

Catholic and Protestant Hospital Associations and the Council on Medical Education and Hospitals of the American Medical Association.

The second part will deal with the university schools of nursing, with special reference to the interrelationships between schools of medicine and schools of nursing under university control. The third part of the report will embody the recommendations of this Committee.

It will be noted that our general point of view is that nursing education, on account of its relation to medical practice, is a subject in which medical educators should take an interest. This, again, does not mean that medicine should dominate the situation. Rather, nursing should control its educational machinery with the advice and aid of other educators.

Part I.—The Status of Nursing Education

We believe that the following facts have been amply demonstrated:

1. Nursing is an overcrowded profession. We regard this situation to be inimical to public welfare, because there must be in such excess a lower average of ability and training than in a smaller and more carefully selected group. Over-production in education always tends to lower quality. Perhaps, the worst feature is that the most desirable candidates avoid an overcrowded profession.

2. There are far too many nursing schools, students and graduates. Accepting as fact that there are about 2,000 nurses' training schools, 90,000 students and 22,000 graduates annually, the seriousness of this situation requires neither demonstration nor comment. We have only to hark back to the situation in medical education when there were more than 160 medical colleges and recall our concern with the threatened overproduction and lower standards among doctors, to appreciate the alarm among nurse educators at the present situation. Our opinion is that not only nurse educators but also medical educators and the medical profession have interest in and responsibility for this condition of affairs. There are also implications of public welfare.

3. While aware of difference of opinion among physicians we think it can be demonstrated that the weight of medical opinion is to the effect that the safe nurse in serious situations is the one of good intelligence and considerable scientific attainment. To these qualifications must be added adequate experience and technical training. Of course, the nurse must have outlook and personality. As a profession, nurses need at least the minimum education demanded of public school teachers. From this line of thought we conclude that: