



# HISTORY OF THE GEORGIA BOARD OF NURSING

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On August 22, 1907, the Georgia General Assembly passed legislation to create what would become known as the Georgia Board of Nursing. The newly created Board was tasked with regulating the growing field of registered professional nurses, as well as overseeing registered nursing education programs. The new legislation authorized then Governor M. Hoke Smith<sup>1</sup> to appoint five members to the Board that would act on behalf of the citizens of Georgia. As such, on September 23, 1907, the first members of the Board were appointed and sworn into office. Less than a month later, on October 19, 1907, the first meeting of the Georgia Board of Nursing was called to order.

The first item on the agenda for the inaugural meeting was the adoption of bylaws that would govern the operations and acts performed by the Board. In addition to the adoption of bylaws, the Board also voted that an annual meeting would occur in January of each year and that the Board's home office would be located in Atlanta, Georgia. Before adjourning the meeting, the Board also concluded that one secretary should be hired to staff the new Board office<sup>2</sup>.



Atlanta College of Physicians and Surgeons – Butler Street, Atlanta

The second meeting of the Board occurred on January 3, 1908 at the Atlanta College of Physicians and Surgeons<sup>3</sup>. During this meeting, the Board reviewed and approved sixty-three applications for licensure. Over the next four years, the Board members worked cohesively to update and improve the written exam that would be administered to prospective applicants. In 1912, the Board established a minimum pass rate of 75% for candidates. Of the fifty-five applicants who sat for the exam,

fifty-one of the candidates passed.<sup>4</sup>

<sup>1</sup> Governor M. Hoke Smith had previously served as the United States Secretary of the Interior under President Grover Cleveland from March 6, 1893-September 1, 1896.

<sup>2</sup> The Board authorized a handsome salary of \$100 per year for this secretary.

<sup>3</sup> This location is now known as the Emory University School of Medicine.

<sup>4</sup> The highest exam score achieved by any applicant during the first examination was 90%.

From 1912 to 1916, the Board continued to modify and improve this examination. In 1916, the Board eventually settled on, and elected to adopt, eight content areas that would be tested uniformly on each subsequent examination. These areas included: *Materia Medica*<sup>5</sup>, Anatomy and Physiology, Dietetics, Practical Demonstrations, Children's Diseases, Obstetrics, Surgical Nursing, and Bacteriology.

In addition to vetting and approving applicants for licensure, the Board was also assigned the task of overseeing nursing education programs in the State of Georgia. In 1916, there were approximately nine nursing education programs that were regulated by the Board, all of which were located within healthcare facilities

throughout the State of Georgia. These programs included: Georgia Baptist Hospital<sup>6</sup> (Atlanta), Grady Hospital (Atlanta), St. Joseph's Hospital (Atlanta), Piedmont Sanitarium (Atlanta), Parkview Sanitarium (Savannah), St. Joseph's Hospital (Savannah), Savannah Hospital (Savannah), Oglethorpe Sanitarium (Savannah) and Augusta University Hospital



(Augusta). These programs allowed nursing students to work alongside experienced nurses in a clinical setting and learn the proper way to care for patients. However, the Board also recognized that the requirements imposed and study required to succeed in the profession could be very demanding on prospective students. As such, on May 17, 1916, the Board convened at the Dempsey Hotel<sup>7</sup> in Macon, Georgia to discuss the workload for students currently enrolled in nursing schools. A motion was made that vacation periods be made compulsory for nursing students and that the vacation period be for a minimum of three weeks annually during the standard three year nursing program.

From its inception, the Board was responsible for covering the fees and expenditures associated with running the day to day operations incurred by the Board. As such, the Board established applications fees, as well as other administrative fees, in order to generate revenue to continue their operations. However, the Board eventually found itself in need of additional financial resources in order to continue to perform their statutory duties. Therefore, on May 18, 1916, the Board voted to approach the Georgia State Association of Graduate Nurses for a monetary loan that would allow the Board to carry on inspections during the coming year. In addition, this loan would allow the Board to operate for the remaining year without raising fees for their applicants and licensees. The association agreed to the proposed terms and a loan of \$100.00 was made to the Board<sup>8</sup>.

