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LEGISLATIVE REFERENCE BUREAU

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STATE OF HAWAII

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LEGISLATIVE REFERENCE BUREAU

UNIVERSITY OF HAWAII

Honolulu 14, Hawaii

FOREWORD

During the 1961 general session of the First State Legislature, the House of Representatives adopted H.R. 187 which requests the legislative reference bureau to undertake a study of the nursing situation in Hawaii. This report, by Mrs. Mildred D. Kosaki of the bureau's staff, has been prepared in response to that request.

The legislative reference bureau acknowledges its appreciation to those individuals, too numerous to enumerate, who responded to the bureau's questionnaires and with whom interviews were held. Special thanks are due to the following individuals who gave invaluable assistance by serving as a panel of consultants for this study:

Mrs. Marjorie Elliott, Chairman, Practical Nursing
Department, Kapiolani Technical School
Mr. Will Henderson, Administrator, Queen's Hospital
Mrs. Hazel Kim, Director, School of Nursing, St. Francis
Hospital
Miss Virginia Jones, Dean, College of Nursing,
University of Hawaii
Dr. Toru Nishigaya, President, Oahu Health Council
Mrs. Rose Ann Poyzer, Executive Secretary, Hawaii
Nurses Association
Mrs. Alice Scott, Chief, Public Health Nursing
Branch, Department of Health
Dr. Robert S. Spencer, Executive Officer, Mental
Health Division, Department of Health
Mrs. Mary Walsh, Executive Secretary, Board of
Nursing, Department of Treasury and Regulation

Their cooperation and assistance made it possible for the bureau to undertake its work with greater efficiency and understanding. The report, however, is a bureau, not a panel, product.

Tom Dinell
Acting Director

February 1962

SUMMARY

Legislative concern about a possible shortage of nurses in the next decade was evidenced by the House of Representatives in adopting House Resolution No. 187. The resolution specifies that the legislative reference bureau (1) ascertain the demand for nurses in the various specialties during the coming years through 1970, (2) determine whether existing facilities for nursing education are adequate to meet the demand, (3) identify means of helping nurses to seek further education, and (4) explore ways of attracting more nurses from the mainland.

This report summarizes data on the present professional and practical nurse population (Chapter II) and on nursing education facilities (Chapter III). It attempts to assess the need for nurses and nursing education in 1970 by examining past trends, exploring expansion plans of various institutions and programs, and considering predictions of Hawaii's civilian population in 1970 (Chapter IV). Some matters for legislative deliberation are presented in Chapter V, and several significant problems facing the nursing profession are discussed in the concluding chapter.

Nurses in 1961

At the present time, Hawaii is fortunate in having enough professional and practical nurses so that no acute shortage exists. This is especially true for Oahu where the great majority of professional nurses are employed. It is less true for the remaining counties which employ a higher proportion of practical nurses than of professional nurses. Hawaii is also fortunate in (1) having a high percentage of graduates from both the professional and practical nursing schools successful in becoming licensed, (2) having most of its nursing educators with educational backgrounds which meet the minimum standards set by the nursing profession, and (3) being able to attract out-of-state nurses so that inbreeding has been curbed and a shortage averted.

There are also a few problems: (1) nurse supervisors and administrators, as well as nurses in special departments, need further training, and (2) the practical nursing school and two of the professional nursing schools are finding it difficult to find qualified students. Although no assessment was made of the need for in-service training for both professional and practical nurses serving as general duty, office, private duty, industrial, or public health nurses, it is very probable that nurses need such opportunities to be informed of new and recent advances. Such refresher courses would also be helpful to nurses who are returning to active status after a period of inactivity.

Numbers alone are not enough to insure a satisfactory level of nursing care in a community; nurses should meet certain standards set by the profession and should be encouraged to continue their education throughout their career.

