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*** START OF THE PROJECT GUTENBERG EBOOK RULES AND REGULATIONS GOVERNING MATERNITY HOSPITALS AND HOMES ... SEPTEMBER, 1922 ***

State Board of Charities and
Corrections

Rules and Regulations

Governing Maternity Hospitals and Homes

Compiled and published by the
California State Board of Charities and Corrections

995 Market Street, San Francisco
1018 Pacific Finance Building, Los Angeles

September, 1922

California State Printing Office
Sacramento, California

LAW GOVERNING LICENSE AND SUPERVISION OF
MATERNITY HOSPITALS AND HOMES BY THE
CALIFORNIA STATE BOARD OF CHARITIES AND
CORRECTIONS.

[3]

CHAPTER 69, STATUTES 1913.

An act to provide for the licensing, inspecting and regulating of maternity hospitals or lying-in asylums, and institutions, boarding houses and homes for the reception and care of children, by the state board of charities and corrections, and providing a penalty for the violation of the provisions of this act.

The people of the State of California do enact as follows:

SECTION 1. No person, association, or corporation shall hereafter maintain or conduct in this state any maternity hospital or lying-in asylum where females may be received, cared for or treated during pregnancy, or during or after delivery; or any institution, boarding house, home or other place conducted as a place for the reception and care of children, without first obtaining a license or permit therefor, in writing, from the state board of charities and corrections, such permit or license once issued to continue until revoked for cause after a hearing.

SEC. 2. The state board of charities and corrections is hereby authorized to issue licenses or permits to persons or associations to conduct maternity hospitals, lying-in asylums, or homes for children, as provided in section one of this act, and to prescribe the conditions upon which such licenses or permits shall be granted, and such rules and regulations as it may deem best for the government and regulation of maternity hospitals, lying-in asylums and institutions, boarding houses, or homes for the reception and care of children, and said board is further authorized, by one or more of its members, secretary, or duly authorized representative, to inspect and report upon the conditions prevailing in all such institutions.

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SEC. 3. Any person who maintains or conducts, or assists in maintaining or conducting as manager or officer any maternity hospital, lying in asylum, or any institution, boarding house, home or other place conducted as a place for the reception and care of children, or who keeps at any such place any child under the age of twelve years, not his relative, apprentice or ward, without first having obtained a license or permit therefor in writing, as provided in section one of this act, shall be punished upon conviction by imprisonment in the county jail for not more than one year, or by a fine not to exceed five hundred dollars, or both a fine and imprisonment may be imposed at the discretion of the court.

[5]

RULES AND REGULATIONS FOR THE
GOVERNMENT OF MATERNITY HOSPITALS
AND HOMES.

In accordance with Chapter 69, Statutes 1913.

Definitions.

Any place into which women are received to be cared for before, during or after parturition shall be considered as a maternity hospital or home.

Institutions caring for maternity patients are classified as follows, according to equipment:

Class A. Separate class A building with complete equipment caring for maternity patients only.

Class B. Hospital with maternity department with fully equipped delivery room and nursery.

Class C. General hospital with either delivery room or nursery and general hospital using the operating room for delivery.

For rules and regulations for Class A, B and C maternity hospitals, see [page 6](#).

Class D. Private homes.

For rules and regulations for Class D private maternity homes, see [page 13](#).

RULES AND REGULATIONS GOVERNING
MATERNITY HOSPITALS.

[6]

(Classes A, B and C.)

Granting and revoking license.

1. All maternity hospitals and homes are required, in accordance with Section 3, Chapter 69, Statutes 1913, to secure the license of the State Board of Charities and Corrections, and to conform to the standards set by that board.

2. Application for license must be made on blanks furnished by the State Board of Charities and Corrections.

3. Every applicant must have the approval of the local board of health or health officer.

4. Every licensee shall post his license in a conspicuous place.

5. Any change of ownership, management, location or name shall be promptly reported to the State Board of Charities and Corrections. When any such change is contemplated an application for a new license shall be made. In such instance the new license may be granted on surrender of the license held.

6. No greater number of women and infants shall be cared for at one time on such premises than is authorized by the license and no women or infants shall be kept in a building or place not designated in the license.

