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**DEVELOPMENT AND DECLINE OF UPPER PENINSULA  
HOSPITAL SCHOOLS OF NURSING**

presented by

**Lulu M. Ervast**

has been accepted towards fulfillment  
of the requirements for

Ph.D. degree in Educational Administration

*Keith Anderson*  
Major professor

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DEVELOPMENT AND DECLINE OF UPPER PENINSULA  
HOSPITAL SCHOOLS OF NURSING

By

Lulu M. Ervast

A DISSERTATION

Submitted to  
Michigan State University  
in partial fulfillment of the requirements  
for the degree of

DOCTOR OF PHILOSOPHY

Department of Educational Administration

1987



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To the nurses who preceded me, but especially to my  
primary mentor, my mother, Lulu Mukkala Hettula, R.N.

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## **ABSTRACT**

### **DEVELOPMENT AND DECLINE OF UPPER PENINSULA HOSPITAL SCHOOLS OF NURSING**

**By**

**Lulu M. Ervast**

Nine hospital schools of nursing existed in the Upper Peninsula of Michigan. The first school started in 1897. During the next 23 years the others opened. The number of schools peaked during the period from 1918 to 1920, when seven schools operated. Subsequently, the number declined so that by 1934 only two schools remained. One of these schools closed in 1974, and three years later the surviving Upper Peninsula hospital school of nursing closed.

Although brief accounts of four of these schools had been written, no history existed that told of all the Upper Peninsula hospital schools of nursing. It seemed important to record their existence while documents and artifacts were available. Because the researcher believed that this form of nursing education, like other types of education, originated in response to a social need and developed in accord with that need, this study examined the development and decline of these schools in the historical context. Hence, histories of the Upper Peninsula, Michigan, and the nation

Lulu M. Ervast

were reviewed to identify relevant social and political events. Histories and studies of nursing and nursing education in the United States were examined. Documents about each of the Upper Peninsula hospital schools of nursing were sought in local and regional repositories. These included archives and libraries. Newspapers of the era, published in the localities of the schools, were scrutinized for stories about the schools. Records that remained at hospitals where schools had been located were examined. Data from all these sources were analyzed to identify social/political factors that stimulated the development and decline of these hospital schools of nursing.

The findings demonstrated that the schools had developed during a period of economic prosperity. Their growth was stimulated by war. Depression affected the schools adversely. Proprietary schools were especially sensitive to economic factors. Two schools, operated as charitable endeavors, survived into the 1970s. They met the challenges of scientific advances, increasingly rigorous educational requirements, and rising costs but eventually surrendered the burden of educating nurses to neighboring colleges. Narrowly focused vocational training was no longer able to accommodate social needs.

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## CHAPTER I

### THE RESEARCH STUDY

#### Introduction

Accounts in The Daily Mining Gazette of Houghton ("Auspicious Event," 1899) and The Native Copper Times of Lake Linden ("First Annual Commencement," 1899) tell that nursing education has existed in the Upper Peninsula of Michigan since 1897, when a training school for nurses opened at Lake Linden. The early schools of nursing, or training schools as they were called, operated under the auspices of hospitals; thus, they were also known as hospital schools. They issued diplomas in nursing and prepared nurses who could petition to be licensed as Registered Nurse or R.N. After 71 years, this function began to shift to educational institutions when Northern Michigan University opened a baccalaureate program to prepare professional nurses. Following this lead, schools of nursing, which prepared graduates to take the license examination for Registered Nurse, opened at Lake Superior State College, Michigan Technological University, Bay de Noc Community College, and Gogebic Junior College.

When Northern Michigan University opened its baccalaureate nursing program in 1968, only two hospital schools of nursing remained although from 1918 into 1921, the peak years, there had

been six. By 1978 none remained. The Upper Peninsula Catholic told of the closing of St. Joseph's Hospital School of Nursing at Hancock in 1974 ("St. Joseph's Nursing School," 1974), and St. Luke's Hospital School of Nursing at Marquette, a school that had operated for 78 years, closed in 1977 (St. Luke's School of Nursing, 1977). With its closing, the era of hospital schools in the Upper Peninsula ended.

The hospital schools of nursing had responded to the needs of an era. As time passed social needs shifted and hospital schools could no longer efficiently fulfill those needs. Like the county normal schools of the turn of the century, Upper Peninsula hospital schools of nursing had become anachronisms.

#### Statement of the Problem

Although hospital schools of nursing existed in the Upper Peninsula of Michigan from 1897 to 1977, no documented history adequately described their inception, development, and decline. Brief accounts of some of these schools were to be found in the files of loyal alumnae. Others had paragraph-long entries in Medical History of Michigan, Volume II (McCabe in Burr, 1980, pp. 673, 676, 681, 682). Many, but not all, were discussed in the manuscript Nursing in Michigan, a History (McCabe, 1930). McCabe wrote the director of each school of nursing operating in November 1931 and solicited an account of the school. As a result, the length and detail of each account varied according to the time the director, or her designee, could devote to the task. When she wrote

the section "Michigan Schools for Nursing" in Medical History of Michigan, McCabe relied on questionnaires sent to schools recognized in 1929 by the Michigan Board of Registration of Nurses and Trained Attendants (McCabe in Burr, 1930, p. 654). As a result of this approach, only four Upper Peninsula hospital schools of nursing were discussed. Four additional schools were mentioned as having existed. However, no mention in either account was made of the earlier existence of Lake Superior School for Nurses.

By 1980 almost all the graduates, teachers, and administrators of the pre-World War I era had died. In many cases buildings had been razed or remodeled beyond recognition and records had been lost or destroyed. These schools and their contribution to the development of nursing education in the Upper Peninsula were at risk of being erased from memory and lost to history. Clearly, an account of the history of all the Upper Peninsula hospital schools of nursing was needed before the remaining records had vanished.

#### Purpose of the Study

This study explored the development of nursing education in the Upper Peninsula as the primary objective shifted from providing nursing care to providing the base for professional nursing practice. To accomplish this task, the development and demise of the hospital schools of nursing of the Upper Peninsula were examined within a historical context. The writer considered the effect of some of the economic, scientific, medical, and social factors on those schools. During the 80-year span from 1897 to 1978,

scientific and medical knowledge flourished, wars were waged, economic booms and depressions intervened, and the availability of education for women increased. These and other elements provided the social/political and historical background that was probed and analyzed to discern the causes for the development and demise of the hospital schools of nursing in the Upper Peninsula.

In addition, this study focused on the response of nursing education in the Upper Peninsula to developments in nursing education in the nation. Of particular interest was the series of landmark studies, conducted during the twentieth century, that intensely examined many facets of nursing education.

Because it was assumed that schools exist to meet the needs of a society and that events that affect a society also affect its schools, the following questions served as a framework for this study:

1. How did the economy of the Upper Peninsula affect the hospital schools of nursing?
2. How did wars affect these schools? What effect did wars have on students and faculty? Did wars produce curriculum changes?
3. How did changes in science and medicine affect the schools and influence the nursing curricula?
4. Did the increasing opportunities for education of women have any effect on nursing education?
5. How did the various studies of nursing and nursing education affect the Upper Peninsula hospital schools of nursing?



6. Did trends in nursing education in the Upper Peninsula parallel trends in nursing education in the nation?

### Significance of the Study

This study was proposed because an investigation of the development and decline of hospital schools of nursing in the Upper Peninsula had not been previously undertaken. Although some alumnae groups had written accounts of their schools, no scholarly work that included all the schools had been done. For this reason this study pursued an examination of the previously listed questions and attempted to demonstrate how nursing education began and evolved in the Upper Peninsula.

It was the researcher's belief that nursing education in the Upper Peninsula originated in response to a social need and that it developed in accord with this need, changing as the need changed. It was not unlike other forms of professional education in the United States. Therefore, it was the thesis of this study that the growth and development of nursing education followed precepts of society that led to important and significant social constructions based on social need. It was believed that an examination of this phenomenon in the microcosm of the Upper Peninsula might yield important guiding principles for assessing the growth and worth of various forms of professional education. In this process the study might also contribute additional insight into the roots of nursing education's contemporary problems as well as preserve knowledge of its heritage in the Upper Peninsula.

### Limitations of the Study

The study was limited to the search for answers to the research questions about why the Upper Peninsula hospital schools of nursing opened and why they closed.

The search for answers was hampered because many important records had been lost or destroyed. Fortunately, records preserved by the Michigan Board of Nursing provided proof that each school had graduates who were admitted to the tests for licensure as Registered Nurse. Further, Minutes of the Michigan Board of Nursing, preserved in the state archives, discussed each of the schools except St. George's Hospital Training School for Nurses at Iron Mountain. Additional primary sources were located as follows:

1. For Lake Superior School for Nurses at Lake Linden, the corporate articles, "Articles of Association of the Lake Superior School for Nurses" (1902), were preserved at the Houghton County Clerk's Office. A photocopy of a letter from Bertha Pullen, a consultant to the Michigan Board of Nursing, written on December 22, 1962, and addressed to Janice Hopper, a student nurse at St. Joseph's Hospital School of Nursing, contained a variety of information about Lake Superior Training School for Nurses. This communication related entrance requirements, curriculum, and hours of duty for pupil nurses at Lake Superior Training School for Nurses. The photocopy of this letter, a facsimile of which may be found in Appendix A, was located in the historical file at the

Medical Library of Portage View Hospital, the hospital that succeeded St. Joseph's Hospital.

