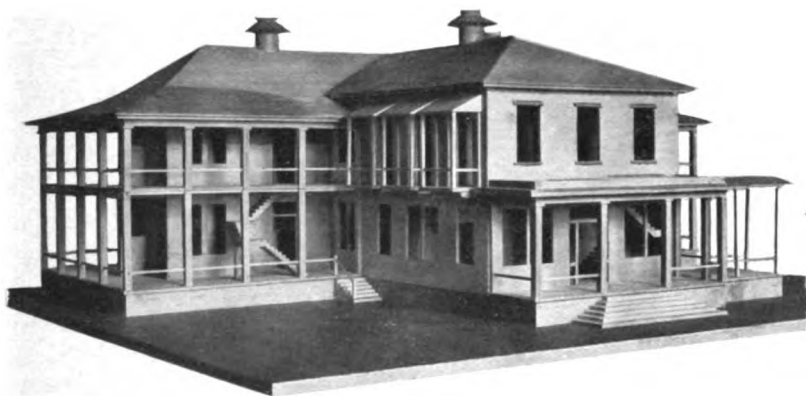


RECEIVING HOME FOR FOUNDLINGS
AND FOR
MOTHERS WITH THEIR BABIES
THE NEW TYPE FOUNDLING ASYLUM



RUSSELL SAGE FOUNDATION
DEPARTMENT OF CHILD-HELPING

105 EAST TWENTY-SECOND ST.
NEW YORK

1912

INTRODUCTION

The change in method of care of foundlings calls for a radical change in the planning of institutions for them.

The old type of foundling asylum admitted only foundlings; that is, such babies as were actually found by the police. Later these asylums admitted many babies brought by their mothers who said they could not keep their babies. In more recent years these institutions have admitted a few mothers with their babies, but now this type of foundling asylum is giving place to temporary receiving homes into which mothers who might otherwise abandon their babies are received with them. Abandoned babies are also received here, but there is a strong feeling against taking the babies from the mothers.

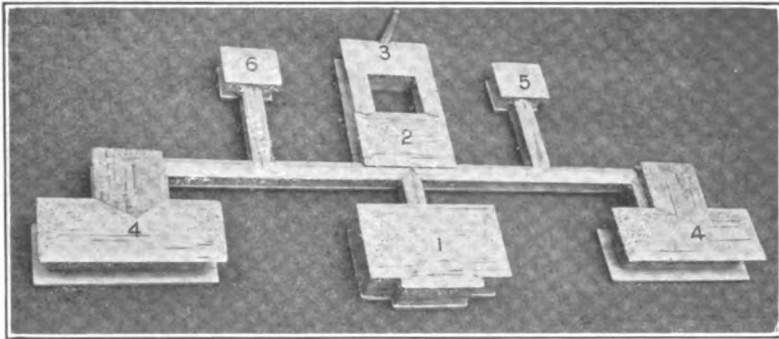
A considerable number of foundling asylums place the foundling babies in boarding homes at the earliest possible moment and co-operate with the societies whose work is placing mothers with their babies in family homes. The advantage of this method of caring for babies in family homes rather than in institutions is shown in the statement made in the printed report of one institution—that since they had been placing the foundlings in family homes the mortality has been reduced from 100 per cent to about 34 per cent.

This model is designed to exhibit in three dimensions the chief sanitary features which the medical profession recognize as essential to success in saving the lives and improving the vitality of the babies who must have institutional care temporarily. This does not pretend to be a model institution suited to all local conditions; but it serves to bring out certain essentials, which must be adapted to actual conditions in any given locality.

The department is under special obligations, which it gratefully acknowledges, to Mr. L. A. Simon, of Washington, D. C., who not only prepared the plans but who directed the construction of the Model.

The Department acknowledges with thanks the valuable suggestions on both the Model and the text of this booklet made by the Advisory Committee,—A. Jacobi, M.D., David L. Edsall, M.D., L. Emmett Holt, M.D., J. H. Mason Knox, M.D., William H. Welch, M.D.,—and by S. McC. Hamill, M.D., C. Lincoln Furbush, M.D., Charles A. Fife, M.D., Philip Van Ingen, M.D., and William C. Woodward, M.D.

BLOCK PLAN



I. OUTLINE OF BLOCK PLAN:

The Block Plan of the Receiving Home indicates the arrangement of the buildings but not the details of their construction.