Nursing Needs in 1970

Future nursing needs in Hawaii are very difficult to predict. Among the problems encountered in making predictions of need in 1970 are the following: (1) planning is either inadequate or non-existent in many institutions and programs which require professional and/or practical nursing personnel; and (2) Hawaii seems to be in the process of initiating new programs (home care, home-maker services, intensive care) and medical facilities (nursing homes) and expanding certain programs (geriatric units), so that requirements for additional personnel involve quantitative and qualitative aspects. Compounding these local problems are those of national character: the lack of consensus in the nursing profession regarding nursing education and the need for standards of nursing service for different types of medical facilities.

The legislative reference bureau, while cognizant of these difficulties, attempted to make predictions of need by considering (1) present proportions of nurses in the various fields of nursing in Hawaii, (2) recommended nurse-population ratios as found in the professional literature, and (3) an annual attrition of 5 per cent. Based on these factors, Hawaii in 1970 will need a total of 1,678 additional professional nurses: 1,000 nurses in general duty, 133 in office nursing, 100 as head nurses, 107 in public health, 125 in private duty, 185 in administration and supervision, and 28 in nursing education. Based on the present professional-practical nurse ratio (10 to 7), Hawaii will need an additional 1,175 practical nurses in 1970. This is probably an underestimate for there are many indications that there will be a sharp increase in the need for practical nurses and other nonprofessional personnel (aides, orderlies, attendants).

On the basis of the above predictions of need for professional nurses, Hawaii needs an additional 200 nurses during each of the next eight years. During the last five years the collegiate program yearly had an average of 24 graduates and the two diploma schools jointly had an average of 73 graduates; a total of 97. This is far below the number of nurses needed annually. This gap can be filled if Hawaii continues to attract nurses from the mainland and if it is able to encourage more high school students and mature women returning to employment to prepare for the nursing profession. Should greater numbers of students enter nursing, the collegiate program will need to expand; the physical facilities of the diploma schools are large enough to accommodate a total of 340 students. There are presently 218 enrolled.

Although the Western Interstate Commission for Higher Education has described Hawaii's nursing needs in terms of the educational preparation recommended by the National League for Nursing for each of three groups of nurses, this study makes no attempt to indicate the number of nurses that should be graduates of collegiate programs, of diploma schools, or of master's programs. Decisions in this area depend in part upon the future role of the nurse in patient care, including the relationships of the nurse to other professionals and nonprofessionals. Such decisions, if they are to be well made, require that nurses themselves develop consensus and offer leadership.

On the basis of the present enrollment in the practical nursing school, Hawaii will not be able to meet its practical nursing needs in 1970. Enrollments will need to be nearly doubled to meet the future demand since relatively few practical nurses come from out-of-state. During the period 1955 through 1961, for example, of 728 licensed practical nurses, 117 (16 per cent) were by endorsement. The seriousness of the problem is further increased by the fact that the practical nursing school is presently finding it extremely difficult to find qualified applicants.

Matters for Legislative and Professional Consideration

Several courses of action are open to the Legislature should it decide to act positively to avert a nursing shortage and to improve nursing in Hawaii. Probably legislative action to promote nursing education would be most effective. Scholarships can be established for students to enter nursing schools, for graduate nurses to work for baccalaureate degrees, and for degree nurses to work for master's or doctor's degrees. If the state decides to give greater support to nursing education, it must determine what type of programs should receive public aid. Since there is some controversy within the nursing profession about the type of educational program or programs which best prepare nurses for their different responsibilities, a legislative decision to grant state aid to nursing education will require consultation with the profession, probably through the board of nursing since one of its functions is to prescribe curricula and standards for nursing education in the state. The board can also render aid to the Legislature in studying the possibilities of initiating associate degree programs in nursing.

Helpful as legislative action may be to improve nursing education and nursing services in Hawaii, there are certain problems which only the nursing profession, working in conjunction with the other health professions, can solve. The profession should (1) clarify what nursing is and what functions should be performed by professional nurses, practical nurses, or other nonprofessional personnel; and (2) work for consensus on what is desirable nursing education and improve articulation between existing educational

programs. As progress is made in these two areas, the status of the profession will be improved and the likelihood of a rise in the economic status of nurses will be enhanced for the public and other health professions will appreciate more fully the significant contributions that nurses can make to improve patient care and to promote community health.

