I. United States.

1. **Yale.** Aid development of new courses necessary to complete rounding out. Propaganda through fellowships. Stand by to see program finished. Capitalization eventually.

2. **Nursing in the South.**
   
   (a) White at Vanderbilt) Development of bedside and public health nursing at each.
   
   (b) Colored at Meharry) Development of bedside and public health nursing at each.

   New type of course for public health nursing to be tried, this to have for its object complete training of public health nurse in a maximum period of three years (to run parallel with the three years' course for bedside nurses). Present agreement with Vanderbilt and Peabody not to be renewed, but new agreements with Vanderbilt and Meharry, with each separately, and these institutions to make, if necessary, such arrangements with Peabody as they may consider advisable for courses in sociology, pedagogy, etc., not easily cared for at Vanderbilt and Meharry.

3. The above programs to be the only major ones in the U.S., on the ground that the results of experiments in different types of training schools for bedside nurses are now available and funds for the establishment and maintenance of these should be obtained locally. No need of the RF financing schools for either bedside or public health nursing in any part of U.S. with the possible exception of a second school in public health nursing in the South for colored people, and this only if need is evident after establishment of Meharry School.

4. Responsibility for fellows and visitors from Europe and other countries to continue, with a cutting down of this program as rapidly as possible, (RF to take this up with FRC in January, 1928).

5. **MB to be prepared in a general way to furnish information and act as adviser on general nursing problems, to keep in touch with nurse leaders and organizations and changes in policies and opinions in the several fields of nursing, but with special interest in the field of public health nursing rather than of bedside nursing.**

   In connection with the above, occasional appropriations may be made to aid investigations, surveys, and studies under national and other nursing organizations.

   Adoption of a general rule that with the exception of the specific capital projects mentioned, the DME is to work as much as possible through other organizations.

   Publication in "Methods and Problems" of descriptions of nursing schools and of other material concerning nurse training.
II. Canada.

Possible aid through advice and small contributions to the Toronto School of Nursing, to aid its new plan of training public health nurses independently of bedside nurses. This plan is being applied to a selected group of especially capable candidates, who are headed from the start for public health nursing. The objects in this would be to demonstrate the feasibility of this plan and to develop in Canada a complete training center, thus obviating the necessity of sending fellows and visitors to the U.S.

This project, the effort at Yale and the proposed plan for Nashville, give three types of training for public health nursing, and on this program the Division might rest, as covering the fundamental problems of the United States and Canada in the nursing field.

III. Europe.

1. The development at Lyons of a training school for both bedside and public health nurses, with close relation to the medical school and hospital, and such development of the health center as a training field as may seem advisable. This to be considered the chief effort in Europe. (Will await initiative of Lyons Group.)

2. Solution of the problem of the training school at Brussels.

3. Develop Zagreb properly.

4. To fulfill all present obligations to the schools at Warsaw, Cracow, Budapest and Debreczen, and terminate these efforts as soon as possible (except as provided in 5).

5. Decide as between two schools in a country, as in Poland and Hungary whether one school in each country is worthy of further development.

6. Pledges to help Prague and Bruno to be fulfilled if authorities meet requirements, but if possible concentrate in one place only.

7. Define, as rapidly as possible, all other commitments, pledges, authorizations and promises. No capital aid for a new school unless school is of same importance (from the point of view of geographical location and service to several peoples of same language), as the Lyons center for French-speaking people.

8. Fellows and visitors to be cut down gradually, and such not to be appointed in the future unless they are returning to the staff of a well-planned nursing school or to some field center used by such school in its teaching, the fellow or visitor having a present or future appointment in such school, e.g., present authorization as to possible programs for Bulgaria, Roumania, and Turkey to be so interpreted. On the other hand, fellowships to be pushed in schools we are attempting to complete (as in 1-4 above).

9. The I.M.E nursing staff to have no duties or responsibilities in rela-
tion to field work or health centers, IHD or otherwise, except as

(a) The center for field work is a part of a nursing school with resident teachers and thus used by students for field training.

(b) IHD or government health service may ask for opinion or services of DMB staff in connection with special problems. For this, one member of the staff will be at all times available.

10. The study of nursing conditions in countries not yet familiar to the European nursing staff, but such studies should be made as a matter of general information and education without necessarily obligation for extension of work; e.g., Germany, Spain, etc.

IV. Near East.

1. Asia.

(a) Siam. Program to be continued if proper cooperation is given by Siamese. If not, to be terminated on six months' notice with fulfillment of all obligations to personnel under contract to the Siamese Government and for whom we have assumed responsibility in regard to part payment of salary and travel.

(b) Japan. Cautious development of the nursing school at St. Luke's International Hospital, Tokyo, as a demonstration center. Possibility of extension of this work to a Japanese hospital; e.g., Keio.

(c) Japan. Possibility of aid to a commission on nursing and hospital administration.

V. South America.

1. Program of IHD school for public health nursing in Rio practically completed. Should serve as a demonstration for South America, and no other school of this type necessary.

2. Possibility of the development of a modern school for bedside nursing in connection with the new medical school at Sao Paulo. This, however, to be done only if a wise plan is developed and financial support secured locally. We would help through advice, training of fellows, and furnishing funds for temporary visiting teachers and a traveling commission to study nurse problems.

VI. General. No extension of the above program is contemplated. If requests are received to aid new centers, they should not be considered unless the plan is wisely conceived and properly financed locally, and then our aid should be only through

(a) Survey and counsel.

(b) Financing visitors or commissions to other countries.

(c) Training fellows.

(d) Temporary support of visiting teachers.
(e) Minor aid for equipment.

This program involving responsibility for nursing education should decrease gradually through a period of approximately ten years, at the end of which time members of the DME nursing staff remaining in the service should be absorbed in other activities of the RF, existing at that time, or be retired through anticipation of pension. Nursing Education, therefore, should disappear as a special Foundation activity about the year 1949, although occasional worthwhile projects might be considered in connection with the general activities of the Foundation in force at any time.

(This last paragraph may be modified by trustees.)