Physical equipment.

1. All rooms and wards occupied by patients shall be outside rooms and the window space shall not be less than one-fifth of the floor space.

2. The rooms and wards shall be of sufficient size to allow not less than 800 cu. ft. of air space and 100 sq. ft. of floor space for each adult patient and 250 cu. ft. of air space for each infant therein. Ventilation shall conform with state housing laws.

3. All plumbing, drainage and other arrangements for the disposal of excreta and household waste shall be in accordance with the rules and regulations of the State Board of Health and local health ordinances.

4. Toilets and hoppers shall be properly and adequately ventilated to the external air.

5. In order that the heating of all rooms shall be safe and adequate no gas stove shall be used which is not directly connected with an outside flue and all gas connections should be of metal piping.

6. Fire protection shall be according to the rules and regulations of the local fire commission or city ordinance and the rules and regulations of the State Board of Charities and Corrections. These standards will be furnished with the application.

7. Provision for isolation of contagious diseases shall be made.

8. There shall be sanitary equipment for thorough bathing of patients and infants.

9. An adequate supply of clean bedding, body linen and towels shall be kept on hand at all times.

Bed pan sterilizers are recommended for hospitals. A separate bed pan marked for use of individual patients is strongly advocated.

Delivery room.

1. A delivery room shall be provided; it must be ready at all times and used for no other purpose.

2. The floors, walls and ceiling shall be of such material as will permit of being easily washed. Provision must be made for sterilization of water, basins, instruments and dressings. There shall be running water with a properly trapped and vented basin.

3. The delivery room shall be furnished with a delivery table or bed, instrument table, irrigating apparatus, basins and pitchers. There shall be an ample supply of sterile linen and dressings. Drugs ordinarily needed for use shall be kept in the room at all times.

4. Two infants' tubs shall be provided for resuscitation in delivery room.

5. Every infant shall be marked for identification before it is taken from delivery room.

Nursery.

1. A separate room for a nursery shall be provided.

2. Infants' cribs or baskets shall have firm, clean mattresses, covered with rubber sheeting and washable pads. Clean woolen blankets shall be used. There shall be a separate bed for each infant.

3. It is recommended that the nursery be provided with stationary bathing facilities, a properly protected dressing table and correct scales.

4. The nursery shall be heated and ventilated. A wall thermometer must be provided in order to be sure that an even temperature is maintained.

5. A covered container for soiled linen shall be provided.

6. A dressing tray shall be set up at all times. The following articles are recommended in dressing and caring for infants: Sterile gauze, absorbent cotton, medium and small safety pins, bottle of alcohol, a bar of pure mild soap, a proper lubricant (albolene or olive oil), boric acid solution, pure powder, abdominal binder for infant.

7. Bottles and nipples shall be properly sterilized after each use.

8. A minimum of one dozen diapers per child shall be provided for each 24 hours. Freshly laundered diapers only shall be used.

9. If hot water bags are ordered by physician, they must be covered with a flannel bag before being placed in the crib, and must not come in direct contact with the baby's body.

[9]

Care of patients.

1. Immediately upon the beginning of labor, a legally qualified physician shall be notified and shall be present and in attendance at the time of birth.

2. The eyes of all new born infants shall be treated immediately after birth with a one per cent solution of nitrate of silver, two drops in each eye, or with other approved solution and during the first few days cleansed daily with saturated boric acid solution. Ampoules of nitrate of silver solution may be obtained free of charge by charitable institutions upon application to State Board of Health, 713 Wells Fargo Building, San Francisco, or 821 Pacific Finance Building, Los Angeles.

3. Attention is called to Chapter 724, Statutes 1915, which requires the reporting of reddened or inflamed eyes of an infant, within two weeks after birth, to the local health officer of the county or municipality within which the mother of such infant resides.

4. If the child is kept in the hospital and is not breast fed by the mother, the feeding and selection of food, shall be under the direction of a registered physician. If a wet-nurse is provided, she shall meet the approval of the physician. Whenever advisable the mother shall be urged to nurse her child.

