Viscount PEEL, Under Secretary for War, said this was a very important and painful question, described under the compendious but inaccurate term of shell-shock. No doubt there were cases of shell-shock in former wars, but they were not recognised as such because we had not got the information that we had at present. He was unable to say whether during the late war cases of injustice occurred, but immense trouble was taken at courts-martial and in the subsequent proceedings that no persons should be condemned to death unless for the gravest and most serious reasons, and unless all these different causes had been eliminated. Lord Horne, who spoke with authority and experience, had testified to the great trouble that had been taken in all stages of the procedure of the court-martial, and of confirmation to see that no man was condemned to death who was able justifiably to plead shell-shock or some mental damage of that kind. Where a soldier in his defence or in mitigation of punishment urged a substantial plea on mental grounds medical witnesses were called, and the court-martial was adjourned and a medical board was held. At the adjourned hearing one or more members of the board were called as witnesses to give evidence as to the effects observed and the conclusion of the board upon them. A mental specialist was always included if there was a suggestion of shell-shock or any other kind of mental or nervous disorder. If there were the slightest grounds for further inquiry, the Army or General Headquarters ordered a medical board to examine and to report before any action was taken to confirm the death sentence. No sentence of death was carried out in any theatre of war unless it was confirmed by the Commander-in-Chief of the Force, who invariably consulted the Judge Advocate-General. The view of the Government was that great advantages might be obtained by such an inquiry as was suggested. Many of the nervous and mental conditions encountered were entirely new to the medical officers. The connection between the forms of the disease met with during the war and in civil life was very close, and experience gained during the war might be of great value in other fields. The War Office were glad to accept the view that a departmental committee should be appointed.

June 28th : Ex-Service Men in Pauper Asylums.—Mr. HURD asked the Prime Minister whether his attention had been called to a resolution of the National Council of the Evangelical Free Churches regarding the incarceration of ex-Service men in pauper asylums; whether any ex-Service men were so incarcerated; and what steps would be taken to secure their treatment in a way commensurate with their service.—Major TRYON (Parliamentary Secretary to the Ministry of Pensions) replied: My right honourable friend's attention had not been called to the resolution referred to, but I may say that any ex-Service man suffering from certifiable insanity who is confined in a county or borough asylum is by special arrangement treated not as a pauper lunatic, but as a Service patient, if his condition is found to be due to his service in the late war. As a Service patient he is entitled to all the privileges of a private patient, the entire cost of his maintenance and treatment and of the special privileges accorded to him being borne by the Ministry of Pensions. I am satisfied that it would not be in the interests of the men themselves or of their relatives that they should be treated in special establishments devoted exclusively to ex-Service cases. I am, however, taking steps to assure myself that the present arrangements are in all cases working satisfactorily and are the best that can be made in the interests of these unfortunate men.

THE FIRST GENERAL NURSING COUNCIL, ENGLAND.

THE following persons have been appointed to form the first General Nursing Council under the Nurses' Registration Act of 1919:

Appointed by Privy Council.—Lady Hobhouse and Mr. J. C. Priestley, K.C.

Appointed by Board of Education.—The Hon. Mrs. Eustace Hills and Miss Batty Tuke, Bedford College.

Appointed by Minister of Health.—The Rev. G. B. Cronshaw, Radcliffe Infirmary, Oxford; Dr. E. W. Goodall, Dr. A. Bostock Hill, Dr. Bedford Pierce, and Sir T. Jenner Verrall, M.D.

Nurses Appointed by Minister of Health.—Miss A. Cattell, private practice; Mr. T. Christian, nurse, Banstead Lunatic Asylum; Miss A. Coulton, matron, Shadwell

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Children's Hospital; Miss R. Cox-Davies, R.R.C., matron, Royal Free Hospital; Miss A. Dowbiggin, C.B.E., R.R.C., matron, Edmonton Poor Law Infirmary; Mrs. E. G. B. Fenwick, formerly matron, St. Bartholomew's Hospital; Miss A. Lloyd-Still, C.B.E., R.R.C., matron, St. Thomas's Hospital; Miss M. MacCullum, Professional Union of Trained Nurses; Miss I. Macdonald, Royal British Nursing Association; Miss A. M. Peterkin, general superintendent, Queen Victoria Jubilee Nurses; Miss E. Smith, Welsh superintendent, Queen Victoria's Jubilee Institute for Nurses; Miss M. E. Sparshott, C.B.E., R.R.C., matron, Royal Infirmary, Manchester; Miss E. C. Swiss, health visitor for Willesden; Miss S. E. Villiers, matron, Stockwell Fever Hospital; Miss C. Worsley, matron, Liverpool Children's Hospital; Miss C. S. Yapp, matron, Ashton-under-Lyne Poor Law Infirmary.

Mr. Priestley has been appointed Chairman of the Council.

NURSES REGISTRATION (SCOTLAND) ACT, 1919.

9 & 10 GEO. 5, CH. 95. *23rd December* 1919.

(See page 190 for English Act.)

1.—(1) For the purposes of this Act, there shall be established a General Nursing Council for Scotland (in this Act referred to as "the Council"), which shall be a body corporate by that name with perpetual succession and a common seal with power to acquire, hold and dispose of land. The Council may sue and be sued by that name, and service on the Council of all legal processes and notices may be effected by service on their registrar.

(2) The Council shall be constituted in accordance with the provisions contained in the Schedule to this Act.

(3) Any document purporting to be sealed with the seal of the Council or to be signed in the name of the Council by their registrar or any person authorised by the Council to act in that behalf shall be receivable in evidence of the particulars stated in that document.

2.—(1) It shall be the duty of the Council to form and keep a register of nurses for the sick (in this Act referred to as "the register") subject to and in accordance with the provisions of this Act.

(2) The register shall consist of the following parts:—(*a*) a general part containing the names of all nurses who satisfy the conditions of admission to that part of the register: (*b*) a supplementary part containing the names of male nurses: (*c*) a supplementary part containing the names of nurses trained in the nursing and care of persons suffering from mental diseases: (*d*) a supplementary part containing the names of nurses trained in the nursing of sick children: (*e*) any other prescribed part.

Where any person satisfies the conditions of admission to any supplementary or prescribed part of the register, his name may be included in that part of the register notwithstanding that it is also included in the general part.

(3) A certificate under the seal of the Council stating that any person is, or was at any date, or is not, or was not at any date, duly registered under this Act shall be conclusive evidence in all courts of law of the fact stated in the certificate.

(4) Any reference in this Act to the register shall, unless the context otherwise requires, be deemed to include a reference to any part of the register, and the expression "registered" shall be construed accordingly.

3.—(1) The Council shall make rules for the following purposes:—(*a*) for regulating the formation, maintenance and publication of the register; (*b*) for regulating the issue of certificates and the conditions of admission to the register; (*c*) for regulating the conduct of any examinations which may be prescribed as a condition of admission to the register, and any matters ancillary to or connected with any such examinations; (*d*) for prescribing the causes for which, the conditions under which, and the manner in which nurses may be removed from the register, the cancellation of certificates of nurses removed from the register, the procedure for the restoration to the register of nurses who have been removed therefrom, and the fee to be payable on such restoration; (*e*) for regulating the summoning of meetings of the Council and the proceedings (including quorum) of the

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