While the internal problems of the nursing profession require the careful attention and concerted efforts of those in the health professions, there still remains the need for making adequate provisions to meet future nursing demands. Hawaii will probably encounter a shortage of professional and practical nurses in 1970 unless the state takes appropriate steps to insure an adequate nurse population from the standpoint of numbers and educational preparation.

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CHAPTER I

INTRODUCTION

The need for more nurses in the United States has increased in recent years because of the growth in population, changes in the nature of that population, advances in medical science, and the public's greater use of medical facilities. National interest in nursing and, more particularly, national concern about a nursing shortage have been evidenced since the end of World War II. By 1950 at least 20 states had completed surveys of nursing needs.¹ Federal legislation since 1956 has provided larger sums of money for both professional and practical nursing education; discussion of these Acts is found in Chapter III of this report. The Western Interstate Commission for Higher Education (WICHE) recently published Nurses for the West which (1) presents facts on nursing needs, present supply, and training facilities in the West, (2) identifies five areas in which the West needs to act if nursing needs are to be met, and (3) makes recommendations for the improvement of nursing education in the West.

In 1956 there were approximately 430,000 active professional nurses or 258 nurses per 100,000 people in the United States. It has been suggested that a ratio of 300 nurses per 100,000 population represents a conservative standard and that a higher ratio of 350 nurses per 100,000 population would be a more desirable standard for adequate nursing care.² These ratios were determined by examining the present ratio of nurses to population in various regions of the nation. The North Atlantic region had 336 nurses per 100,000 population, the West had 277, the Midwest had 254, and the South had not yet achieved 200.

Based on an estimated population of 177 million in 1970, there should be 600,000 professional nurses to attain the 300 goal and 700,000 to attain the higher goal. The lower goal requires an increase of 40 per cent in the nurse population over the present; the higher, an increase of 60 per cent. Such demands require a doubling of nursing school applicants and an era of expansion for nursing schools which are already short of trained teachers. It is evident that the problems are many and varied and that their solution requires careful planning.

Of particular interest to Hawaii, is the WICHE publication, which attempts to obtain the best information on future nursing

¹North Carolina Committee to Study Nursing and Nursing Education, Nursing and Nursing Education in North Carolina, Sponsored by North Carolina Medical Care Commission and University of North Carolina at Chapel Hill (November 1950), p. 36.

²National League for Nursing, Committee on the Future, Nurses for a Growing Nation (New York: the League, 1957), p. 2.

needs in the West and to make systematic plans for meeting these needs.³ Although data on Alaska and Hawaii are not included in all instances, the findings of this study are noteworthy: (1) by 1970 there will be 10 million more people and disproportionately high increases in the below-21 and 65-and-over age groups; (2) the West's 1957 nurse ratio was 275 nurses per 100,000 people; (3) present graduations from Western nursing schools provide less than half the nurses needed by 1970 to maintain the present nurse-population ratio; (4) there is a discrepancy between the educational preparation of many nurses and the preparation recommended by the profession; and (5) present recruitment from recent high school graduates as the primary source is unrealistic--mature women entering the labor force comprise another valuable source.

WICHE concludes that "four striking points" emerge from its analysis:

First, there is a mandate to existing schools to be more realistic in their planning. Few members of the general public, legislators, or educators have appreciated the magnitude of the demands being made upon nursing and the inadequacy of present programs to meet these demands. Plainly every college and junior college with a school of nursing should consider plans for major expansion.

Second, Western colleges and universities without nursing programs should appraise their own potential for moving into this scarcity area. The great strength of the public colleges and universities is in their willingness to respond quickly and imaginatively to felt needs.

Third, the magnitude of the task ahead imposes a special responsibility on schools with graduate programs and schools contemplating starting such programs. Progress on all other fronts depends on breaking the bottleneck of the nurse-teacher shortage.

