having practised outside any area notified as above)

*(b) I, ...

residing at.....and pursuing my calling at.....ACTED AS A MATERNITY NURSE at.....

within your area on the.....day of.....19..

* *Strike out the words not applicable.*

Dated this.....day of.....19.....

Signed.....

II. (*a*) I last notified my intention $\frac{\text{*to practise as a midwife}}{\text{*to act as a maternity nurse}}$ on.....

day of.....19.....to the Local Supervising Authority of.....

† (*b*) The number of cases I attended during the past year was as follows:—

	In the area of the Authority to which this form is sent	In the area of other Authorities
(i) as a maternity nurse	.....	.....
(ii) as a midwife	.....	.....

* *Strike out the words not applicable.*

† *The information in subsection (b) of section II is only required from midwives in domiciliary practice.*

NOTE.—*Section II to be completed in all cases except when notifying within 48 hours of having practised outside the area.*

SECTION F

RULES DECIDING THE CONDITIONS UNDER WHICH MIDWIVES MAY BE SUSPENDED FROM PRACTICE

1. In carrying out the provisions of section 8 (3) of the Midwives Act 1902, it shall be the duty of the Local Supervising Authority to suspend a midwife from practice when necessary for the purpose of preventing the spread of infection, whether she has contravened any of the rules laid down by the Board or not. The decision to suspend a midwife must be communicated, in writing, by the Local Supervising Authority to the midwife concerned.

2. The period of suspension under the foregoing Rule shall not be longer than is required by the midwife for the purpose of carrying out or allowing to be carried out, to the satisfaction of the Local Supervising Authority, such measures of disinfection as the Local Supervising Authority have prescribed.

When the midwife has carried out the prescribed measures of disinfection and otherwise complied with the instructions communicated to her in writing by the Local Supervising Authority, she may resume practice without awaiting authorisation from the Local Supervising Authority unless the Authority have otherwise directed.

3. The Board may—

(*a*) suspend from practice for such period as they think fit in lieu of removing her name from the Roll any midwife who, after investigation by the Board in the manner prescribed by the Rules of Section D of the Rules of the Board, has been found guilty of disobeying the Rules of the Board, or of other misconduct;

(*b*) suspend from practice until the case has been decided by the Board, and, in the case of an appeal, until the appeal has been decided by the High Court, any midwife whose conduct is under investigation by the Board on a charge of disobeying the Rules, or of other misconduct.

4. The Local Supervising Authority may suspend from practice until the case has been decided—

(*a*) a midwife against whom they have taken proceedings before a Court of Justice;

(*b*) a midwife against whom they have reported a case for consideration by the Board.

The Local Supervising Authority shall in each case communicate their decision in writing to the midwife concerned, and forthwith report the suspension (with the grounds thereof) to the Board.

SECTION G *

RULES REQUIRING MIDWIVES TO ATTEND FROM TIME TO TIME A COURSE OF INSTRUCTION APPROVED BY THE BOARD

PART I.—RELATING TO MIDWIVES WHO NOTIFY THEIR INTENTION TO PRACTISE

1. In Part I of these Rules the following expressions have the meanings hereby respectively assigned to them—

"approved institution" means an institution approved by the Board in accordance with the provisions hereinafter contained for the conduct of courses of instruction prescribed in Part I of these Rules.

"tutor" means a midwife who is on the staff of an approved institution and who has been nominated by such institution and approved by the Board for the performance of the duties prescribed in Rules G. 5 and G. 6 (*a*).

"appropriate Local Supervising Authority" means the Local Supervising Authority in whose area a midwife conducts the whole or the greater part of her practice.

2. Every midwife who in any year gives notice in writing to a Local Supervising Authority of her intention to practise as such shall within 12 months of the giving of such notice (subject nevertheless as hereinafter provided) complete to the satisfaction of the Board a course of instruction of the nature prescribed by Rule G. 5 extending over a period of not less than 4 consecutive weeks at an approved institution unless:—

(*a*) she is exempted under the provisions contained in Rule G. 3; or

(*b*) she has within the 7 years immediately preceding the year in question either completed a like course to the like satisfaction or passed the examination or examinations for the time being prescribed by the Board for admission to the Roll of Midwives:

Provided that if such midwife has not practised as a midwife or acted as a maternity nurse during the 2 years immediately preceding the year in question she may be required by the Board (notwithstanding that she would otherwise be exempted under paragraph (*b*) of this Rule) to complete to its satisfaction a course of instruction of such nature and duration as they may think proper before resuming or entering practice as a midwife.

3.—(*a*) The provisions of Rule G. 2 shall not apply in the case of—

(i) a midwife who has been approved by the Board as a teacher of pupil-midwives, during the period of her approval;

(ii) the matron of an institution approved by the Board for the purpose of this Rule, during the period of her appointment and such of the midwives on the permanent staff of such institution as the Board may decide, during the period of their respective appointments.

(*b*) The Board shall have the power to exempt from the provisions of Rule G. 2 such other classes of midwives and on such conditions (if any) as they think fit.

4. The Board, at the request of a Local Supervising Authority and subject to such conditions as they think fit, may vary the requirements of Rule G. 2 by making the interval shorter than 7 years or the duration of the course of instruction longer than 4 weeks, in the case of any midwife or of all the midwives subject to the provisions of the Rule and practising in the area of such authority.

5. The course of instruction shall be residential and shall be organized and administered specially for practising midwives. The instruction shall be mainly by personal tuition and shall be theoretical and practical. The curriculum of instruction for each midwife shall be determined by the tutor after receiving a confidential report on the midwife from the appropriate Local Supervising Authority; but, unless there is any special reason to the contrary in the case of any particular midwife, the curriculum shall include—

(*a*) the conduct of labours, both normal and abnormal, and the nursing of patients and their infants;

* See Rule 3 (General) on p. 2522.