2. For St. Luke's Hospital School of Nursing at Marquette, annual reports to the Michigan Board of Nursing were preserved in the State Archives of Michigan, and "Articles of Incorporation of St. Luke's Hospital of Marquette, Michigan" (1897) were on file at the Marquette County Clerk's Office. In addition, annual reports of St. Luke's Hospital from 1915 through 1928 and from 1931 through 1940 were stored at the Marquette County Historical Museum. The St. Luke's School of Nursing alumnae files contained school bulletins for most years from 1957 through 1977 and the program for commencement in the final year, 1977. The first diploma issued by the school was preserved at the Marquette County Historical Museum. The Record of Registered Nurses, Volumes I and II, was available at the office of the Secretary of the Michigan Board of Nursing. Interviews with graduates and two former directors added to the fund of data.

3. For St. George's Hospital Training School for Nurses in Iron Mountain, the only additional primary data were the corporate articles of the hospital. These were found at the Corporation and Securities Bureau of the Michigan Department of Commerce, where they had been filed.

4. For Sault Ste. Marie Hospital Training School for Nurses at Sault Ste. Marie, records of former students, teachers' class books, and records of students' duty assignments were kept in the office of the Director of Nursing at Chippewa County War Memorial Hospital.

These records began in 1904 and continued until the school closed in 1933. An interview with a graduate of 1933 also provided primary data (A. W. Rye, personal communication, August 2, 1984). Copies of annual reports to the Michigan Board of Nursing filed in 1922, 1925, and 1930 remained among the documents at Chippewa County War Memorial Hospital and provided information about the status of the school during that period. A copy of a letter written by Mary C. Wheeler, the General Secretary of the Michigan Board of Registration of Nurses and Trained Attendants, dated March 17, 1928, provided information on the number of graduates in each class from 1905 through 1927. The text of this letter, addressed to Anna Northup, Superintendent of Nurses at Chippewa County War Memorial Hospital, is found in a facsimile in Appendix B. Articles of Association of the Sault Ste. Marie Hospital drawn up in 1903 and an amendment, added in 1917, were filed with the Corporation and Securities Bureau of the Michigan Department of Commerce in Lansing.

5. For Newberry State Hospital Training School for Nurses at Newberry, records of students during their affiliations at Sault Ste. Marie Hospital Training School for Nurses and Illinois Training School for Nurses at Chicago have been preserved at the office of the Director of Nursing at Chippewa County War Memorial Hospital and the Department of Special Collections of the Library of the University of Illinois at Chicago.

6. For Houghton County Training School for Nurses at Laurium, student records from 1908 onward are housed in the Medical Library

of Calumet Public Hospital. Letters from the Michigan Board of Registration of Nurses from 1917 through 1932 were kept with the student records. An agreement with Children's Hospital of Michigan, dated 1922, to provide an affiliation in care of sick children also existed among the records at Calumet Public Hospital. The "Articles of Association of the Houghton County Training School for Nurses" (1911) were recorded at the Houghton County Clerk's Office. Interviews with a 1923 alumna (M. B. Johnson, personal communication, August 10, 1984) and with the last director of the school (M. N. Gipp, personal communication, August 11, 1984) also provided primary data.

7. For Calumet & Hecla Hospital Training School for Nurses at Calumet, "Articles of Association of the Calumet & Hecla Hospital" (1913) were preserved at the Houghton County Clerk's Office. These articles and a subsequent set, drawn up in 1924, were also recorded and filed with the Corporation and Securities Bureau of the Michigan Department of Commerce in Lansing. Records of student nurses who affiliated with Illinois Training School for Nurses for clinical experience at Cook County Hospital from 1913 through 1920 were kept in the Department of Special Collections of the Library of the University of Illinois at Chicago. The letter from the consultant to the Michigan Board of Nursing told of entrance requirements, curriculum, and hours of duty for student nurses (Pullen, 1962). An interview with a graduate of 1921 corroborated this information (A. S. O'Neil, personal communication, August 11, 1984). Calumet & Hecla Mining Company annual reports were available at the Department

of Special Collections of the Library of Michigan Technological University.

8. For St. Joseph Hospital Training School for Nurses at Menominee, corporate articles for the hospital, dated April 29, 1898, were found at the Menominee County Clerk's office ("Articles of Incorporation of The Sisters of the Third Order of St. Francis of Menominee, Michigan," 1898). References to the school were also found in "Minutes of the Meetings of the Michigan State Board of Registration of Nurses" for 1921 (Moore, 1920-1921) and "Minutes of the Meeting of the Michigan Board of Registration of Nurses and Trained Attendants" for 1924 (Moore, 1921-1928).

9. For St. Joseph's Hospital School of Nursing at Hancock, annual reports to the Michigan Board of Nursing from 1931 to 1959 were preserved at the State Archives of Michigan in Lansing. Interviews with former students and teachers added to the store of primary data. School bulletins from most years from 1964 to 1971 were located in St. Joseph's Hospital School of Nursing Alumnae files, as were other miscellaneous items such as a student handbook for 1963 and a program of the last graduation in 1974. Corporate articles for the hospital, dated May 3, 1948, were filed with the Houghton County Clerk's Office ("Articles of Incorporation of St. Joseph's Hospital of Hancock, Michigan," 1948).

Student records were not examined in either of the two schools that remained open after 1933. Only final records of the performance of graduates were stored at either of the hospitals, and

the permission of each of these graduates would have been required in order to examine these transcripts. The process of securing the required permission and examining each transcript would have been extremely time consuming. As more comprehensive information was available from other sources, the process of examining and collecting the data from these transcripts was avoided.

### Definition of Terms

American Nurses' Association (ANA) is an organization composed of nurses licensed to practice as Registered Nurse regardless of the type of pre-practice educational preparation. From 1897 to 1911 the organization was called Associated Alumnae of the United States and Canada. During that period the organization was a loose network of alumnae groups. In 1911 a reorganization occurred with subunits formed according to state boundaries.

An accredited school, until 1952, was one whose graduates were permitted to write the examination for licensure as Registered Nurse. The curriculum of such a school met, at least, the minimum criteria set by the Michigan Board of Nursing. After 1952 the term "accredited" school meant that the school's curriculum, faculty, and admission requirements met at least minimum standards for accreditation by the National League for Nursing.

Affiliation was a way of providing student nurses with learning experiences not available at the hospital school at which they had enrolled. These experiences usually enhanced areas of limited experience in a small hospital, e.g., nursing of sick children or

nursing of people with psychiatric problems. This scheme provided the experience mix required by the Michigan Board of Nursing.

An approved school was a school whose curriculum, faculty, and entrance requirements, after 1952, met minimum standards for operating a school as defined by the Michigan Board of Nursing. Before 1952 such a school would have been said to have been "accredited." Students from an "approved" school were permitted to write the licensure examination for Registered Nurse.

The Copper Country comprised the copper-producing counties of Keweenaw, Houghton, and Ontonagon.

Home school was the school where the student enrolled and at which the majority of a student's nursing education occurred.

Hospital school of nursing was a school operated by a hospital at which nursing was taught to people who aspired to take the state examination for licensure as Registered Nurse. These schools were also known as diploma schools because a diploma, not a degree, in nursing was granted after the successful completion of the prescribed period of study.

A matron was a graduate nurse who supervised nursing service and also taught clinical nursing to pupil nurses.

Michigan Board of Nursing is the body designated by statute to govern the practice and education of nurses in Michigan. One of its means of control is to judge which schools have curricula adequate to allow their graduates to take the examination for licensure as Registered Nurse or R.N. During the years since 1909 when this board was first constituted by Public Act 319, it has been known by



various names. First, it was the Michigan State Board of Registration of Nurses. Then, in 1921, Public Act 255 added responsibility for the licensing of an auxiliary group of caregivers and the name was changed to Michigan Board of Registration of Nurses and Trained Attendants. Public Act 137 of 1952 renamed it the Michigan Board of Nursing. With this change, licensed practical nurses and licensed psychiatric attendant nurses also served on the board. The name has since that time remained unchanged despite shifts in the composition of the board. Act 149 of 1967 made licensure mandatory before practice and altered the composition of the board so that psychiatric attendant nurses no longer served on it. Eventually, in 1978 the role of the Michigan Board of Nursing was codified as part of PA 368 (the Public Health Code).

National League of Nursing Education (NLNE) was an organization of nurses who were interested in nursing education. Until 1912 the organization was known as the American Society of Superintendents of Training Schools for Nurses. In 1952 the name was changed again. This time it was shortened to the National League for Nursing (NLN) and admitted people who were not nurses to membership.

A pupil nurse was a student nurse in the era of training schools for nurses.

The superintendent of nurses was the chief nurse. This nurse was responsible for both the teaching of students and supervising the care of patients.

Training school was the term used for schools of nursing until well into the twentieth century.

The Upper Peninsula is the northern portion of the state of Michigan. It is that land mass seen in Figure 1 which is bordered on the north by Lake Superior and on the south by Lake Michigan and Lake Huron.