Finally, and basic to these three points, public officials responsible for budgeting for public higher education should take stock of nursing needs and educational resources of the state. They should decide on the relative priority that should be given to nursing--in essence, on the kind of nursing care the state wants for the next decade.⁴

WICHE's final point seems to have struck a responsive chord in Hawaii, for this study of nursing education and needs was undertaken at the request of the Legislature.

³Western Interstate Commission for Higher Education, Nurses for the West (Boulder, Colorado: the Commission, 1959), 112 pp.

⁴ibid., p. 11.

SETTING OF THE PROBLEM

An earlier and similar interest in nursing and nursing education was evidenced by the Legislature in 1949. During the 1949 special session, H.R. 42 was introduced, requesting the holdover committee to investigate and report on the problem of maintaining adequate nursing and medical services with particular emphasis on the following question: whether or not the Territory of Hawaii should subsidize schools for the training of nurses. This resolution was referred to the holdover committee's subcommittee on hospitals, medical care, health and welfare, which appointed an advisory committee of professional men and women to study this matter and other related legislative problems. Although the bureau was not able to locate any reports of the advisory committee, one participant reported that the advisory group rejected the idea of subsidies for hospital schools for the training of nurses and recommended that a survey be made to determine whether a school of nursing should be established at the University. The subcommittee recommended the adoption of a joint resolution which authorized the governor to appoint a commission on nursing education and nursing services to survey and evaluate existing facilities for nursing education and service; an appropriation of \$3,000 was provided to cover the cost of any survey made by a U.S. Public Health Service consultant.

Legislative Action: 1951-1961

During the 1951 session of the Legislature, the joint resolution (J.R. 18) proposed by the holdover committee was passed; a sum of \$6,000 was appropriated, and the period of operation for the commission was limited to 1951-53. This action led to a study of the nursing situation by a nursing study committee, aided by a nurse consultant from the division of nursing resources, Federal Security Agency. Based on this study, the commission on nursing education and nursing services published its report, The Nurse of Tomorrow, which presented data on the supply of nurses in 1951, discussed the meeting of needs for nurses in various fields, examined nursing education facilities, and defined steps which should be taken to improve nursing in Hawaii.⁵ Among these steps were the following: (1) encourage development of "more awareness of the potential contribution of the professional nurse to the whole medical picture"; (2) provide more opportunities for Hawaii students to receive the best of preparation by developing fully the University of Hawaii school of nursing (which was established in 1951 by the Legislature), by creating more scholarships for local nurses to prepare for work in supervision, instruction, and administration,

⁵Territorial Commission on Nursing Education and Nursing Services, The Nurse of Tomorrow. Based on the survey for the Nursing Study Committee by Ruth I. Gillan (Honolulu: July 1952), 20 pp.

and by improving conditions at the practical nursing school; and (3) offer more opportunities for local nurses to improve their skills and to learn new techniques.⁶

The Legislature in 1951 enacted legislation to establish (1) a school of nursing at the University of Hawaii (Act 174) and (2) a "scholarship fund for graduate nurses" (Act 315). Act 174 provided a sum of \$25,000 for the 1951-53 biennium and specified that "the school of nursing shall conduct a complete course in nursing leading to the conferring of an appropriate bachelor's degree upon graduation therefrom and sufficient to qualify its graduates as registered nurses". A sum of \$10,000 was appropriated for the scholarship fund; it was to be administered by the board for the licensing of nurses. Scholarships were to be awarded to local born professional nurses who would accept supervisory, teaching, or administrative positions in the Territory for a period of at least two years following the completion of training leading to a bachelor's or higher degree.

In 1953 the Legislature (1) extended the period of functioning for the commission on nursing education and nursing services to June 30, 1955 (Act 49) and (2) appropriated a sum of \$15,000 for the scholarship fund established by Act 315 of the 1951 session (Act 277). During 1953-55, the territorial commission on nursing education and nursing services sponsored a sociological study of the nursing service personnel in six Oahu hospitals.⁷ The objectives of this project were "to develop . . . an understanding of the social position, functions, and relationships of the nursing personnel in the social system of modern Hawaiian hospitals; and to identify, in that system, the attitudes of various classes of nursing personnel toward the functions they perform and the social and organizational factors related to the job satisfaction of the nursing personnel."⁸ Such a study was in line with national interest to make the best possible use of available professional nursing skills in the light of increasing demands.