On October 12, 1919, the Board met at the Piedmont Hotel<sup>9</sup> in Atlanta and agreed to pay the interest on the loan from the association. The loan had been extended on a yearly basis until the funds of the Board could be increased and additional revenue could be generated by the Board. At this same

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<sup>5</sup> Latin medical term for the body of collected knowledge about the therapeutic properties of any substance used for healing.

<sup>6</sup> Now known as Atlanta Medical Center.

<sup>7</sup> Located at the corner of 3<sup>rd</sup> Street and Cherry Street in Downtown Macon, Georgia.

<sup>8</sup> With interest of course.

<sup>9</sup> The Piedmont Hotel was demolished in 1963 and the former site is now occupied by the Equitable Building at 100 Peachtree Street NE in Atlanta Georgia.

meeting, the Board reviewed their largest pool of applications since their inception, with 136 applications being considered.<sup>10</sup>

In addition to the increase in applications, the Board members continued to adapt their licensure examination to keep up with the ever growing advancements being made within the health care industry. By 1919, in addition to the eight content areas referenced previously, and associated practical demonstrations, the Board elected to add eight questions to the examination to test new applicants on the ethical obligations of the nursing profession. With these added requirements, the examination could not be administered during one day. As such, the Board elected to administer the examination over the course of two days, however, the Board continued to only administer the examination once a year in Atlanta, Georgia.

The number of nursing education programs continued to grow and the Board realized that offering the examination only once a year, and in a single location, could be burdensome to potential licensees. As such, on May 22, 1920, the Board convened at the Atlanta Registered Nurses Club to discuss alternative locations and examination dates that could be offered. The Board voted to offer the examination in not only Atlanta, but also in Savannah, Macon and Augusta. In addition to the alternative examination locations, the Board again elected to modify their current examination to include additional content. The updated examination would consist of ten subjects and have one day dedicated solely to practical demonstrations. With one day being completely dedicated to practical demonstrations, the examination would now need to be administered over the course of three days. The adopted examination schedule now consisted of the following:

Day 1 – Surgical Nursing, Children’s Diseases and Ethics (Morning Session)  
Medical Nursing, Bacteriology (Afternoon Session)

Day 2 – Anatomy and Physiology, Dietetics (Morning)  
Materia Medica and Obstetrics (Afternoon)

Day 3 – Practical Demonstrations (Full Day)



Wise’s Sanitarium, Plains

In the summer of 1920, the Board began including a formal education report in their records, which included notes regarding visits to potential nursing education programs. On this initial education report, site visits were conducted to three potential programs: the Municipal Training School for Colored Nurses<sup>11</sup> in Atlanta, Georgia, Wise’s Private Sanitarium<sup>12</sup> in Plains, Georgia, and Statesboro Hospital<sup>13</sup> in Statesboro, Georgia. Over the next year,

<sup>10</sup> 4 applications without examination; 2 applications by re-examination; and 100 applications by examination. 18 of the applicants were deemed ineligible for licensure.

<sup>11</sup> This program was located at Grady Hospital in Atlanta, Georgia.

<sup>12</sup> This facility is now known as the Lillian G. Carter Nursing Center. In addition, this facility was the birthplace of former United States President Jimmy Carter, who was born at the facility on October 1, 1924.

<sup>13</sup> Now known as East Georgia Regional Medical Center

the Board would approve several additional educational programs and by April 1, 1921, there were thirty-two approved nursing education programs in the following cities: Atlanta, Augusta, Savannah, Macon, Milledgeville, Athens, Brunswick, Griffin, Valdosta, Columbus, Sandersville, Rome, Waycross, Americus, LaGrange, Albany and Dublin.

As the mid 1920's approached, the Board continued to devote the majority of its resources to the regulation and development of nursing education programs. Of particular concern to the Board was the age and education of the incoming applicants. In April of 1925, 16% of exam candidates had only one year of high school, while 32% had at only two years of high school. The Board decided that age and education should be heavily considered by a nursing education program when reviewing applicants. As such, the Board recommended that schools not accept students who will not be "of age"<sup>14</sup> when they graduated and began requiring the completion of the tenth grade before allow applicants to enter nursing education programs. The rationale behind this decision was articulated by the Board as follows:

*"One of the sources of dissatisfaction with the service of nurses lies in the fact that our nurses are too young to carry responsibility, to meet ethical emergencies, and to have the stability and experience in life required of their calling, but out of reason with their youth."*

As the responsibilities and duties of the Board increased, so did the need for additional staff. This is evidenced from the minutes of a 1925 Board meeting, which stated that the work of the Board was beginning to suffer due to the Secretary's inability to keep up with the increasing demands of the Board. Furthermore, multiple board member vacancies began to hamper regulatory efforts that the Board was attempting to pursue. The Board also recognized that additional funding would be necessary to keep providing the same level of service and regulation.

In 1927 the Board's budget was set at \$8,092.89, and was itemized as follows:

-Salaries - \$3927.50	-Board Meetings - \$1415.05
-Rent - \$775.00	-Telephone/Telegraph – \$265.41
-Postage – \$336.63	-Office Supplies – \$350.35
-Repairs - \$48.50	-Additional Clerical - \$42.80
-Printing - \$202.92	-Service - \$43.45
-Publicity - \$20.75	-Office Equipment – \$580.08
-Returned Fees - \$80.00	-Miscellaneous -\$4.45

On March 29, 1928, the Board began discussing recommendations made by the Headquarters' Committee regarding hiring additional staff to help operate the day to day activities of the Board's home office. At this time, there were approximately 2,545 registered nurses in the State of Georgia and the Board authorized the hiring of an extra staff member, a full time typist. In addition, the Board discussed the idea of employing a part time nurse to run the office when the secretary was away at official visits. The Board decided that this nurse should have a background in business, as well as stenographic experience.

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<sup>14</sup> Meaning 18 years of age.

Up until this time, the Board had shared a secretary with the Georgia State Nurses Association. On March 30, 1928, the Board voted to end this arrangement and hire an executive secretary to serve exclusively for the Board's purposes. Supporting information was provided and it was suggested that a divided budget be implemented going forward. The Board also acknowledged the need for a communication medium with licensees.

On August 31, 1928 the Board voted to require individuals entering nursing schools to present educational certificates from accredited high schools.

The responsibilities of the Board continued to grow throughout the early part of the 20<sup>th</sup> century. As such, the paperwork and filing demands on the Board staff began to multiply. In order to increase the organization methods in use by the Board, on or about May 14, 1929, the Board elected to begin using the "Kardex System"<sup>15</sup> for all filings in an effort to increase efficiency.

During the 1930 fiscal year, the Board visited and reviewed thirty-two (32) nursing schools throughout the state, including facilities in Savannah, Jesup, Waycross, Brunswick, Augusta, LaGrange, Americus, Plains, Thomasville, Bainbridge, Columbus, Dublin, Macon, Cuthbert, Swainsboro, Cordele, Griffin,



This building represents an outlay of \$75,000, with a capacity of 75 beds. Each bed is connected by telephone with the church, in order that the patient may attend divine services. The infirmary has a corps of thirty trained nurses, with a large number of graduate nurses registered and doing efficient service, both in America and in foreign lands; with a staff of thirty physicians and surgeons, three house physicians. Miss Martha W. Harris, R. N., Superintendent; Miss Edna Earle Teal, R. N., Head Nurse. Over seventeen thousand dollars.

