HOSPITAL AND TRAINING SCHOOL ADMINISTRATION

IN CHARGE OF
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THE HOSPITAL UTILITY ROOM

No place has been more neglected in the plans and arrangements of hospitals than has this important factor of the hospital ward unit. Architects do not appreciate its importance because they have no realization of the work which should be done here. Boards of trustees and medical consultants rarely are conversant or concerned with the details of the practical work of the student nurse.

In going through the modern hospitals of the country, one is impressed with the fact that after the wishes of the medical board and friends of the institution have been incorporated in the plans, any unappropriated space has been utilized for the construction of nurses' work rooms, without regard to their size or proximity to the wards. The fact that this unit should be intact has seldom occurred to them. Warming closets, bath rooms, soiled clothing containers, etc., have been distributed throughout the ward unit with no thought or consideration for economy of time or physical effort on the part of the student nurse. Bed-pan racks, sterilizers, sinks, and radiators have been crowded into inadequate space, allowing no opportunity to properly use the equipment when it has been installed. Provision is seldom made for any work shelves, drain boards, or for the type of sink with a stopper, in which utensils can be scrubbed and adequately cleansed. Gas and electricity are seldom provided for the preparation of poultices, turpentine stupes, hot compresses, etc. All such preparations for treatments have had to be made in the ward kitchen where the patients' food is served. Isolation closets are usually installed with no facilities for receiving equipment, no hooks for hanging gowns, or bags for the reception of infectious clothing.

If hospital boards would consult more frequently with the women who are responsible for the nursing care in their hospital regarding these matters of ward lay-outs, the result would be more gratifying both in relation to economy of time and effort, as well as in the efficient care of the sick.

In one of the largest hospitals of the country which has recently been rebuilt, the relation of the work room to the ward and balconies necessitates a nurse's walking several hundred feet every time she

gets a patient a drink of water, and in view of the fact that the conservation of human effort is so vital to us, particularly at this time when we are struggling against bitter odds in an effort to properly staff our hospitals, this oversight on the part of the hospital architect is appalling.

In many instances plans are drawn which are fairly adequate, then some one discovers that too much money is being expended and suggests cutting down. The first place where this shaving process begins is in the nurses' work rooms, even when the doctors' examining room and clinical laboratory are very much larger than is necessary. In cutting down the effectual operation of these work rooms the care of the patients is affected, for if the routine work of the student nurse is hampered by lack of space and facilities the patient eventually suffers. In other words, it is poor economy to increase the amount of physical effort on the part of the student nurse, when conservation of her time and strength is so necessary.

The superintendent of nurses having the welfare of her patients and students at heart should insist that proper thought and consideration be given to the construction and equipment of these rooms, and should not accept any plan which may be offered by the architect.

Considerable time and thought were given to drawing up the plan which is here shown for the conservation of effort and economy of time. Note the arrangements for the care of bed-pans, warmer, sink, table for scrubbing, and sterilizer in one group; also the closet for specimens of urine and feces. A work table has been provided with a small instrument sterilizer on one end, a gas plate in the center, toward the wall, for the preparation of poultices, with a small shelf over it for jars of flax seed, mustard, etc. Under the shelf is a drawer for spoons and spatulas as well as a cupboard for sauce pans and boiling basins. There is also a sliding upright, with hooks on each side for hanging hot water bags and ice caps. This operates on a ball-bearing roller and may be pushed in flush with the closet wall. A sink is attached to the shelf and is provided with a rubber stopper so that utensils may be properly washed in soap and water and placed on a draining board where they may be rinsed off, wiped, and put away. Directly opposite is a utensil rack, the frame being made of one-inch piping with adjustable wooden shelves which may be easily removed for washing. On this rack are kept dust, dressing and kidney basins, irrigating cans, funnels, catheters, rectal tubes, urinals and foot tubs.

A closet for soiled linen connected with the ventilating shaft has a capacity for three clothes conveyors, so that there is no occasion for storing these in the bath rooms or other equally inappropriate places

Note—The proportions have been altered a little to make the drawing fit the page, but the measurements are as in the original plan.

when not in use. A cabinet has been provided for tray equipment, such as catheterization, preparation dressing, lavage, and vaginal examination trays, thus making them very accessible for immediate use and facilitating the cleansing and putting them away. A blanket warmer should be installed with this unit, as it would add very much to the convenience of the nurse, not only by making it easy to procure warmer blankets for her patients, but by providing a proper drying closet.

The relation of the utility room to the ward proper is that of direct communication and visual control, as a door opens directly into the ward and a glass partition makes it possible for the nurse to watch her patients at all times. It would be of great advantage to have a tile floor and a six-foot tile wainscot, as this is easily kept clean. In connection with the work shelf, a box for cracked ice should be installed. In most hospitals the filling of ice bags in the ward kitchen results in imperfect technique. The ice is usually kept in the main refrigerator, and nurses coming into the kitchen in the midst of taking care of a typhoid patient, for the purpose of getting cracked ice, are not following the procedure taught them in the care of infectious diseases. This box can be made of wood and lined with zinc with an interlining of chopped cork. A lead drain pipe can be connected with the sink drain below the trap. It is inexpensive and can be installed anywhere where there is a waste pipe.

Every effort should be made by those constructing hospital buildings to take the shortage of labor into consideration and make it possible to do effective work with the limited personnel obtainable, for quite as much thought should be given to the care of the patients as to the symmetry of design of the hospital.

TOO LATE FOR CLASSIFICATION

Kentucky.—The meeting of the Kentucky State Nurses' Association will be held in Lexington, June 9 and 10.

Montana.—The Montana State Board of Examiners for Nurses announces examinations for registration of nurses, to be held in Helena, June 21-26. Frances Friederichs, secretary pro tem, Box 928, Helena.

South Dakota.—The South Dakota State Nurses' Examining Board will hold an examination for registration of nurses at the State House, Pierre, July 15 and 16, 1920. Applications must be filed with the secretary at least two weeks in advance of the examinations. For information, address Mrs. Elizabeth Dryborough, Rapid City. The annual convention of the South Dakota State Association of Graduate Nurses will be held in Mitchell, June 15, 16 and 17.