

proposed nominations were the three ladies who represented nurses on that Executive, and the Committee would do their best. He moved the adoption.

Mr. Antcliffe seconded, and after a short discussion it was resolved that the report of the Subcommittee be adopted.

As this Association includes every grade male and female of Poor-Law workers, it can hardly claim a right to representation on the Governing Body of the Nursing Profession any more than on the General Medical Council.

## A HOPEFUL STATEMENT.

### FEVER NURSES AND REGISTRATION IN SCOTLAND.

On behalf of nurses in Edinburgh and district, Mr. William Graham, M.P. for Central Edinburgh, has been in communication with the Secretary for Scotland, with reference to certain points in the operation of the Scottish Nurses Registration Bill.

Mr. Munro writes that it has been assumed in some quarters that the Board's examination of fever-trained nurses is to be continued indefinitely, but that is not the case. The Board are contemplating the issue at an early date of a circular regarding the position of nurses at present qualifying for these examinations, and definitely putting a term to the period during which they may obtain the qualification referred to. The specific mention of the Board of Health's certificates in Section 3 (2) of the Scottish Nurses Registration Act refers only to the first register, and is considered necessary for safeguarding the position of nurses examined and certified by the Board.

## THE NURSES' OWN CLUB.

We are glad to learn that the article on "The Nurses' Own Club," by Her Royal Highness Princess Christian, which appeared in our last issue, in the Supplement of the Royal British Nurses' Association, has aroused a great deal of interest, and the scheme is likely to receive much support from members of the Nursing Profession, especially from those resident in London. In this connection it is valuable to know what has been done in other countries, and the article we reprint from *The Modern Hospital* will, we feel sure, be read with great interest by those nurses who are anxious to further a Nurses' Club in London of their own.

### CENTRAL CLUB FOR NURSES.

The beautiful home of the Central Club for Nurses, New York City, is the outcome of a dream which at first threatened to be a nightmare. In 1910 the club opened on Thirty-fourth Street in a club house improvised out of two converted

dwelling houses. A better home was desired but scarcely hoped for. In 1913, when the Young Men's Christian Association and Young Women's Christian Association opened a joint drive for funds, the latter organisation offered, in return for support by the training schools, to devote a certain part of the funds obtained to the erection of a nurses' club house. There was much objection from within the ranks of the nursing profession. It was prophesied that so many women would never choose to live under one roof; that the club could never be made self-supporting; that it would be tainted with charity, and therefore objectionable to the self-sustaining and self-respecting professional women.

The drive, however, was carried to a successful completion, and \$400,000 (£80,000) of the \$4,000,000 obtained was devoted to the erection of the club house at 132, East Forty-fifth Street. The building, which was opened July 1st, 1916, contains rooms for 250 resident members, who must be actively engaged in their profession; they enjoy all the privacy and independence and much of the service that they would have in a good hotel, while at the same time they have a home-like, congenial atmosphere. Other privileges are at the service of resident and non-resident members. Among these are private and public dining-rooms, cafeteria, tea rooms, library, committee and reception rooms. A spacious and attractively furnished assembly room is at the service of outside groups, such as training schools, for social gatherings on payment of a small fee to cover expenses. There is a charming little rest room, with dressing rooms opening off from it, where an out-of-town member, coming into town to attend a dinner or the theatre, may slip into a kimono and rest for a while on the couch before making her toilet for the evening. Non-resident members have the privilege of twenty-eight days' stay at the club as transient guests.

Any graduate of a recognised training school for nurses with a course not less than two years, if her application is properly endorsed, may become a member of the club on payment of one dollar initiation fee and one dollar yearly dues. The charge for rooms is, to residents, \$15.50 to \$19 a month for single bedrooms, and \$13 and \$14 a month to each occupant of a double room. These charges are to be increased by a dollar a month next year. Transients pay \$1 a day or \$7 a week.

It seems almost incredible that such accommodation can be offered in a central location in New York City at such a price on a self-sustaining basis. Yet the income of the club has been sufficient not only to meet all current expenses but also to provide for a small depreciation fund. This, however, is possible only because the club has no rent or taxes to pay. The ownership of the building is vested in the Young Women's Christian Association, and it is therefore not subject to taxation. The club pays to the association 4 per cent. of its gross receipts, but this is much less than rent would be.

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