

*The American Journal of Nursing* and the Red Cross Nursing Committee have co-operated in making this possible. This year the Society of Superintendents also joins, and Miss McIsaac, who presided at our first International Congress, is our most efficient and beloved Secretary. Our State Societies are affiliated with the National Association, some made up of individual members and some of local societies. California has the largest individual membership of over 1,000; New York, with over 3,000, is made up principally of County and Alumnae Societies. Thirty-one States have now secured the passage of Registration laws; all, except New Jersey, requiring an examination before a nurse can be registered by the State Board. New Jersey merely requires registration of the school diploma with the County Clerk before practising as a trained nurse in the State.

A few States have a mixed board of examiners, generally of two physicians and three nurses, but the majority consist entirely of nurses, who also act as training-school inspectors, where such an office is constituted. The members of the boards are nominated by the State Associations, and appointed by the Governor, or by the Department of Education, as in New York State, where the Department administers the law. There the whole system of education is controlled by the Department—elementary and high schools, and all professional schools and colleges. A nurse inspector is employed by the Department, whose work is not only to inspect but to help the schools by suggestion and advice in working out the plans and curriculum for registered schools. Examinations are held twice yearly at four different points; between 600 and 700 take the examinations each year in New York, which is about 80 per cent. of those graduating. This is a very good proportion, as many graduates return to their own home States, and prefer to register there, as we have, so far, few reciprocity clauses in our laws. A few schools require the State Examination before granting the diploma. New York State also has an Advisory Council of Superintendents, which meets at the call of the Commissioner of Education. Hospitals are more and more requiring that their Superintendents and Instructors shall be registered nurses, and the New York City Department of Health, which will next year probably have 300 nurses on its staff, employs none but registered nurses.

Much emphasis is put by the examiners on the practical work, and the mechanical or faulty work of the nurse shows not only her own deficiencies but those of her school. Where a large number from a certain school fail, a letter

of inquiry is sent from the Commissioner of Education, followed by a visit from the Inspector. Nowadays the actual training must coincide more closely with the published curriculum than it frequently did.

All registered schools must give maternity training. If not possible in their own hospital, they must affiliate with a maternity hospital, and send their pupils there for from six to eight weeks. The hospital can no longer be a law unto itself, giving what it chooses in the way of training to the pupil.

Many of our schools have, of course, always considered the requirements of their contracts, but to all it has been a stimulus to improve the teaching and the home conditions of the schools. No hospital is registered unless it has, or agrees to build, a nurses' home which meets the State's requirements as to food, sleeping room and sanitary arrangements.

Our hospitals differ from those of England in not being purely for charity patients. Each large city has a city hospital supported by the municipality, or a large privately supported hospital to which free patients are sent and paid for by the city at a rate much less than cost.

In many places where the cost of maintenance is from \$7 to \$14 a week the city pays only \$3 or \$4. All hospitals, with the exception of city or county hospitals, have large wings, or separate pavilions, for private patients, ranging in price from \$10 per week, in a small town, to \$50 or more a week in a larger place. This covers room and board, with the services of the house doctor and nurses, unless the patients prefer their own.

West of the Rockies, especially in California, the hospitals are mainly private corporations, often operated by a group of physicians. Patients all pay, except in a few cases by special arrangement.

In early days in the West, people were all young, no poor, and few sick, and those nearly always able to pay; but time brings changes, and now more charitably supported institutions are springing up. Each has, as a rule, its own training school. Large railroad corporations in the West often build their own hospitals, to which injured employees are sent from hundreds of miles away. These offer an interesting field to a nurse. The English nursing home is practically unknown. The hospital is built by the citizens to meet their city's needs. When free service is required it is freely given; for those who can pay provision is made also, whether it is a bed in a ward or a full suite of rooms with special nurses night and day.

We have no Central District Nursing Associa-

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