During the legislative sessions of 1955 and 1957, several measures affecting nurses were introduced; some laws were enacted in 1955 which dealt with licensing practices and licensing board funds. One Senate Concurrent Resolution was adopted in 1955 (SCR 25) which requested the civil service departments of the Territory and the various counties to review classification and pay grades of nursing positions. In 1959 the Legislature passed legislation (Act 268) which amended in entirety Chapter 67 of the

⁶*Ibid.*, p. 19.

⁷Douglas S. Yamamura, *Functions and Role Conceptions of Nursing Service Personnel*, Sponsored by the Territorial Commission on Nursing Education and Nursing Service (Mimeographed; Honolulu: University of Hawaii, Romanzo Adams Social Research Laboratory, December 1955), 148 pp.

⁸*Ibid.*, p. 4.

Revised Laws of Hawaii, dealing with regulations for the practice of professional and practical nursing in Hawaii.

In 1961, a bill to create a temporary committee to study nursing needs and resources in Hawaii (H.B. 905) was introduced in the Legislature. H.R. 187 was later introduced and adopted by the House of Representatives; this action led to the present study by the legislative reference bureau.

Nurses in 1950-1960

According to the 1960 census, Hawaii had a population of 632,772 people, an increase of 26.6 per cent over 1950. In 1960-61 there was a total of 2,509 registered professional nurses in Hawaii, an increase of 22.4 per cent over 1950-51 figures.⁹ However, the percentage of nurses employed during this period was not determined. Data on registered and employed professional nurses in Hawaii were available for 1956-58: there were an estimated 1,681 nurses, representing a ratio of 305 nurses per 100,000 population.¹⁰

Figure 1 illustrates the growth in the number of registered professional nurses for the period 1950-60 as well as in the number of licensed practical nurses. Data on employed personnel in both groups were not available. The number of licensed practical nurses in 1960 reflected an increase of 18.6 per cent over 1950 figures. It should be noted that this percentage is less than that for professional nurses during the last decade.

The above data indicate that Hawaii does not presently have an acute shortage of nurses. Furthermore, a workshop on "Nursing Care--1970" sponsored by the Hawaii Nurses Association and the Hawaii board of nursing in 1960 concluded that

. . . while the over-all figures for Hawaii show a fair potential to meet the state's minimum needs in 1970, there is little or no information to show whether certain areas are unable to meet their needs and whether nurses are prepared for the positions they are now holding or for which they are needed. It was the general opinion that personnel in head nurse, supervision, and administrative positions did not in general meet the qualifications recommended in Nurses for the West.¹¹

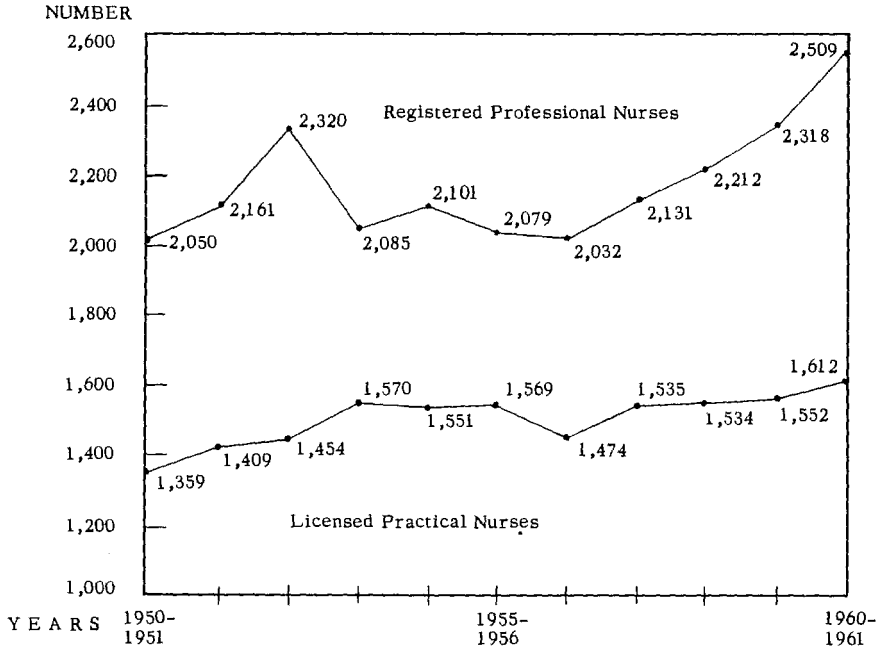
⁹State of Hawaii, Board of Nursing.