5. Each maternity hospital shall employ at least one graduate nurse.

6. Any patients afflicted with a venereal or other communicable disease shall be properly isolated in a separate room and all necessary precautions taken to prevent the spread of such disease to other persons.

Disposal of child.

1. Attention is called to section 224 of the Civil Code in accordance with which a child not retained by the mother must be legally relinquished before it can be adopted. This relinquishment must be expressed in writing, signed and acknowledged before an officer authorized to take acknowledgments, or before the secretary of one of the organizations mentioned below. Before adoption can take place a copy of the relinquishment must be filed with the State Board of Charities and Corrections.

[10]

2. Attention is called to Chapter 569, Statutes 1911, providing for the supervision and control by the State Board of Charities and Corrections of the placing of dependent children into homes, which makes it a misdemeanor for any person, association or society to engage in the work of placing children into homes without a license from the State Board of Charities and Corrections. The following agencies have been licensed to place dependent children into homes and to arrange for adoption:

Berkeley Welfare Society, 2120 Grove street, Berkeley.

Children's Home Society, 919 E. Twenty-fifth street, Los Angeles.

Children's Home Society (Branch), 3491 Sixty-sixth street, Oakland.

Catholic Ladies' Aid Society, City Hall, Oakland.

Oakland Associated Charities, City Hall, Oakland.

Little Children's Aid, 995 Market street, San Francisco.

Children's Agency of the Associated Charities, 1500 Jackson street, San Francisco.

Eureka Benevolent Society, 436 O'Farrell street, San Francisco.

Native Sons' and Daughters' Central Committee on Homeless Children, 955 Phelan Building San Francisco, 322 N. Van Ness avenue, Los Angeles.

3. Each licensee shall use due diligence to prevent the abandonment of children, which is, according to section 270-271 and 271a of the Penal Code, a penal offense.

4. A licensee shall not be permitted to advertise that he will procure the adoption of children or to hold out inducements to mothers to part with their offspring.

[11]

5. Maternity hospitals shall report on the usual report forms to the State Board of Charities and Corrections within twenty-four hours the name and address of any person other than a parent or relative, by blood or marriage, or the name and address of the organization or institution into whose custody a child is given on discharge from the licensed premises.

Records.

1. Every licensee must have a register wherein he shall enter the name and address of every maternity patient, the date of admission and discharge of every patient, the name and sex of every child born or boarded on the premises, the date of every birth, the legitimacy or illegitimacy of every child, the name and residence of the father, the date of removal of the child, the name and address of the person taking it away, and, if relinquished by the mother, the date of relinquishment, the name and address of the person to whom the child is relinquished, and the reasons therefor; and if adopted, the date of adoption, the name of the person signing the consent to adoption, and the name and address of the person adopting the child. Every admission, discharge, birth, death, relinquishment or adoption must be recorded in the register within twenty-four hours after its occurrence.^[1]

[1] The State Board of Charities and Corrections does not furnish the maternity hospital register, it merely prescribes the form. A book may be obtained from A. Carlisle and Co., 251 Bush street, Schwabacher, Frey and Company, 611 Market street, or H. S. Crocker, 565 Market street, San Francisco, and from Morris and Leleviere, 218 New High street, Los Angeles. These forms are kept in duplicate, the perforated sheets to be removed and sent to the office of the State Board of Charities and Corrections, as the semi-annual report. The carbon copy remains permanently bound for the hospital record.

[12]

2. A semi-annual report, which shall be an exact transcript of this register, shall be made to the State Board of Charities and Corrections, 995 Market street, San Francisco, January 1 and July 1 of each year.

3. A detailed medical record of mothers' and infants' physical condition shall be maintained. (Sample forms provided by State Board of Charities and Corrections, upon request.)

4. It is recommended that all orders from physicians regarding mothers and infants be written in ink on charts or in order book.

5. It is recommended that attending physician examine mother and infant on day of discharge and attach signature to statement of findings.

6. All births and deaths must be reported promptly to the local authorities by the attending physician. (See Political Code, Section 3077, Chapter 378, Statutes 1915.)

Inspections.