### Methodology

A historical study of this sort required assurance that sufficient primary and secondary sources were available. Without them the study could not have been undertaken. Then, an accurate historical context in which to place the events occurring in the Upper Peninsula was required. In addition, the support of nurses in the Upper Peninsula was critical because they could provide information and encouragement and point out untapped sources. Therefore, a three-pronged approach was used. It included locating primary and secondary source material, reading to set the historical frame, and inviting information and comment from nurses.

The search for source materials started with an attempt to contact, by telephone or letter, graduates or teachers from each of the hospital schools in the Upper Peninsula. This was followed by interviews with the respondents. A copy of the form used may be found in Appendix C. Permission to review records of the former schools was sought from hospital administrators when hospitals that had operated schools still existed. In one case permission to examine records of the former school was sought from the religious

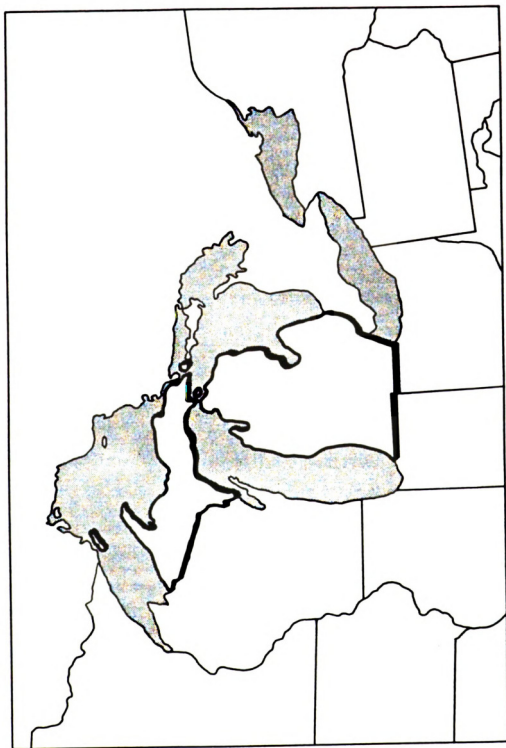


Figure 1.--Michigan, with its two peninsulas, in the Midwest.

order that had operated the school. Where records remained, permission was courteously granted.

The Special Collections Department of the Library of Michigan Technological University, the Special Collections Department of the Library of the University of Illinois at Chicago, and the State Archives of Michigan were very helpful. Records of learning experiences provided for student nurses from Newberry State Hospital and Calumet & Hecla Hospital at Calumet while on affiliation with Illinois Training School for Nurses during the years 1913 to 1920 were located in the Special Collections Department of the Library of the University of Illinois at Chicago. At the State Archives of Michigan were found annual reports to the Michigan Board of Nursing submitted by St. Luke's Hospital School of Nursing at Marquette and St. Joseph's Hospital School of Nursing at Hancock. The reports from St. Luke's Hospital School of Nursing began in 1918 and concluded in 1959. Those from St. Joseph's Hospital School of Nursing covered the period 1931 through 1959. Among the documents at the State Archives of Michigan were Minutes of the Michigan Board of Nursing containing discussions and actions referring to the Upper Peninsula schools of nursing. At the Special Collections Department of the Library of Michigan Technological University, copies of annual reports to the stockholders of the Calumet & Hecla Mining Company were located, as were Polk's Directories for the Houghton County area during the period surrounding the turning of the century.

The Record of Registered Nurses, Volumes I and II, in the Office of the Secretary of the Michigan Board of Nursing provided licensing information about nurses, telling from which school each had graduated and identifying the year of graduation as well as providing the number of the license issued.

Local newspapers of the era, e.g., The Native Copper Times of Lake Linden, The Herald Leader of Menominee, The Mining Journal of Marquette, The Daily Mining Gazette of Houghton, The Calumet News, The Menominee Range of Iron Mountain, The Iron Mountain News, The Newberry News, and The Upper Peninsula Catholic, were important secondary sources reporting events at the time they occurred. Another secondary source that provided much information about hospital schools in Michigan was McCabe's 1930 manuscript, "Nursing in Michigan--A History." This helpful source telling of the schools that operated in 1930 was located in the State Archives of Michigan.

Secondary sources on history of the Upper Peninsula, in addition to newspapers, included local histories such as Monette's History of Lake Linden, Michigan, published in 1977 and The History of Luce County: "Past Years", Volume II, compiled by Minnie Ida Mattson in 1981. Medical History of Michigan, Volume II (Burr, 1930), helped provide a framework for nursing education in the Upper Peninsula. Sawyer's (1911) A History of the Northern Peninsula of Michigan and Its People was immensely helpful in providing background data.

Setting the historical frame required reading not only about the Upper Peninsula of Michigan in the era studied, but also about nursing education in the nation. Works of leaders in nursing education and major studies of nursing education, e.g., Nursing and Nursing Education in the United States (Committee for the Study of Nursing and Nursing Education, 1923) and Nursing Schools at the Mid-century (West & Hawkins, 1950) were carefully read and analyzed. Interpretations of the historical phenomena of nursing education by Baer (1985) and Reverby (1982) were also studied. Starr (1982) and Ludmerer (1985) told of the development of hospitals and medical education in the period being studied and helped provide part of the historical context for nursing education. Historians, especially Dunbar (1970) in reference to Michigan and Morison (1972) in reference to the United States, were consulted to fill in the historical frame.

Primary data on the Upper Peninsula schools of nursing were supplemented by interviews with former students or teachers from five of the schools. A letter from a former consultant to the Michigan Board of Nursing provided information on three schools in Houghton County, telling of such things as curricula, entrance requirements, bed capacity of the hospital, nursing staff of the hospital, and hours of duty for student nurses. Private journals and reminiscences helped account for life as a student nurse in Michigan's Upper Peninsula, as did brief historical accounts of St.

Luke's Hospital School of Nursing and St. Joseph's Hospital School of Nursing submitted for the fiftieth anniversary of the Michigan Nurses' Association.

### Organization of the Study

In Chapter I the study was introduced. Chapter II contains a review of literature. It begins with a discussion of the economic base of the Upper Peninsula during the time when the hospital schools operated. Following this, there occurs an account of the effect on nursing of wars, scientific advances, and expanding educational opportunities for women. Then, nursing education, as conceived by Florence Nightingale, is discussed and the adaptation of this form of nursing education in the United States is described. Last, a series of proposals and studies of nursing education, which were made in the United States after hospital schools of nursing were well established, is presented. The continuing development of nursing education in the United States is told in conjunction with these studies and proposals.

The means used to search for facts about the Upper Peninsula hospital schools of nursing are reported in Chapter III. In Chapter IV the histories of each of the nine schools are related. The research questions are applied to each school in this discourse. In Chapter V are reported the opinions of hospital school alumnae about the value of their training. Findings about major influences on the development of nursing education in the Upper Peninsula are reported

in Chapter VI. From these findings, conclusions that may have relevance for various forms of adult education are drawn.



## CHAPTER II

### LITERATURE SURVEY

#### Introduction

The latter third of the nineteenth century was an exciting period. It was a time of westward expansion and a period during which the wealth of natural resources of the Upper Peninsula was recognized. It was also a time of movement in the social arena when science and medicine advanced, when opportunities for women opened, and when education was being popularized. It was a time during which nursing developed as a profession.

During the twentieth century, national expansion ceased but American influence increased. The natural resources of the Upper Peninsula were used, and its mineral wealth was depleted. Surgery became a safe and accepted therapy, and the infectious diseases of the nineteenth century were replaced by illnesses caused by twentieth century life styles. Women won suffrage and became wage earners in increasing numbers. The period of education required to cope with the challenges presented by twentieth century America lengthened. Literature regarding these social and political changes is reviewed in the following pages. Topics covered in this chapter, therefore, include the Upper Peninsula economy, war and nursing, changes in science and medicine, nursing and higher education of

women, the Nightingale model of education for nursing, the adaptation of the Nightingale model in America, and a series of studies aimed at strengthening nursing education and putting nurses in control of education for the practice of nursing. An account of the development of nursing education in the United States occurs in conjunction with the efforts of nursing leaders to strengthen and control nursing education.

### The Upper Peninsula Economy

The economy of the Upper Peninsula was initially based on its natural resources. Its industries were extractive, i.e., primarily mining and lumbering with some fishing and farming. Transportation developed subsequently as these raw materials were hauled to markets (Sawyer, 1911). Soon after the wealth of its natural resources was discovered, its population expanded. In 1880, according to the Twelfth Census of the United States, the Upper Peninsula had 85,085 inhabitants (U.S. Department of Commerce, 1903). The population reached 180,658 by 1890 and climbed to 259,352 by 1900 (U.S. Department of Commerce, 1903). The rapid rate of growth continued. In 1910 the population reached 325,628 (U.S. Department of Commerce, 1921). By 1920, however, growth leveled and the population crested at 332,558 (U.S. Department of Commerce, 1921). Thereafter, a gradual decline occurred. By 1980 the population of the Upper Peninsula was reported as 319,782 (U.S. Department of Commerce, 1982).