The one building shown in detail is the pavilion in which mothers and babies and motherless babies are cared for. A photograph of this pavilion appears on the first page of this booklet, and the floor plans on pages 7 and 8. Each building is supplied with adequate fire protection.

- (1) *The Administration Building* contains:
Executive office, living rooms and dining rooms of medical staff and nurses. Telephone communication with all departments.
- (2) *The Service Building* contains:
Kitchen and dining rooms for mothers and attendants.
- (3) *The Power House, Disinfecting Plant, and Incinerating Plants* contain:
Heating and refrigeration plant; also electric plant.
- (4) *Two pavilions for mothers and babies.*
First floor, mothers and babies.
Second floor, motherless babies.
- (5) *Pavilion for venereal diseases.*
- (6) *Pavilion for other infectious diseases.*

II. DETAIL OF PAVILION FOR MOTHERS AND BABIES.

Main points emphasized in the construction:

- (1) Provision for keeping the mother and her baby together.
- (2) Provision for the physical examination of each baby and each mother on admission.
- (3) Adequate facilities for detention for observation on admission. Each of these rooms has a balcony.
- (4) Laboratory for routine pathological and bacteriological work, including examination of blood, excreta and secretions, and mothers' milk.
- (5) Small rooms, well ventilated, for not more than four foundlings. In the rooms for mothers and babies there is provision for the mother and two babies. Fifty square feet of floor space is allowed to each and 600 cubic feet of air space.

The small rooms are a help in controlling the spread of infection. They have also the advantage of giving the babies a better chance to sleep than the large ward affords.

There is a glass in the upper part of the dividing partition in these rooms. This enables the nurse to see what is going on without entering the room, and in the case of older children mitigates their isolation.

- (6) In case the number is so small as not to warrant a separate building for infectious diseases, the wings on the second floor are so arranged that either can be shut off entirely, thus offering complete separation of straight cases of infectious diseases from those having complications, and complete isolation for:

- (a) Exposed cases.
- (b) Suspicious cases.
- (c) Infectious cases.

These rooms have running water and open onto porches which are divided into alcoves.

- (7) Wash rooms where babies are brought to be dressed and changed: individual towels and washcloths.
- (8) A room for the care of premature babies. This room is provided with glass partitions 5 feet high between beds.
- (9) A milk laboratory for the preparation of individual

formulas for such babies as need supplementary feeding,—provided with:

- (a) Refrigerators.
 - (b) Sterilizers.
 - (c) Bottle-washers.
- (10) Generous porch room with windows of rooms opening to the floor so that beds may be moved out easily onto them. The room partitions extend half way across the porch, forming alcoves in which the babies may be out of doors and yet isolated. The entire porch is screened with copper wire in summer and has adjustable windows made in three sections for use in cold weather. In the roof of each porch ground glass is used in order that rooms below may not be darkened.
 - (11) Wooden floors covered with linoleum, cemented to floor and baseboard. Walls and ceilings painted, round corners on floors and ceilings, no ledges on walls; window and door trims to be reduced to a minimum and made plain with rounded corners. Windows in three sashes, upper sash dropping in and down (these sashes on pivots).
 - (12) Housemaid's closet (well ventilated) for cleaning supplies on each floor in stairway well.
 - (13) Examining room on first floor fitted with examining tables, scales, anthropometric instruments. The complete history and physical examination are recorded before the baby goes to Observation Room. Examining room on second floor for periodic complete examination of all babies and for minor surgery.
 - (14) Duty room for nurses where current records and medicines are kept.

PROPHYLACTIC MEASURES

1. *Surgical cleanliness*—

Washing hands before and after each service to a baby.

2. *Care of diapers*—

A 16-in. square of gauze, to be burned, is used. For babies not suffering from diarrhea or venereal disease, an outside diaper is used, which is washed, sterilized and used again. For babies suffering from diarrhea or venereal disease, a diaper, which is also burned, is placed over the gauze square. All diapers to be washed are put into a can containing formalin. A can is provided with top lifted by mechanical device worked by foot pressure. Cans kept in stairway well and emptied six times a day.

3. *Facilities for bathing babies under running water.*

Babies are taken in baskets to dressing-room, where bedding and clothing are changed. Babies are not undressed on general table. A single service square is placed under each baby during the bath.