The proprietor or person in charge of a maternity hospital shall give the inspectors of the State Board of Charities and Corrections all information required and shall afford them every facility for examining the records, inspecting the premises, and seeing the inmates, and inquire into all matters concerning such hospital or house and the inmates thereof.

RULES AND REGULATIONS GOVERNING MATERNITY HOMES.

[13]

(Class D.)

No private maternity home shall receive at any one time more than three patients. No other type of patient shall be cared for in this home. Delivery shall take place in a room with washable walls, ceilings and doors.

Granting and revoking license.

1. All maternity homes are required, in accordance with Section 3, Chapter 69, Statutes 1913, to secure the license of the State Board of Charities and Corrections, and to conform to the standards set by the board.

2. Application for license must be made on blanks furnished by the State Board of Charities and Corrections.

3. Every applicant must have the approval of the local board of health or health officer.

4. Every licensee shall post his license in a conspicuous place.

5. Any change of ownership, management, location or name shall be promptly reported to the State Board of Charities and Corrections. When any such change is contemplated an application for a new license shall be made. In such instance the new license may be granted on surrender of the license held.

6. No greater number of women and infants shall be cared for at one time on such premises than is authorized by the license and no women or infants shall be kept in a building or place not designated in the license.

[14]

Physical equipment.

1. All rooms occupied by patients shall be outside rooms and the window space shall not be less than one-fifth of the floor space.

2. The rooms shall be of sufficient size to allow not less than 800 cu. ft. of air space and 100 sq. ft. of floor space for each adult patient and 250 cu. ft. of air space for each infant therein. Ventilation shall conform with state housing laws.

3. All plumbing, drainage and other arrangements for the disposal of excreta and household waste shall be in accordance with the rules and regulations of the State Board of Health and local health ordinances.

4. Toilets and hoppers shall be properly and adequately ventilated to the external air.

5. In order that the heating of all rooms shall be safe and adequate no gas stove shall be used which is not directly connected with an outside flue and all gas connections should be of metal piping.

6. Fire protection shall be according to the rules and regulations of the local fire commission or city ordinance and the rules and regulations of the State Board of Charities and Corrections. These standards will be furnished with the application.

7. There shall be sanitary equipment for thorough bathing of patients and infants.

8. An adequate supply of clean bedding, body linen and towels shall be kept on hand at all times.

A separate bed pan marked for use of individual patients is strongly advocated.

The following equipment shall be provided:

For delivery.

1. Suitable table or hospital bed for delivery.

2. At least three pitchers.

3. Two basins.

4. Two tubs or large basins for resuscitation.

5. One pail for waste material.

6. Ample supply of sterile dressings, towels, leggings, sheets.

7. Two nail brushes for doctor's use only; should be boiled before and after using and kept in a weak solution of bichloride of mercury, or lysol, in a glass jar.

8. All linen should be marked and kept separate for patients.

9. Wooden blocks 4 and 6 inches high shall be provided for use in case of hemorrhage, where surgical bed is not in use.

10. At the time of delivery plenty of hot and cold sterile water (boiled for 20 minutes).

11. Facilities for sterilizing instruments shall be provided.

12. The following supplies are recommended to be kept on hand: Fl. extract of ergot, lysol, bichloride tablets (blue), sterile cord tape and blunt scissors, nitrate of silver (1%), or argyrol, two pieces of linen tape.

[15]

For Infant.

1. Separate cribs or baskets for babies—clean mattresses covered with rubber sheeting and clean flannel blankets are to be used.

2. Correct scales for weighing infants.

3. Nitrate of silver one per cent solution.

4. A tray or basket equipped with necessary articles to be used in dressing and caring for infants; to contain sterile gauze, absorbent cotton, medium and small safety pins, cotton applicators, bottle of alcohol, a bar of pure mild soap, a proper lubricant (albolene or olive oil), boric acid solution, pure powder, abdominal binder for infant.

5. If hot water bags are ordered by physician they must be covered with a flannel bag before being placed in the crib, and must not come in direct contact with the baby's body.

6. All nursing bottles and nipples must be boiled at least once a day, and individual nipples must be provided for each child.

[16]

For mother.