Georgia Baptist School of Nursing, Atlanta

Statesboro and Atlanta. This number marked a substantial increase from past years for the Board. As the number of nursing educational programs began to expand in the State of Georgia, the Board decided that a list of established requirements should be available to guide programs on acceptable curriculum and facilities. For example, the Board decided that each educational program must include one (1) restroom for every ten (10) students enrolled and that a "healthy, well cooked" lunch should be served for each student. In addition the Board also required all nursing educational programs to meet the following requirements<sup>16</sup>:

- a) Average daily patients seen/cared for must be twenty (20) or more; and
- b) Eight (8) beds should be provided specifically for children, with six (6) of these beds being occupied at all times; and
- c) Instructors should have experience in obstetrics, and be in charge of at least ten (10) cases/patients; and
- d) Program should have a minimum of ten (10) students; and
- e) Students should have a minimum of forty-eight (48) on duty hours per week, with a maximum of fifty-six (56) hours.

Furthermore, the Board also reviewed the educational courses that potential licensees would need to complete during their enrollment. The curriculum that the Board approved during the 1930 fiscal year was as follows:

<sup>15</sup> Trademark for a card-filing system that allows quick reference to the particular needs of each patient for certain aspects of nursing care

<sup>16</sup> During this timeframe, the majority of nursing education programs were hospital programs that trained prospective nurses on site, in lieu of college/technical college programs.

First Year Requirements:

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|---------------------------|----------------------------------|
| a) Anatomy and Physiology | g) Chemistry                     |
| b) Elementary Nursing     | h) Bandaging                     |
| c) Bacteriology           | i) Hospital Housekeeping         |
| d) Personal Hygiene       | j) Drugs and Solutions           |
| e) Nutrition and Cookery  | k) Ethics and History of Nursing |
| f) Materia Medica         | l) Elements of Psychology        |

Second Year Requirements:

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|-------------------------------------|----------------------------|
| a) Nursing in Surgical Diseases     | f) Obstetrical Nursing     |
| b) Nursing in Communicable Diseases | g) Ethics                  |
| c) Elementary Pathology             | h) Orthopedics             |
| d) Massage                          | i) Eye-Ear-Nose and Throat |
| e) Nursing in Children's Diseases   |                            |

Third Year Requirements:

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|---|----------------------------|
| a) Disorders  | d) Emergency and First Aid |
| b) Nursing in Skin Diseases   | e) Advanced Nursing        |
| c) Special Lectures (Sanitation, Public Health, Occupational Therapy, etc.) |                            |

In addition to the classwork required, the Board also imposed a practical aspect to licensure that required all licensees to have a certain amount of physical experience in several nursing related fields. The practical assessment of licensure included practical experience in the following areas:

Practical Requirements Required In Addition To Class Work:

- a) Medical Nursing – eight (8) months
- b) Surgical Nursing – eight (8) months
- c) Pediatric Nursing – three (3) months
- d) Obstetrical Nursing – three (3) months
- e) Special Dietary Service – one (1) month
- f) Out Patient Service– one (1) month.

As the requirements for licensure increased during the 1930 fiscal year, the fees for applying for licensure also grew. The exam application fee increased to a rate of ten dollars (\$10.00)<sup>17</sup>, while the renewal fee for current licensees increased to one dollar (\$1.00)<sup>18</sup>.

On January 1, 1932, the Board of Nursing merged with the newly created Joint Secretary for Examining Boards<sup>19</sup>. As such, the Board office was relocated to the Capitol Building in downtown Atlanta, Georgia. In addition, during the 1932

<sup>17</sup> Approximately \$136.00 today

<sup>18</sup> Approximately \$13.00 today

<sup>19</sup> This entity would eventually become the Professional Licensing Board



fiscal year, the Board recognized that society as a whole was becoming more mobile, and as such, voted to develop an application for reciprocity that would allow nurses licensed in other states to use their credentials from their home state for licensure in the State of Georgia. Specifically, the Georgia Board worked closely with the Virginia Board of Nursing in developing this application. The reciprocity application that was subsequently developed was presented at the National State Nursing Board meeting in San Antonio, Texas in November 1932 as a model for other states to implement.

From creation up until approximately 1940, the Board's work consisted primarily of developing and administering the licensure examination and regulating nursing education programs. However, during the March 1940 meeting, the Board elected to revoke two (2) licenses from nurses who had recently been convicted of criminal misdemeanors and served prison sentences. This marked the first recorded instance in which the Board had ventured into the disciplinarian aspect of licensure, as the majority of their previous actions had been related to the administrative side of licensure. In addition, during the June 1941 meeting, the Board took their first non-criminally related disciplinarian action by revoking the license of a nurse who had become addicted to narcotics.

