

With the coming of the depression in 1929, new hospital construction practically ceased. More than 700 hospitals were unable to find sufficient operating funds and were forced to close. During World War II hospital construction remained at a minimum. Following the war, growing demands and increasing shortages drew national attention on the need for hospital facilities as a major part of postwar planning. In October 1944, a Commission on Hospital Care was organized under the sponsorship of the Public Health Service and the American Hospital Association, to study hospital construction. The direct outgrowth was the enactment of the Hospital Survey and Construction Act (Hill-Burton) in August 1946 as title VI of the Public Health Service Act. The purposes of the program established were twofold:

1. To assist States in inventorying existing facilities as a basis for determining their need for additional facilities and for developing comprehensive plans for construction of needed facilities, and

2. To provide the necessary incentive, through Federal assistance to the States, for constructing long-needed public and nonprofit hospitals, public health centers, and related hospital facilities—particularly in rural areas.

The availability of modern hospital facilities has helped to attract physicians, including specialists, to relatively isolated areas; and the ratio of physicians to population in these areas as a whole has been fairly constant in recent years. Today the general hospital is recognized as the focal point of community health, the training ground for health personnel, and a center for medical research. Nevertheless, in some areas and particularly in metropolitan centers, the plant is outmoded, poorly located, and sorely in need of repair or replacement.

Physical characteristics of general hospitals are not readily subject to generalization. Little comparison can be made between a one-story 20-bed hospital on the outskirts of a small town and a 500-bed multistoried and multistructured teaching hospital in a State's largest city. Of necessity the small rural hospital is not able to have the variety of medical skills, costly equipment and specialized facilities of the large urban hospital.

Today's general hospitals range widely in size and services provided, depending upon location, number of persons to be served, and availability of other health facilities. The average size of a general hospital is about 125 beds, of which 85 are medical-surgical, 20 surgical, and 15 pediatric. Basic services and departments include blood bank, central supply, clinical laboratory, electrophysiology, medical record department, outpatient and emergency departments, pharmacy, X-ray diagnosis, operating rooms, delivery postoperative recovery room, medical library, premature nursery and a physical therapy department.

As hospitals increase in size, the variety and types of services provided increase correspondingly. For example, the 400-bed hospital may consist of a number of wings, units, or separate buildings which provide, in addition to the services listed above, the following departments or departments: cancer clinic, dental department, medical service department, X-ray therapy, school of nursing, radioisotope facility, electroencephalograph, and a psychiatric unit.