(*b*) participation in the work of the ante-natal and post-natal clinics of the approved institution (including the ante-natal examination of patients), ante-natal visits to patients in their own homes and also visits to infant welfare clinics;

(*c*) attendance at suitable special hospitals, institutions and departments;

(*d*) instruction in the diet of pregnant women and nursing mothers, and practical experience in the management and feeding of infants up to one month old, including premature infants;

(*e*) instruction in the use of apparatus and the preparation of instruments;

(*f*) attendance at theoretical classes.

6.—(*a*) When a midwife has completed the course of instruction the tutor shall send to the Board and to the appropriate Local Supervising Authority, through the authorised officer of the approved institution, a report and a record of the midwife's work during the course. The report and record shall be in such form as may be prescribed by the Board from time to time.

(*b*) If an unsatisfactory report is received the Board may, after consultation with the appropriate Local Supervising Authority, require the midwife to undergo, either immediately or within one year, such further training as they consider desirable.

7. The Board may waive compliance with any of the requirements of the foregoing Rules of Section G in the case of any particular midwife, if, on application from the appropriate Local Supervising Authority or the midwife concerned, and after hearing the midwife or the Local Supervising Authority as the case may be, they think proper.

8. Applications for the approval of institutions for the purpose of the Rules of Section G shall be submitted to the Board in such form as may be prescribed by the Board from time to time.

9. The Board, in approving institutions under Part I of the Rules of Section G, shall take into consideration the number and qualifications of the teaching staff and the adequacy of the arrangements for the personal tuition of the midwives attending the course of instruction, the relation between the course of instruction prescribed in Part I of the Rules of Section G, and the training of pupil-midwives, the facilities available for instruction on the subjects enumerated in Rule G. 5, and the nature and extent of the residential accommodation. The Board may cause the institution and the training therein to be inspected by a member or an officer of the Board, or other person, whose report shall be considered when the question of approval is determined.

PART II.—RELATING TO MIDWIVES WHO DO NOT NOTIFY THEIR INTENTION TO PRACTISE BUT WHO ARE EMPLOYED BY LOCAL SUPERVISING AUTHORITIES AS SUPERVISORS OR ASSISTANT SUPERVISORS OF MIDWIVES.

10. Every midwife employed by a Local Supervising Authority as a supervisor or assistant supervisor of midwives shall within 5 years from the commencement of such employment or, if she was so employed on the date on which the Rules in Section G come into operation, within 5 years from that date, attend a course of instruction approved by the Board, and shall thereafter attend a similar course at intervals of not less than 5 years:

Provided that:—

(i) after the first attendance the Local Supervising Authority may arrange that any subsequent attendance of the midwife in question shall be at an interval shorter or (with the approval of the Board) longer than 5 years;

(ii) A midwife who is employed as provided in this Rule having formerly been so employed shall attend such course as aforesaid within twelve months of such re-employment or if she has within the 5 years immediately preceding re-employment attended such course within 5 years of such attendance.

11. A course of instruction shall not be approved by the Board for the purpose of Part II of the Rules of Section G unless it is in two parts, viz.:— a first part extending over not less than one week and consisting of lectures and practical demonstrations on the various phases of midwifery work and a

second part consisting of a visit or visits to a Local Supervising Authority other than that in whose area the midwife works, for the purpose of studying the methods adopted by the officers of such authority in the supervision of midwives in the area.

The two parts of the course need not be taken consecutively.

12. In January of each year every Local Supervising Authority shall report to the Board the names of the midwives working in their area who have attended during the preceding year a course of instruction in accordance with the provisions of Part II of the Rules of Section G.

13. The Board may waive compliance with any of the requirements of the Rules G. 10 to G. 12 inclusive, in any case in which they think proper.

SECTION H

RULES DEFINING THE CONDITIONS UNDER WHICH A BADGE MAY BE ISSUED TO A MIDWIFE

1. The Board shall (subject to the conditions contained in the following rules) issue a badge to midwives desirous of wearing one. Such badge shall be of the form and design approved by the Board. The badge shall be of metal or embroidered on fabric.

2. The conditions attaching to the issue of the badge shall be as follows:—

(*a*) Application for the badge must be made to the Secretary on a form which will be supplied on request. Such request must be accompanied by a stamped addressed envelope.

(*b*) The form of application referred to in (*a*) must be filled up correctly in all particulars and must be accompanied by a postal order for 6s.

(*c*) The badge must be hung on the approved dark blue cord and worn round the neck, or worn in brooch form on a working dress of a type approved by the Board.

(*d*) The badge is and shall continue to be the property of the Board and shall be returnable to the Board on the removal of the name of the holder from the Roll of Midwives from any cause whatsoever.

(*e*) A midwife to whom a badge has been issued shall in no circumstances permit the badge so issued to be worn or displayed by any other person whatsoever.

(*f*) The Board reserve the right to refuse to issue a badge to a certified midwife on any grounds which may seem just to them.

(*g*) The Board shall be under no obligation to issue a duplicate badge to a midwife to whom a badge has already been issued. A midwife should, therefore, exercise the greatest care in the safe custody of the badge which has been issued to her.

3. The embroidered badge shall be worn on a hat of a type approved by the Board.

Given under the official seal of the Minister of Health this twenty-third day of September, nineteen hundred and forty-nine.

(L.S.)

Wm. S. Douglas,
Secretary,
Ministry of Health.

EXPLANATORY NOTE

(This Note is not part of the Instrument, but is intended to indicate its general purport.)

The Rules approved by this Instrument are a consolidation of all Rules previously made by the Central Midwives Board, with slight amendments of a purely drafting nature.