1. Clean piece of rubber sheeting for each patient's bed.

2. Individual bed pans marked with name of patient.

3. Metal douche cans instead of rubber irrigating bags.

4. Glass ribs and nozzles—to be boiled before and after using and kept in lysol solution.

5. Clinical thermometers; to be washed in alcohol before and after using.

Care of patients.

1. This board urges the attendance of a legally qualified physician at all confinements. The law permits midwives to assist women only in cases of normal child birth. (See Statutes 1917, Sec. 8, page 96.) In any but a normal case the midwife must immediately call a legally qualified physician.

2. The eyes of all new born infants shall be treated immediately after birth with a one per cent solution of nitrate of silver, two drops in each eye, or with other approved solution and during the first few days cleansed daily with saturated boric acid solution. Ampoules of nitrate of silver solution may be obtained free of charge by charitable institutions upon application to State Board of Health, 713 Wells Fargo Building, San Francisco, or 821 Pacific Finance Building, Los Angeles.

3. Attention is called to Chapter 724, Statutes 1915, which requires the reporting of reddened or inflamed eyes of an infant, within two weeks after birth, to the local health officer of the county or municipality within which the mother of such infant resides.

4. If the child is kept in the home and is not breast fed by the mother, the feeding and selection of food, shall be under the direction of a registered physician. If a wet-nurse is provided, she shall meet the approval of the physician. Whenever advisable the mother shall be urged to nurse her child.

[17]

5. Any patients afflicted with a venereal or other communicable disease shall be properly isolated in a separate room and all necessary precautions taken to prevent the spread of such disease to other persons.

Disposal of child.

1. Attention is called to section 224 of the Civil Code in accordance with which a child not retained by the mother must be legally relinquished before it can be adopted. This relinquishment must be expressed in writing, signed and acknowledged before an officer authorized to take acknowledgments, or before the secretary of one of the organizations mentioned below. Before adoption can take place a copy of the relinquishment must be filed with the State Board of Charities and Corrections.

2. Attention is called to Chapter 569, Statutes 1911, providing for the supervision and control of the State Board of Charities and Corrections of the placing of dependent children into homes, which makes it a misdemeanor for any person, association or society to engage in the work of placing children into homes without a license from the State Board of Charities and Corrections. The following agencies have been licensed to place dependent children into homes and to arrange for adoption:

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3. Each licensee shall use due diligence to prevent the abandonment of the children, which is, according to sections 270-271 and 271a of the Penal Code, a penal offense.

4. A licensee shall not be permitted to advertise that he will procure the adoption of children or to hold out inducements to mothers to part with their offspring.

5. Maternity hospitals and homes shall report on the usual report forms to the State Board of Charities and Corrections within twenty-four hours the name and address of any person other than a parent or relative by blood or marriage, or the name and address of the organization or institution into whose custody a child is given on discharge from the licensed premises.

Records.

1. Every licensee must have a register wherein he shall enter the name and address of every maternity patient, the date of admission and discharge of every patient, the name and sex of every child born or boarded on the premises, the date of every birth, the legitimacy or illegitimacy of every child, the name and residence of the father, the date of removal of the child, the name and address of the person taking it away, and, if relinquished by the mother, the date of relinquishment, the name and address of the person to whom the child is relinquished, and the reasons therefor; and if adopted, the date of adoption, the name of the person signing the consent of adoption, and the name and address of the person adopting the child. Every admission, discharge, birth, death, relinquishment or adoption must be recorded in the register within twenty-four hours after its occurrence.^[2]

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4. It is recommended that all orders from physicians regarding mothers and infants be written in ink on charts or in order book.

5. It is recommended that attending physician examine mother and infant on day of discharge and attach signature to statement of findings.

6. All births and deaths must be reported promptly to the local authorities by the attending physician. (See Political Code, Section 3077, Chapter 378, Statutes 1915.)

Inspection.

The proprietor or person in charge of the maternity home shall give the inspectors of the State Board of Charities and Corrections all information required and shall afford them every facility for examining the records, inspecting the premises, and seeing the inmates, and inquiring into all matters concerning such home or house and the inmates thereof.

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