The years when great economic prosperity and growth occurred stretched from 1890 to 1920. It was during those years that copper and iron mining boomed (Dunbar, 1970). The copper mining industry, however, contended with the vagaries of its value in world markets. A slump occurred after World War I, which caused the largest producer, the Calumet and Hecla Mining Company, to close temporarily in 1921 (Calumet and Hecla Mining Company, 1922). In 1932, when the copper market was in deep depression, almost 6,000 people were unemployed and the tax base of the Copper Country was jeopardized (Magnaghi, 1982). The market recovered temporarily during World War II but again declined (Dunbar, 1970). Despite improved mining techniques the high cost of production compelled most mines in the Copper Country to close. From 1968 onward, copper mining continued only in Ontonagon County (Wendland, 1986).

The fortunes of iron mining have been tied to the steel industry. Like copper mining, iron mining declined after World War I and was severely depressed during the 1930s. A moderate recovery occurred during World War II (Dunbar, 1970). Nevertheless, most mines were doomed because of high production costs. Only a few mines in Marquette County, where low-grade ores could be concentrated into pellets, continued to operate.

Lumber production in the Upper Peninsula peaked during the first decade of the twentieth century (Dunbar, 1970). Conservation measures, however, permitted reforestation. Because of forestry management, lumbering has continued as an industry found throughout

the Upper Peninsula (May, 1980). The seeds of tourism, which had been sown in the Upper Peninsula about the middle of the nineteenth century (Sawyer, 1911), were nurtured. By 1980 tourism had become a year-round business and a major industry (May, 1980). This service industry, like lumbering and mining, was based on the natural resources of the Upper Peninsula.

Health care and government service are two forms of employment that are not directly linked to the natural resources. They are, nevertheless, important sources of employment at the present time. Sommers (1984) pointed out that the dominant source of income of wage and salary earners in the Upper Peninsula was some form of government employment. Data in County Business Patterns, 1984, Michigan (U.S. Bureau of the Census, 1986) revealed that health services employed more people in the Upper Peninsula than did lumbering and mining combined. Service industries, like health care, had displaced heavy industry as major employers in the Upper Peninsula.

#### War and Nursing

Nursing has a direct relationship with war. It was in the Crimean War at Scutari that Florence Nightingale demonstrated the effect of organized nursing care. Her small, organized nursing service so impressed the British people that they donated 44,000 pounds sterling for her to use as she chose (Dolan, 1975). With this fund she endowed the Nightingale School at St. Thomas's Hospital. The first use of an organized nursing service in an

American war occurred in the Spanish-American War. One of the results of this war, which thrust the United States into the role of a major world power, was that it demonstrated the value of trained nurses in field hospitals. Trained women nurses were reluctantly accepted by the Surgeon General at the start of the war (Kalisch & Kalisch, 1986). However, nurses quickly proved their value in camps riddled with disease. Sanitary conditions were abominable. As a result typhoid, with 20,926 cases, was the major cause of death (Kalisch & Kalisch, 1986). Morison (1972) claimed deaths from disease were 13 times greater than deaths from battle casualties. Nurses cared for victims of disease and wounds. They served in camps and on hospital ships (Kalisch & Kalisch, 1986).

Among those volunteer nurses, who served for the cost of railroad fare to their duty stations and \$30 per month with board, were Roman Catholic nuns. One contingent was composed of members of the Congregation of St. Joseph of Carondelet. They served at camps in Kentucky, Georgia, and Cuba. After the war was over, their order sent four of these veterans to Hancock to establish St. Joseph's Hospital (Savage, 1923). Later, a school of nursing was opened at this institution. Miss Olive Pendill, a Negaunee, Michigan, native and a graduate of St. Luke's Hospital School of Nursing in Chicago, also served in Florida and Cuba during the Spanish-American War ("Death takes Miss Pendill," 1957). After her service she returned to Marquette where, in 1899, she became Superintendent of Nurses at St. Luke's Hospital and in that capacity headed the new school of nursing. She was credited with setting the young hospital's school

for nurses on a firm foundation during her short tenure as Superintendent of Nurses (St. Luke's Hospital, 1922).

Both the Army and Navy Nurse Corps were established as a result of the performance of nurses in the Spanish-American War (Goodnow, 1939). It was also thought that the favorable publicity received by nurses during the Spanish-American War contributed to the greater than two-fold increase in hospital schools of nursing in the decade from 1900 to 1910 (Lake, 1915).

In 1917 the United States was again drawn into war. The country mobilized quickly. Young men were inducted into the armed services, and nurses volunteered to augment the ranks of the Army and Navy Nurse Corps. By October 1917, almost 1,100 nurses had gone overseas (Kalisch & Kalisch, 1986). By the end of the war, some 10,000 American Army and Red Cross nurses served overseas (Goodnow, 1939).

The movement of so many nurses into military service created a nurse shortage at home that was exacerbated by the influenza epidemic, which took the lives of 548,452 people in the United States (Kalisch & Kalisch, 1986). Means of bolstering the supply of nurses were initiated. The first of these means was to increase the number of student nurses by intensifying recruiting efforts. These efforts, which were clothed in patriotism, resulted in increasing applications to schools of nursing by about 25% (Kalisch & Kalisch, 1986). The swelling enrollment strained the resources of some schools and exposed problems that were addressed in a subsequent

study of nursing and nursing education, commonly called the Goldmark Report (Committee for the Study of Nursing Education, 1923).

Another means of increasing the number of student nurses was proposed by a group of nursing leaders and accepted by the Secretary of War in May 1918 (Dolan, Fitzpatrick, & Herrmann, 1983). It was to open the Army School of Nursing. War enthusiasm bore abundant fruit, and its first graduating class, in 1921, had 500 members (Dolan et al., 1983). This school was well organized. Its curriculum was based on the Standard Curriculum for Schools of Nursing, which had just been published in 1917. Hours of duty were arranged so learning could occur, and affiliations were provided for experiences not available at Army hospitals (Kalisch & Kalisch, 1986). As memory of the war dimmed, classes grew smaller. Finally, in 1932, the school was closed for economic reasons (Goodnow, 1939). It had, however, served as an example to all other hospital schools.

The third means used at this time, to provide nurses, was to enroll women who were college graduates in an accelerated nursing program. The course lasted two and a half years, starting with an intense summer session at Vassar in 1918. After the introductory summer session, the 435 students who enrolled were admitted into carefully selected schools across the nation (Dolan et al., 1983). Unlike the Army School of Nursing, which was planned as a continuing school, this was a unique and solitary effort. Dreves (1975), one of its graduates, believed that it helped to bring nursing education into the field of higher education and it challenged colleges to

accept responsibility for nursing education. At the least, it produced a cadre of women who became leaders in nursing.

The United States was thrust into war again on December 7, 1941. Once more, energies were concentrated in mobilizing for war. Nursing leaders considered means of quickly producing the nurses needed. Reactivating the Army School of Nursing was eschewed as being too costly and too slow by the chief of the Army Nurse Corps (Kalisch & Kalisch, 1986). Instead, part of the \$1,800,000 earmarked for nursing education in the Labor Federal Security Act was used to provide refresher courses for inactive nurses, as well as to help existing schools expand their enrollments, and to provide supplementary courses in special fields of nursing. These efforts paid off in that some 3,700 inactive nurses returned to duty after taking the refresher courses and another 4,300 profited from advanced study, and enrollments in schools of nursing increased (Kalisch & Kalisch, 1986).

Despite these increases, the nation needed more nurses. The federal government responded with the Bolton Act, which became law on June 15, 1943 (Kalisch & Kalisch, 1986). It created the United States Cadet Nurse Corps. Students who enrolled under the provisions of this act received tuition, fees, uniforms, and a personal allowance throughout their schooling in return for pledging to provide essential nursing service for the duration of the war in either a military or civilian setting (U.S. Public Health Service, 1950). Schools of nursing that participated in the program were paid for the maintenance of the student during the first nine months



of the course, when student nurses were incapable of providing much nursing service. Any state-accredited school of nursing could become a participating school, and two Upper Peninsula schools of nursing participated. Such schools were required to accelerate their programs to 30 months and arrange for an additional six months of supervised experience in a military, federal, or civilian hospital or public health nursing agency (Roberts, 1963). By 1945 funds procured through the Bolton Act had been allocated to 1,125 schools and 170,000 students (Bullough, 1976). Although the federal government had been involved in nursing education in the Army School of Nursing, this law set a precedent for massive federal aid to nursing education (Bullough, 1976).

Cadet nurses were sorely needed because military service had drawn off 65,000 registered nurses, most of whom had left jobs in civilian hospitals, and some 13,800 nurses were employed in the recently vastly expanded field of industrial nursing. As a result, hospitals were acutely short staffed. In an attempt to fill the void, student nurses carried 80% of the work load in the hospitals with schools of nursing (Kalisch & Kalisch, 1986).

The major effect of World War II on nursing education was that the federal government had allocated and provided more than \$160 million for nursing education (Kalisch & Kalisch, 1986). In doing this it had set precedent. Because of federal requirements for receiving funding under the provisions of the Bolton Act, schools of

nursing had improved their curriculum offerings and faculties had been upgraded.