As the number of licensees increased, the number of disciplinary actions taken by the Board also increased equivalently. However, several complaints received by the Board required the Board to gather additional facts/details regarding the allegations. As such, during the January 1946 meeting, the Board moved to request the Georgia Secretary of State's Office create an enforcement office that could assist the Board in conducting investigations regarding complaints submitted against licensees. During the February 1947 meeting, this request was subsequently granted, and the Board voted to appoint Jane Van de Vrede as the inaugural enforcement officer<sup>20</sup>.

The Board continued its rapid growth during this time and, as of June 1948, there were twelve thousand, one hundred and sixty-six (12,166) registered nurses in the State of Georgia.

As the expansion of the Board continued, the funding of the Board became increasingly unbalanced. During the November 1968 meeting, the Board held a special session with the State Legislative Council to request additional funds that would allow the Board to continue to operate efficiently and continue serving the needs of the citizens of Georgia.

In 1974, the Board elected to review its fee schedule. Prior to this time, the Board had not increased any fees since 1930. During this meeting, the Board elected to increase the examination fee from ten dollars (\$10.00) to fifteen dollars (\$15.00), their renewal fee from one dollar (\$1.00) to six dollars (\$6.00), and introduce a new charge for verifications of licensure at a fee of three dollars (\$3.00) per request.

In 1975, the Board began developing a job description for the position of executive director, which would be responsible for overseeing the day to day operations of the Board. Prior to that time, the educational supervisor had assumed responsibility for the day to day tasks handled by the Board.

During the April 1978 meeting, the Board elected to again modify the way the Board maintained records, and elected to begin exploring possible ways to store files electronically. In addition, the Board

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<sup>20</sup> Ms. Van de Vrede was paid a salary of \$200.00 per month, or the equivalent of \$2028.00 in today's value.

also proposed adding guidelines and licensure requirements for advanced practice nurse practitioners.<sup>21</sup> The first advanced practice nurse practitioner rule would later be adopted by the Board during the December 1979 meeting.

During the April 1979 meeting, the Board discussed adopting the National Council of State Boards of Nursing proposed blueprint for an Integrated Licensing Examination that would be accepted by multiple State Boards.

As the disciplinary investigations conducted by the Board continued to increase, the Board elected to hire additional staff to assist with the additional workload. As such, during the August 1979 meeting, the Board voted to hire their first full-time investigator.

During the March 1980 meeting, the Board began discussing certification for licensees to practice as certified registered nurse anesthetists. This certification was later approved, and the first licensure requirements for nurse anesthetists were imposed by the Board during the May 1984 meeting.

During the 1990 Georgia Legislative Session, the Nurse Practice Act was amended in response to a four (4) year lobbying effort by the Board. This revision was the first major restructuring of the Nurse Practice Act since 1975.

Today, the Georgia Board of Nursing consists of eight (8) members<sup>22</sup> appointed by the Governor and is responsible for the regulation of registered professional nurses and advanced practice registered nurses. As part of their responsibilities, Board members develop rules and regulations that set the standards for nursing practice and education, provide the minimum qualifications for licensure, and ensure that disciplinary process is implemented in a fashion that guarantees due process and public protection.

The Board Office is now located at 237 Coliseum Drive in Macon, Georgia. Effective July 1, 2014, the Georgia Board of Nursing will merge with the Georgia Board of Examiners of Licensed Practical Nurses. The new board will be called the Georgia Board of Nursing and will be responsible for the regulation of registered and practical nurses.



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<sup>21</sup> The first [nurse practitioner](#) program was created in 1965 at the University of Colorado as a non-degree certificate program. All of the early nurse practitioner programs were established as certificate programs before transitioning them to master's degrees in the 1980's.

<sup>22</sup> Seven (7) registered professional nurses and one (1) consumer member who is not a registered professional nurse