4. *Individual kit*, including tube of vaseline, powder-box (not puff), thermometer, basin, single service gauze, towels and wash cloths (to be burned); separate paper on scales for each baby.

5. *Sanitary toys*, kept clean, for individual use.

6. *Breast milk*—As the foundling babies are in a depleted condition on admission, they are in special need of breast milk. In order to avoid possible infection of the foster-mother, this breast milk should be drawn off and given in bottles to the foundling babies.

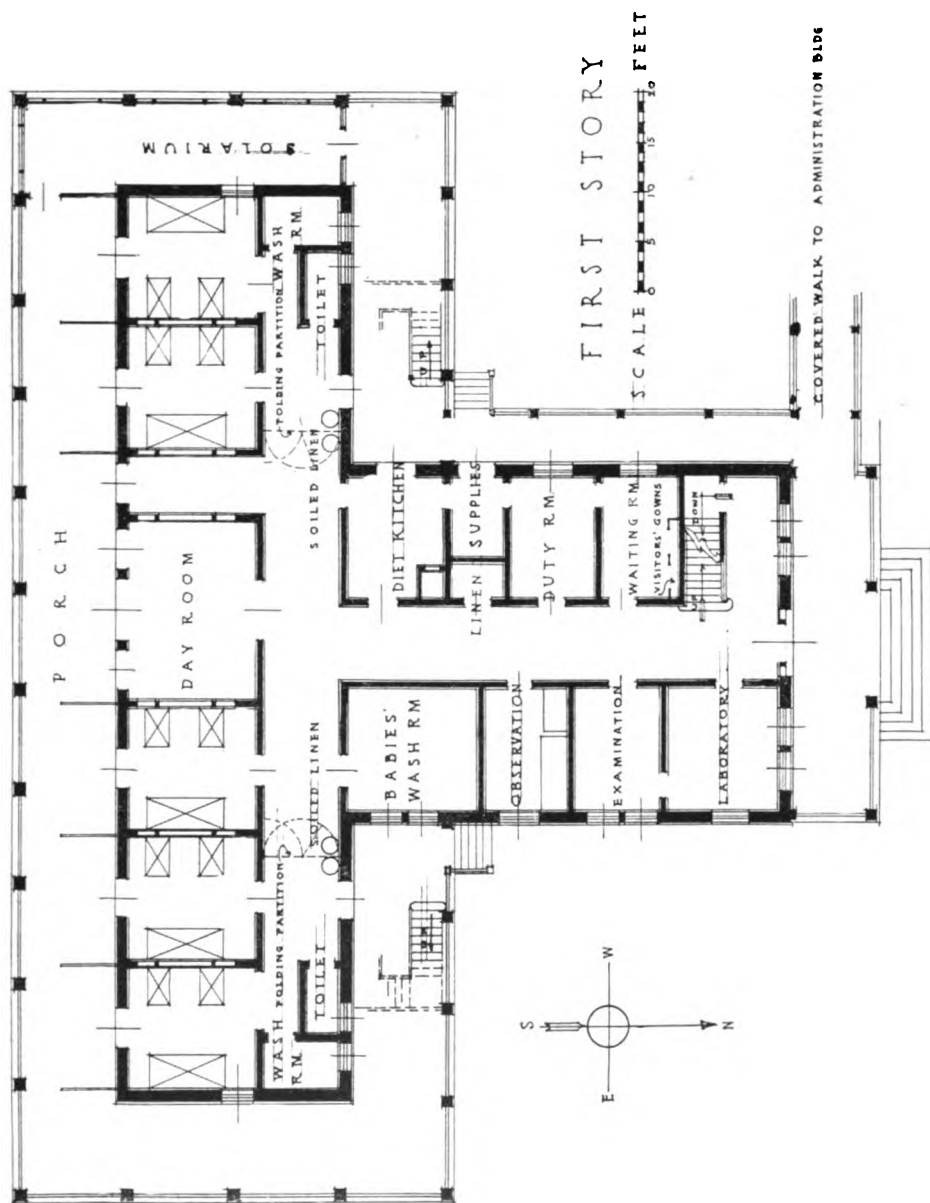
7. *The number of motherless babies for each attendant* should never be over four during the day, and no night nurses should have more than eight babies to care for. Each mother is expected to care for one baby besides her own by night as well as by day.