### Changes in Science and Medicine

At the time Florence Nightingale practiced nursing at Scutari, the mode of transmission of infection was unknown. She unequivocally rejected the idea that disease and illness could be caused by microorganisms, despite data proving otherwise (Palmer, 1977). The appendices to Florence Nightingale's Nurses (Seymer, 1960) contain copies of documents that attest that ventilation, sanitation, and proper feeding of the sick were emphasized in teaching pupil nurses at St. Thomas's Hospital. In addition, pupil nurses learned some anatomy and some physiology and had lectures about, and readings on, various surgical and medical conditions. Microbiology and bacteriology were conspicuously absent.

Nevertheless, great strides had been made in conquering infectious disease. Because of the work of Pasteur, Koch, and Lister, the means by which infections were transmitted were better understood. As a result, infections were more easily contained. Surgery, likewise, became much safer and operations never before undertaken could be attempted. Starr (1982) wrote that former custodial almshouses became hospitals where cure occurred. Morison (1972) pointed out that in this era of the late nineteenth and early twentieth centuries momentous advances in abdominal and thoracic surgery transpired.

These changes were mirrored in the nursing curricula of the day. As early as 1893, Isabel Hampton, who was then superintendent of nurses and principal of the training school at Johns Hopkins Hospital, urged that nurses should have an understanding of bacteriology (Hampton, 1949). In a speech delivered to graduate nurses in 1904, another nurse educator, Mary Adelaide Nutting (1926), proposed that a nursing curriculum should include:

The subjects of anatomy and physiology, the handling of drugs and knowledge of . . . their effects, of dietetics, that is the preparation of food and of food values, of the fundamental laws of hygiene and sanitation, and the courses of disease. (p. 46)

At that period Ann Heintze (1907), a physician, suggested that the five main theoretical learning components for student nurses should be (a) domestic science with hygiene and sanitation, (b) physiology and anatomy, (c) pharmacology, (d) chemistry and bacteriology, and (e) psychology and sociology. By 1911 the Michigan State Board of Registration of Nurses promulgated a curriculum that incorporated minimum requirements for a nursing program. Included in this curriculum were hygiene and sanitation, anatomy, physiology, urinalysis, bacteriology, materia medica, dietetics, a great variety of nursing procedures, and nursing care of people with diverse conditions (McCabe, 1930). Moreover, candidates for the license of Registered Nurse were examined in anatomy, physiology, hygiene, bacteriology, dietetics, materia medica, and elementary urinalysis, as well as in the nursing care of people with a variety of conditions (McCabe in Burr, 1930). In the few decades after systematic nursing education was introduced into the United States,

many sciences, only recently developed, were added to the nursing curriculum. Most remarkable was that bacteriology, a science scorned and disparaged by Florence Nightingale, had become a required subject!

While the biological sciences were quickly incorporated into the nursing curriculum, other sciences were added more slowly. Chemistry, a natural science, was among these. In 1914 it was incorporated into the ideal curriculum proposed by the Michigan State Board of Nursing (McCabe, 1930). By 1919 it was found in the curricula of some of the Upper Peninsula hospital schools of nursing. As late as 1935 it was not identified as part of the curriculum at St. Joseph's Hospital School of Nursing. The behavioral sciences, likewise, were slowly incorporated into the curricula of schools of nursing. Heintze (1907) advocated teaching both psychology and sociology to pupil nurses. However, it was only after the Committee for the Study of Nursing Education (1923) published its report telling of the problems in nursing education that these courses became part of nursing curricula. The Michigan Board of Registration of Nurses and Trained Attendants incorporated both courses into the model curriculum of 1925 (McCabe, 1930). Castile (1948) suggested that the reason for the delay in incorporating the behavioral sciences into nursing curricula was that priority was given to those subjects that were essential to know in order to give bedside care, while what the learner needed to learn to become a self-reliant community worker tended to be neglected.

The basic sciences became an integral part of the nursing curriculum. Changes were made from time to time within appropriate courses to accommodate additional knowledge in biochemistry, genetics, nutrition, and physiology. Major changes occurred in the study of pharmacology as new drugs were added. Knowledge about nutrition grew phenomenally. Changes in both areas influenced course content in the nursing curriculum as it adapted to advances in science and medicine.

### Nursing and Higher Education of Women

Historically, the education of men and women has been molded around their tasks and the roles they play in society. Sexton (1976) pointed out that in the case of women it was assumed that the tasks were so simple to perform that women required no special preparation for their adult roles. About the middle of the nineteenth century, this assumption gradually eroded. Brubacher and Rudy (1958) credited pioneering reformers like Mary Wallstonecraft with starting this change. Others, like Wish (1952), believed that higher education for women was an inevitable accompaniment of new vocational opportunities generated by urbanization and industrialization. Whether social phenomena or the efforts of reformers or a combination of both factors operated, higher education opened to women.

Florence Nightingale strongly favored opening higher education to women and supported the founding of women's colleges (Palmer, 1977). Nevertheless, she did not conceive of college as a place to

learn nursing. Palmer (1977) said that Nightingale's experiences convinced her that the hospital was the appropriate setting in which to learn nursing. As a consequence, it took until 1899 for a college course to be designed for, and offered to, nurses (Roberts, 1963). This was the year-long course in administration known as Hospital Economics presented to graduate nurses at Teachers College, Columbia University.

Florence Nightingale's opinion about where nursing education should occur was not shared by nursing leaders in the United States, who felt that nursing should be a profession, rather than a calling, and that its educational preparation should become less apprentice-like and more academic. Annie W. Goodrich, who became Dean of Nursing at Yale, was among those in the vanguard of this movement. Goodrich (1932) declared in an address delivered in 1912:

In almost every city we have our institutions of learning and our institution for the sick; the nurse has found her place in one but I am convinced that neither the nurse nor the institutions of learning will have rendered their full service to the community until she has found her place there, too. (p. 40)

Nutting (1926) worried that opening educational opportunities would lure the best and brightest young women away from nursing because "these students like what colleges offer, and will not have what training schools offer" (p. 25). Nevertheless, she championed a broad preparation for nurses and worked to see basic education for nurses firmly established in university schools (Christy, 1969). Nutting (1926) wrote:

For the ideal control of schools of nursing in the future we shall, I am confident, turn more and more to the University, just as other professional schools have done, seeking there the educational resources freely available--teachers, scientific laboratories, libraries, and other equipment. (p. 225)

Some universities had schools of nursing. Among them were Johns Hopkins and the University of Michigan. The school of nursing at Johns Hopkins opened in 1889 (Roberts, 1963). The school of nursing at the University of Michigan opened in 1891 (McCabe, 1930). These, however, were hospital schools of nursing conducted by university hospitals.

The first undergraduate curriculum in nursing organized as an integral part of an institution of higher education occurred at the University of Minnesota in 1909. Roberts (1963) reported that Richard Olding Beard, Professor of Physiology at the University of Minnesota, announced this project of the university's, remarking that a state university, especially, should be concerned with education for the major callings or occupations in life. Among these Beard listed teaching, medicine, and nursing.

In assessing the effect of opening higher education to young women, Kalisch and Kalisch (1986) concluded this movement had two opposite effects on nursing education. They felt that, on the one hand, it hastened the demise of hospital schools unable to meet the competition. On the other hand, it stimulated stronger schools to improve both their curricula and the living conditions of student nurses.

### The Nightingale Method of Education for Nursing

Although Goodnow (1939) wrote that "nursing is one of the oldest arts" (p. 24), no academic preparation had been required for practice. When, on July 9, 1860, the Nightingale Training School opened, the modern era of nursing began and a formal system of education for nursing practice was initiated (Seymer, 1960). It had fallen to Nightingale to devise, and supervise carrying out, an orderly plan for teaching nurses.

In this endeavor, Nightingale relentlessly adhered to three principles (Seymer, 1960). The first and most important was absolute autonomy for the nursing administrator, assuring her sole authority and responsibility for her departments. The second was her concern for an orderly teaching-learning process with a curriculum balanced between theory and practice. The last principle rested on Nightingale's conviction that her students have unsullied, unassailable characters.

Each of these principles was forged by her experiences. Had her authority and funding in the Crimea been dependent on the military, she would have had no influence on the welfare of the sick and wounded soldiers (Cohen, 1984). She wrote explicitly, "it is quite, quite, quite impossible (and it is not only my experience but that of all Christendom) for the discipline, the internal management, of Sisters and Nurses to be in any other hands but those of one female head" (Seymer, 1960, p. 32). Later, she clarified this as "one female trained head" (Seymer, 1960, p. 32).



Marked contrasts in the competencies of women who came to care for the sick in the Crimea proved to Nightingale the need for training nurses. Some, well-intentioned and inexperienced, soothed souls but left bodies dirty and neglected. Others, experienced in the care of the sick, were worth their "weight in gold" (Woodham-Smith, 1951, p. 122). Nightingale's insistence that her pupil nurses have unsullied reputations was a response to a widely held view that hospital nurses were typified by women like Sairy Gamp and Betsy Prig in Dickens's novel Martin Chuzzlewit (1901). It was an effort to maintain discipline and propriety that led to her banning all women other than herself from the hospital wards at Scutari during the night (Woodham-Smith, 1951).