¹⁰American Nurses' Association, Facts About Nursing; A Statistical Summary (1961 ed.; New York: the Association, 1961), p. 14; and Western Interstate Commission for Higher Education, op. cit., p. 98.

¹¹Hawaii Nurses Association and State of Hawaii, Board of Nursing, "Progress Report on Action on Nurses for the West" (Typewritten; [1961]).

Figure 1

Number of Registered Professional Nurses and
Licensed Practical Nurses in Hawaii
1950-1961



Source: State of Hawaii, board of nursing.

As a result of one of the recommendations of this workshop, legislation to study nursing needs and resources was introduced in the 1961 session of the Legislature.

SCOPE OF THE STUDY

H.R. 187, adopted by the House of Representatives, requests the legislative reference bureau to undertake a study of the nursing situation in Hawaii so as to ascertain:

- (a) the demand for nurses during the coming years through 1970, including an analysis as to the relative need for nurses in the various areas, specialties, and programs;
- (b) the existing facilities for nursing education, the need for additional facilities, where and how such facilities shall be established;

- (c) means of assisting nurses in seeking further training on the mainland, especially in those special fields where facilities for training are not obtainable locally; and
- (d) means of attracting more nurses from the mainland to serve in Hawaii.

(See Appendix A for a copy of this resolution.)

The legislative reference bureau planned its study of nursing so as to provide data about the areas specified in the resolution. Chapter II of this report furnishes information on essential characteristics of the professional and practical nurse population in 1961. Data for this chapter were gathered from the files of the board of nursing. In addition, questionnaires (see Appendix B) were sent to the various hospitals in the state to determine nurse staffing patterns and to assess the educational preparation of nurses in supervisory, instructional, or administrative positions.

A brief historical survey and description of professional and practical nurse education in the United States, and descriptions of the three professional nursing schools and the one practical nursing school in Hawaii are found in Chapter III. School bulletins furnished some information on Hawaii's nursing education facilities. More data were gathered on their faculty, student body, alumni, and future plans through questionnaires (see Appendix C). Interviews were also held with the heads of all four schools.

An assessment of nursing needs in 1961 and predictions of nursing needs in 1970 are discussed in Chapter IV. Predictions of this type must usually be considered as tentative and interpreted with caution. This is especially true of these predictions since they are based on data furnished by various institutions and programs; oftentimes planning was in the initial stages only and in some instances non-existent. In spite of these shortcomings, it was felt that some attempt to predict needs in 1970 would be helpful to persons involved in planning for the future. Such planning may be undertaken in the near future, for some groups in Hawaii seem to be on the brink of initiating state-wide planning in certain areas affecting nursing and of providing a greater variety of medical facilities for the population of this state.

Chapter V sets forth a few suggestions for legislative consideration. Many of them deal with nursing education since this is an area where legislative action is oftentimes helpful. However, the sphere for legislative activity is relatively limited. The nursing profession must itself resolve many of the problems. Chapter VI discusses such problems and others the profession must solve in cooperation with doctors and related persons engaged in the promotion of good health in the community.