8. *Babies' beds* are individual enamel-iron baskets lined and padded with washable material; folded blanket for mattress.

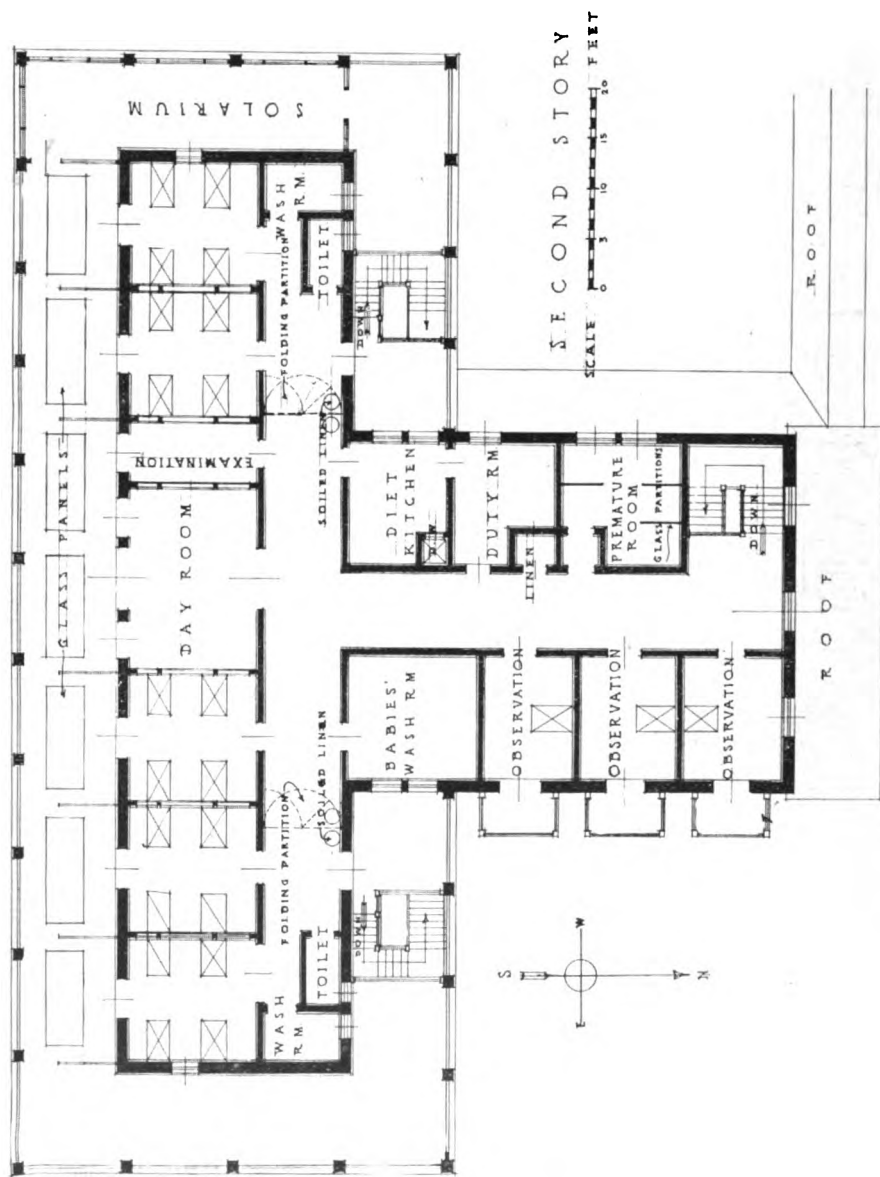
9. *Babies' clothing*: Shirt, diaper, slip—(no petticoat).

10. *Electric plugs* at frequent intervals in floors to which electric light pads may be attached for heating the beds.

11. *Visitors*—In the waiting room gowns are provided for all visitors to the babies. No children allowed to visit.



PAVILION FOR MOTHERS WITH THEIR BABIES AND FOR MOTHERLESS BABIES
FIRST FLOOR FOR MOTHERS WITH BABIES



PAVILION FOR MOTHERS WITH THEIR BABIES AND FOR MOTHERLESS BABIES
SECOND FLOOR FOR MOTHERS WITH BABIES