An initial endowment of 44,000 pounds sterling from a grateful British public ensured the financial independence of the Nightingale School (Dolan, 1975). Thus, Nightingale could freely choose from several hospitals the one she felt best met the criteria for teaching nursing. St. Thomas's Hospital was chosen, and an agreement between the council of the Nightingale Fund and the Governors of St. Thomas's was drafted. The hospital would provide the facilities for clinical experience. The school would plan and carry out the curriculum, select and pay all the teachers, and provide uniforms and living and instructional space for the pupils (Seymer, 1960). The graduates were committed to serve at St. Thomas's or in another hospital or infirmary for two or three years after completing their one year's training (Seymer, 1960). The Nightingale Fund served as a kind of registry, placing graduates in

institutions. This was done as a means of elevating the standard of nursing and to keep the nurses from being exploited because what a trained nurse was to do was not yet well understood. Diplomas were not issued. Rather, a graduate who had completed the terms of her contract was recorded as being "certified" in the Nightingale Fund registry (Seymer, 1960).

Because of the newness of the venture and the need to survive its initial tests, applicants for admission were very carefully screened. From the many hundreds who applied, only 15 to 20 were selected annually (Grippando, 1977). None younger than 24 years of age were admitted. Each served a month's probationary period, after which she could leave or be dismissed (Seymer, 1960). Because of the poor public image nurses suffered, Nightingale's nurses were housed in a home with many amenities, where their behavior was carefully cultivated and disciplined. A "moral record," which included items like quietness, neatness, punctuality, and trustworthiness, was maintained on each pupil (Woodham-Smith, 1951).

Pupil nurses were taught on the ward by ward sisters and in lectures by consultants from the medical staff (Seymer, 1960). A syllabus and a course of assigned readings were used in teaching theory. Grippando (1977) identified the theoretical study as consisting of "twelve hours of Anatomy and Surgical Nursing, twelve hours of Physiology and Medical Nursing, twelve hours of Chemistry, Food and Sanitation and lectures on ethics and professionalism" (pp. 81-82). Case books and diaries were required as a means of

identifying and enhancing the learning from practical experiences on the wards. Seymer (1960) reported that Nightingale herself read many of these.

The Nightingale Fund Council antedated the school. It had begun in 1857 as a body whose function was to invest and safeguard the 44,000-pound endowment. The nine men who constituted the council had been nominated by Nightingale. She provided that, in writing, she could delegate "any or all" of her power to this group (Seymer, 1960, p. 9). By 1859 she had asked them to negotiate for a system of instruction of nurses at St. Thomas's Hospital. Later, this group maintained a registry of Nightingale graduates and functioned, as mentioned earlier, as a placement service. From time to time this committee offered advice and counsel, but it never governed the school. That role was assigned to its "one female head," Mrs. Wardroper, who regularly conferred with Nightingale about conducting and managing the affairs of the school and its nurses (Seymer, 1960).

In summary, the Nightingale system provided both practical and theoretical learning experiences in a systematic fashion. The Nightingale school freely chose among several hospitals for practical experience for its pupil nurses. Students lived in a nurses' home for their educational and moral good, as well as for discipline. The school was absolutely independent of any other institution, and its director had complete authority for nursing at St. Thomas's Hospital. Mrs. Wardroper reported only to the Board of Governors of St. Thomas's Hospital (Seymer, 1960).

### The Nightingale Model as Adapted in America

The Nightingale model was applied for the first time in the United States at Bellevue Training School for Nurses when it opened on May 1, 1873 (Hobson, 1916). The training school was organized because of the great need for better nursing care at Bellevue Hospital (Darche, 1949). A group of upper-class New York City women, organized as the State Charities Aid Association of New York, first identified this need. Many of the women in this group had nursed in the Civil War and were familiar with the needs of sick and wounded men (Austin, 1971). Possessing this knowledge and prodded by a sense of noblesse oblige, their goal was to improve conditions in public institutions.

A scheme for establishing a training school for nurses was prepared, and a fund of \$23,000 was quickly subscribed (Austin, 1971). The plan, which was based on guidelines proposed by Florence Nightingale, was only reluctantly accepted by the Medical Board at Bellevue. Next, a home for pupil nurses was provided, nurses were hired, and pupils recruited. Eventually, after a long search, a trained nurse to fulfill the role of superintendent was found. She was Sister Helen Bowden, a member of a Protestant order, All Saints Sisterhood. Hobson (1916) stated that, without her, the school could not have been started, so crucial were training and experience in hospital nursing for the role of training pupil nurses.

Nursing service on the wards used by the school was to be provided by the school. This was a departure from the Nightingale

plan (Austin, 1971). Woolsey (1950), one of the members of the Hospital Committee of the State Charities Aid Association, rationalized this divergence, writing, "The more homogeneous the total organization can be made, the more such a school can be identified with the hospital, the more smoothly and successfully it will work" (p. 115). Baer (1985) pointed out that having the superintendent report to the coterie of philanthropic women who comprised the Bellevue Training School Board of Managers was another departure. Nightingale advocated that the superintendent be directly responsible to the hospital board. Woolsey (1950) asserted that the superintendent was "the committee's appointee, and it is the committee's province to support and sustain her, as well as to keep her and her nurses with a steady hand up to the mark" (p. 123).

At the end of the program, which was two years long, pupil nurses graduated and received a diploma. Instruction, however, occurred only during the first year. Richards (1915) reported, "There was no class work and lectures were given only irregularly" (pp. 16-17). Pupil nurses were taught primarily practical skills of hygiene, sanitation, and diet. Kalisch and Kalisch (1986) wrote:

The nursing students were taught to prepare and apply bandages, make rollers, and line splints. They also learned how to cook and serve food for patients. Instructions in the best methods of securing fresh air and of warming and ventilating the sickroom were stressed. Exemplary deportment, patience, perseverance, and obedience were expected as a matter of course throughout the training program. (pp. 107-108)

The second school of nursing based on the Nightingale model, Connecticut Training School for Nurses, opened on October 6, 1873, at New Haven State Hospital (Kalisch & Kalisch, 1986). At this

training school, as at Bellevue Training School for Nurses, the superintendent was responsible to two sets of authorities. She answered to physicians and hospital authorities for patient care and to the officers of the training school for teaching the pupil nurses. However, the reception of the school at New Haven State Hospital, unlike the reception of its counterpart at Bellevue, was welcoming (Dolan, 1975). As at Bellevue, pupil nurses were taught direct personal care of patients and how to prepare special diets. By 1879 a manual, based on these topics and intended for pupil nurses and others, was published as "A Handbook of Nursing for Family and General Use" (Flanagan, 1976).

The third school, Boston Training School for Nurses, opened on November 1, 1873 (Curtis & Denny, 1902). After some initial resistance from physicians, an affiliation with Massachusetts General Hospital was arranged. As at the other two schools, the superintendent was responsible to the physicians and surgeons of the hospital in matters of patient care and to the directors of the school in the conduct of school affairs.

As for the curriculum, Sleeper (1948) wrote:

[The] curriculum was in essence the care of the patient. For teaching facilities, the wards furnished both classroom and laboratories. The plan of instruction was the care ordered for the patients on the wards of Massachusetts General Hospital. Untrained head nurses and self-trained superintendents of nurses comprised the teaching staff. (p. 678)

In reviewing the structure and function of these three schools fashioned after the Nightingale model, Dolan (1975), an American nursing historian, found there were few similarities with the

Nightingale school at St. Thomas's Hospital. On the other hand, she identified many differences. Among them were that control of the American programs was ambiguous and that nursing service demands superseded pupils' learning needs. Moreover, she pointed out that these programs lacked content and teaching strategies.

Seymer (1933), a British nurse historian, believed the two main reasons that the Nightingale system could not be transferred without change were the huge endowment that secured financial independence for the Nightingale school and the supremacy in the training school and hospital of the British "matron." In England the matron held sway over the nursing, dietary, and domestic staffs as well as the school of nursing. "She was answerable only to the hospital board" (Seymer, 1933, p. 217). This position was already well established and accepted when the Nightingale school opened at St. Thomas's Hospital. Nevertheless, because of the influence of Florence Nightingale, education for nurses by nurses had begun. In each of these first "Nightingale schools" in America, "nurses were in charge of the programs, the teaching (at least the bedside part of it), and the students" (Dolan, 1975, p. 992).

The integration of the school of nursing as a part of the hospital occurred first at Boston City Hospital in 1878. In the system devised there, nursing became a department of the hospital headed up by a matron who was also superintendent of the school of nursing. Thus, the department of nursing incorporated both the training school and nursing service. Richards (1915), the first

nurse to occupy this position, thought the system was a "means of providing better patient care" (p. 54). Clearly, the pupil nurses were expected to provide the care as the training school was viewed as a "benefit for patients and for the nurses" (Richards, 1915, p. 58). Thus, nursing service and nursing education were unified.

Riddle (1902) discussed this unified form of authority, pointing out that its major disadvantage was that the training school could be abolished at any time and nursing service could be provided in some other fashion. She also listed advantages. Among these was that the hospital administrator, as a man, would have "more immediate contact with men of affairs" and would be "constantly informed of the public pulse" (Riddle, 1902, p. 578). The system of unified control proved popular. By the turn of the century, the organizational system in which the training school was an integral unit of the hospital was overwhelmingly predominant (Dock, 1949). It was the type of school found in the Upper Peninsula.

