

of the T.N.A., and that they forward any resolution to the Hospital Board with the recommendation direct from the Trained Nurses' Association; that we do not want the Hospital Boards to do our job. We recommend that all matters concerning nurses and nursing education should, before being placed before the Hospital Boards, be referred to our representative on the Hospital Board, so that she might be conversant with all the points of argument in favour of those remits being carried by the Hospital Board. The point brought up was that the remits came before the Hospital Board and the members said they looked all round and there was no one who could enlighten them in any way on the points we had raised. It was not that they were not thoroughly in sympathy, but they did not quite know how to deal with. If we sent them to our own representative, we would get a very much more sympathetic hearing on the Board."

Mrs. Kidd:

"I would like to point out that the Auckland Hospital Board is taking nurses in their fourth year for this extra period as staff nurses."

Miss Holford:

"We understood that after the remit was sent in."

#### **Salaries:**

(a) That all organisations employing Public Health Nurses (not already doing so) should be approached on the subject that when a nurse is appointed, her commencing salary should be a minimum one rising to a maximum.

(b) That after a certain number of years' satisfactory service, the then maximum salary of a Public Health Nurse should be raised.—Carried.

Miss Lambie:

"As regards the first portion of this remit. It is of very great importance to nurses who are employed by the voluntary organisations such as the Red Cross, the Voluntary District Nurses' Association, and it also applies to many of the District Nurses employed by Hospital Boards. A certain number are employed

with salaries rising to a maximum; some are appointed at a stated salary, and no matter how many years' service, they do not get any increase in salary. The support of this Association behind these nurses would be very valuable. They feel they cannot approach their organisation, as they might be told their services can be done without.

"Second portion. Recently in England the Ministry of Health has been considering the remit sent forward to them by the College of Nursing. It has been suggested that the maximum salary should be raised, because in the majority of cases nurses reach their maximum in about four years and have to go on indefinitely, many giving 10 to 20 years' service at that maximum. It has been suggested at the end of 10 years' satisfactory service the maximum be raised £20. That is a matter that can be discussed here."

Miss Bagley:

"There are cases in the Public Service where, after a period of ten years, a recommendation has been made for an increase of salary for District Nurses under the Department. If a nurse has reached her maximum, a recommendation can be made that her salary be increased."

It was moved, seconded and carried: "That Hospital Boards and every voluntary organisation in the four main centres be circularised."

#### **Maternity Nursing.**

"That during the Conference a Committee be set up to study the question of recompense to practising maternity nurses and midwives who, through no fault of their own, are debarred from work due to some notifiable condition, as is the practice under the English Act."

A member: "When a midwife has been debarred from work in order to prevent the spread of infection, through no fault of her own, she should be entitled to recover something through loss of practice. In New Zealand it is really the Government who closes down the hospital or calls the nurse off duty. Therefore the Government would be the responsible