By 1900 American nursing leaders were deeply concerned about the quality of nursing education. Hospital schools had mushroomed. The number of training schools had grown from 16 in 1880 to 132 in 1890. In the next ten years that number climbed to 549 (Oderkirk, 1985). Physicians needed and valued trained nurses. Starr (1982) wrote, "Physicians came not only to accept, but to rely on, trained nurses who proved essential in carrying out the more complex work that hospitals were taking on" (p. 155). Nursing care reduced mortality and, with advances in surgery, stimulated an increase in



the number of hospitals (Starr, 1982). In 1873 when the first training schools, fashioned after the Nightingale model, opened there were fewer than 200 hospitals in the United States. By 1910 the number had soared to over 4,000 (Melosh, 1982). Growth of training schools was stimulated in response, for they became the accepted means of providing inexpensive nursing care (Ashley, 1976). While this development vindicated the position of the early nursing reformers, it distressed American nursing leaders at the end of the nineteenth century. Concern over the uncontrolled growth of schools and lack of standardization in the educational process dominated their deliberations (Tomes, 1983).

It was thought that a majority of training schools "were void of standards, entrance requirements, and control of nursing" (Flanagan, 1976, p. 27). As a result, American nursing educators sought to quell the growth and establish standards. The outstanding early advocate in this movement was Isabel Hampton Robb.<sup>1</sup> Although others participated in this endeavor, Robb is generally credited as being its initiator (Christy, 1969).

In 1893, while she headed the school of nursing at Johns Hopkins, Isabel Hampton convened a meeting of nurse educators that resulted in the formation of the American Society of Superintendents of Training Schools for Nurses (Roberts, 1963). At that meeting she presented a series of proposals aimed at raising the standards of

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<sup>1</sup>Isabel Hampton Robb was born Isabel Adams Hampton. She married Hunter Robb in 1894. She published under both her maiden and married names.

education in nurse training. Hampton (1949) recommended increasing the length of training to three years and asserted that continuing instruction through the second year of the program was "absolutely necessary" (p. 7). During the third year she envisioned that pupil nurses might be given the opportunity to act as assistants of supervising nurses or teachers in order to be introduced to the skills and duties of such positions. She advocated increasing the science content of programs to incorporate advances in medicine and suggested that concepts of teaching be included because of the nurse's role as teacher. Hampton expected that candidates for entrance would have the equivalent of a high school diploma. This was clearly a discriminating entrance requirement at a time when only 32% of pupils in training schools and 2% of American women were high school graduates (Melosh, 1982). Last, Hampton proposed that the training school terms should conform to the academic year and that pupils' practical experience should not exceed eight hours per day; she urged "a uniform system of instruction, so that the requirements for graduation should be about the same in each [school]" (p. 8).

These proposals were translated into action with varying alacrity. Lengthening the programs to three years was quickly accepted. By 1900 three-year programs became dominant (Kalisch & Kalisch, 1986). The Committee on the Grading of Nursing Schools (1934) found that 90% of nursing schools during the late 1920s conducted a three-year program. Incorporating the biological

sciences into the curriculum was also fairly quickly adopted. McCabe (1930) reported that by 1911 the Michigan State Board of Registration of Nurses had developed curriculum standards that stipulated minimum requirements in the biological and medical sciences. High school graduation before entrance to the school of nursing was more slowly actualized. In Michigan, preliminary education of not less than two years of high school was required after 1921 (Deland, 1921). In 1929, throughout the nation, 73% of student nurses had finished high school (Committee on the Grading of Nursing Schools, 1934). That the clinical experience day should not exceed eight hours was more gradually accepted. The Committee on the Grading of Nursing Schools found that in the early 1930s, in 88% of the schools of nursing a week of day duty comprised more than 48 hours, while a week of night duty was typically 56 hours in length. Ashley (1976) believed the eight-hour day was slow to catch on because "hospitals considered student nurses [as] their nursing staff more than [as] their students" (p. 35). Efforts to raise standards of education in hospital schools of nursing encountered impediments that altered the pace of progress.

That the graduation requirements in all schools be fairly similar was a critical issue. It was reasoned that such uniformity could not be achieved without legal force. Therefore, the American Nurses' Association, known until 1911 as the Associated Alumnae of the United States and Canada, pushed for legislation to assure minimum standards of preparation for practice (Dolan et al., 1983). Nurses in Michigan were successful in having legislation enacted in

1909 (McCabe, 1930). Although Public Act 319 of 1909 was limited to defining Registered Nurse and concerned only the practice of Registered Nurses, it provided a means of controlling the education of those who wished to practice as Registered Nurse. Thus, it regulated the hospital schools of nursing in Michigan.

### The Studies

When the initial efforts proved insufficient to put nurses in control of nursing education, nurse educators sought to prove the need for change through a series of studies and reports. Eventually, these actions led to the development of a national professional accrediting body.

The first study of nursing and nursing education was proposed by Nutting in 1911 (Roberts, 1963). In 1918 the Rockefeller Foundation agreed to fund the study, which was directed by a committee of ten physicians, six nurse educators, and three public-spirited citizens. This committee was called the Committee for the Study of Nursing Education. Its report, however, has been called the Goldmark Report after its secretary, who, although not a member of the committee, wrote the report. The group studied 23 good-quality schools and reviewed the records of 2,406 students (Goldmark, 1923).

The Committee for the Study of Nursing Education (1923) found that:

The average hospital training school is not organized on such a basis as to conform to the standards accepted in other educational fields; that the instruction in such schools is

frequently casual and uncorrelated; that the educational needs and the health and strength of students are frequently sacrificed to practical hospital exigencies; that such shortcomings are primarily due to the lack of independent endowments for nursing education; that [most] existing educational facilities . . . are inadequate for the preparation of the high grade of nurses required for the care of serious illness, and for service in the fields of public health nursing and nursing education. (p. 27)

The Committee for the Study of Nursing Education (1923) recommended that schools of nursing should be governed by a training school board and be financially independent. Further, they pointed out that if routine tasks with no educational value were eliminated and if high school graduation were prerequisite for entry, the curriculum could be reduced to 28 months.

The committee recommended designing clinical experiences so they reflected the various nursing practice areas, standardizing the length of clinical practice in each area, and correlating clinical practice with classroom learning. They also recommended a four-month preliminary term of nonclinical studies. Of fundamental importance, the committee believed, was developing and strengthening university schools. The committee also emphasized that all superintendents, supervisors, instructors, and public health nurses should receive special additional education beyond the basic nursing course.

Another stratagem used by nurse educators was to design the Standard Curriculum for Nursing Schools. This guide was published in 1917 by the National League for Nursing Education, as the American Society of Superintendents of Training Schools for Nurses was by then known. It was hoped that it would help reduce "the wide

diversity of standards" present in nursing schools (Education Committee of the National League of Nursing Education, 1917, p. 5). Although the guide dealt primarily with curriculum, it offered suggestions for operating the school of nursing. Therefore, it recommended a training school committee to help secure funds for the school and to help the superintendent in overseeing admissions, managing the budget, and maintaining educational standards. It also advised hiring full-time instructors and recommended high school graduation as an entrance requirement for students. An eight-hour clinical work day for student nurses was championed, as was a curriculum balanced with theory and practice. That course content should include health maintenance and disease prevention as well as care of people during illness was among the ideas presented. Moreover, the authors advised that presentation of content to be learned should begin with simple constructions and move toward the more complex (Education Committee of the National League of Nursing Education, 1917).

In 1925 the American Nurses' Association spearheaded sponsorship of a project to study "ways and means for insuring an ample supply of nursing service, of whatever type and quality is needed for adequate care of the patient, at a price within his reach" (Committee on the Grading of Nursing Schools, 1934, p. 20). A committee representing a wide variety of organizations concerned with health care and directed by an educator and statistician conducted the study. The committee, known as the Committee on the

Grading of Schools of Nursing, produced its final report, Nursing Schools Today and Tomorrow, in 1934.

Their findings about schools of nursing showed that most schools were controlled by hospitals and that the schools were regarded as hospital departments. Generally, the schools were small. Half were connected with hospitals having 75 patients or less, and the typical school had only 43 patients (Committee on the Grading of Nursing Schools, 1934, p. 190). By 1932, 90% of students admitted were high school graduates, while 20% of the faculty had one year of college. A full-time nurse instructor was employed in 77% of the schools, and 25% had at least two full-time teachers (Committee on the Grading of Nursing Schools, 1934, p. 191).

Another finding was that 90% of the schools had a 36-month course, which began with a four-month preclinical period. The remaining 32 months in these programs were spent on the various hospital wards. However, "far less time [was spent] on communicable [disease] and psychiatric services than . . . [was] recommended by the National League of Nursing Education" (Committee on the Grading of Nursing Schools, 1934, p. 194). More than half the schools sent students to affiliating institutions for services not provided by the home school. It was found that the students' clinical work week typically exceeded 48 hours on day duty and 56 hours on night duty.

The recommendations of the committee started with suggesting that each school be controlled by an educational board, which would appoint the head of the school and, on her recommendation, all members of the faculty. The director, they believed, should be an

educator who was familiar with all the different fields of nursing. All faculty should be college graduates, and each should have specialized education in her field (Committee on the Grading of Nursing Schools, 1934, p. 147). The committee also recommended that "theoretical instruction should be increased and courses enlarged and enriched" (Committee on the Grading of Nursing Schools, 1934, p. 148). To accomplish the recommended changes, special endowments should be sought. These gifts as well as income from tuition, fees, and subsidies should be channeled into a budget for the school, separate from that of the hospital (Committee on the Grading of Nursing Schools, 1934).

At the end of World War II, a critical shortage of nurses existed, and many positions were filled by nurses not competent to function in those roles. Once again the nursing profession concluded that the fault lay in its system of education, i.e., that "something was not only drastically but chronically wrong" (Brown, 1948, p. 10). So, the National Nursing Council, a group that had representation from the American Hospital Association, the American Medical Association, and 12 major nursing organizations, obtained a grant from the Carnegie Foundation and appointed Esther Lucile Brown, a sociologist, to study nursing education. This study sought to learn "who should organize, administer, and finance professional schools of nursing" (Brown, 1948, p. 12). The plan of the study was to project the health service needs of the nation for the remainder of the twentieth century and then formulate questions of what



education would prepare nurses to meet those needs and how to supply enough nurses for the projected needs (Brown, 1948).

What Brown (1948) found was that, at the "vast majority" of the 1,250 state-accredited schools, education could not be said to be, by any "conceivable stretch of the imagination," professional (p. 348). She pointed out that while the Cadet Corps had functioned, nurse consultants of the United States Public Health Service had rated the 1,125 schools that had participated. Of these schools, 76 had been rated "very poor" and 256 had been rated "poor." Such schools, Brown felt, should be closed immediately. But, because state boards of nursing had all set standards low enough to allow the continued operation of such schools, Brown recommended:

that nursing make one of its first matters of important business the long overdue official examination of every school; that the lists of accredited schools be published and distributed as far as possible to every town and city of the United States as an avowed substitute (except legally) for the inadequate lists of schools accredited by state boards of nurse examiners; that an unequivocal statement be included in the published document to the effect that any school not named had failed to meet minimum requirements for accreditation or had refused to permit examination; that a nationwide educational campaign be conducted for the purpose of rallying broad public support for accredited schools, and for subjecting slow moving state boards and non-accredited schools to strong social pressure.

We recommend, further, that provision be made for periodic reexamination of all schools listed or others requesting it, as well as for first examination of new schools, and for publication and distribution of the revised lists.

Finally, we recommend that, if organized nursing commits itself to this undertaking of major social significance, the public assume responsibility for a substantial part of the financial burden. (p. 116)

Brown found that after students had completed the preclinical period, they spent, in a typical hospital school, 33 hours in clinical practice each week. This increased to between 41 and 48 hours per week in most schools during the second and third years. Therefore, Brown (1948) stated, "Many hundreds of hospitals still operate schools, as they have in the past, to avail themselves of the services of student nurses" (p. 51). She found an average of three full-time faculty per school. Only 23% of the faculty had bachelor's degrees in addition to their licenses as R.N. A mere 4% had higher degrees. Faculty, Brown recommended, should be qualified according to standards of the Association of Collegiate Schools of Nursing.

She asserted that "preparation of the professional nurse belongs squarely within the institution of higher learning" (Brown, 1948, p. 138). Brown favored a pattern of education similar to that of engineering with an undergraduate professional level and a technical level. She also recommended autonomy for the schools of nursing with status equal to that of other schools within a university. To support these schools, endowments should be solicited. Statewide planning was also urged to decide the number and location of nursing programs (Brown, 1948).

One such study had already been conducted in Michigan. In 1945 Bixler had conducted a survey of Nursing Resources and Needs in Michigan for the Michigan Council on Community Nursing. Her findings indicated that Michigan would need more and better prepared nurses. The greatest need existed in psychiatric nursing and,

especially, in nurse teachers and supervisors with a specialty in psychiatric nursing. She concluded that Michigan might be better served by fewer schools if enrollment increased in some of the schools attached to larger hospitals. To help increase enrollments, she suggested improving recruitment and retention procedures. She favored "centralization of instruction in basic programs as a substitute for small schools, with a pooling of nursing students for assignment to hospitals needing nursing services, properly staffed with clinical supervisors, coordinators and counselors" (Bixler, 1946, p. 67). Another of her recommendations was "concentration upon well integrated basic programs of study leading to the Bachelor's degree at the University of Michigan, at Wayne University and at other selected institutions of higher education" (p. 67).

The Bixler study was followed in 1954 by another survey of nursing needs and resources in Michigan, entitled For Better Nursing in Michigan. This study was prepared by the Executive Committee of the Michigan Study of Nursing Needs and Resources, a group of nurse educators and health care providers. The Committee recommended "gearing the nursing education system to the present and future demands for nursing service" (p. 16). Suggestions for implementing this recommendation were:

1. Basic degree programs in nursing should prepare graduates to practice in public health, in head nurse positions in hospitals, and in junior teaching positions in schools of nursing, and for supervision of assistants giving direct patient care. Enrollment in these programs should be increased rapidly.

2. The number of graduate nurses preparing for positions as public health nurses, as administrators of nursing services, and as teachers in schools of nursing (practical as well as registered nurse schools) should be increased promptly. The universities and the employers of nurses should explore and find the financial and other means needed to bring this about.
3. The diploma school curriculum should include instruction and practice in supervising nonprofessional workers giving nursing care.
4. The practical nurse schools should be enlarged substantially. (p. 16)

In Michigan, planning for the distribution and location of the various kinds of nursing schools that would best meet Michigan's needs was accomplished in 1966. The Executive Committee of the EACT section of the Michigan Nurses' Association developed a design and published it as "Action Plan for the Future of Nursing Education in Michigan" in the January-February 1966 issue of The Michigan Nurse. This plan proposed a baccalaureate program in the Upper Peninsula at Marquette.

Nationally, in response to Nursing for the Future, nursing organizations and representatives from allied professional groups formed a Committee on Implementing the Brown Report. In 1949, when this committee had been renamed the National Committee for the Improvement of Nursing Services, it sponsored the School Data Analysis. A questionnaire seeking information about practices of schools of nursing was distributed to all schools through the state boards of nursing. Although participation was voluntary, 97% of the nation's nursing schools responded. The data were analyzed, and schools were classified in relation to the other participating

schools. The categories were Group I, which included the upper 25% of all basic programs; Group II, which held the middle 50%; and Group III, which contained the bottom 25%. The list of schools categorized as Group I and Group II was published, according to category, in the American Journal of Nursing of November 1949 as "Interim Classification of Schools of Nursing Offering Basic Programs." The names of Group III schools did not appear in the list.

Fourteen Michigan schools of nursing were categorized as in Group I. Ten Michigan schools were located in Group II. One of these was St. Luke's Hospital School of Nursing at Marquette (National Committee for the Improvement of Nursing Services, 1949). St. Joseph's Hospital School of Nursing at Hancock was not listed. It had fallen into Group III.

A thorough analysis of the survey data was performed by West and Hawkins (1950) and published as Nursing Schools at the Mid-Century. Among the findings were:

About 25 percent of all schools met or approached standards set by the profession 12 years ago, in 1937. In many respects, half of the schools were nearer to the standards of 1927, while another quarter were still struggling to prepare nurses by these earlier standards. . . . In general, good educational practices flourished together. Those schools which ranked high in clinical facilities usually stood well in curriculum, library, faculty, and state board performance. . . . There were 1,193 state-accredited schools of nursing in the United States and its territories in February, 1949. Twenty years earlier there were some 2,200 nursing schools, of which 1,885 were state-accredited. . . . Total enrollments were at a peace-time high. In 1949, 87,700 student nurses were in training. Of these, 76,000 were enrolled in hospital schools and 11,700 in collegiate schools. A total of 7,700 were candidates both for a diploma in nursing and for a baccalaureate degree--6,700 of them were enrolled in collegiate schools. . . . One-fourth of

the general hospitals of the United States had schools of nursing of their own, or provided the clinical facilities for collegiate schools. (p. 1)

In 1951, Montag published her study on differentiation of nursing functions. She had classified the functions according to complexity as assisting, technical, and professional. Following Brown's (1948) lead, she proposed a parallel leveling of nursing education, suggesting that nurses prepared for technical functions be taught in community or junior colleges. Nurse technicians would be prepared to assist in planning nursing care, provide general nursing care with supervision, and assist in evaluating nursing care. In contrast, a professional nurse would identify and interpret complex nursing problems and would work with other professionals to plan and provide nursing care. Both classes of nurses, Montag believed, should hold the same license.

Bridgman (1953) published a work that complemented Montag's, in that Bridgman also argued for differentiation of function within nursing according to sophistication of the task. She felt that collegiate education was the minimum preparation for nurses who intended to accept "advanced responsibilities" (p. 84). She emphasized the point that baccalaureate nursing curricula should hold to the same standards as other college curricula. Moreover, she advocated a four-year course in which students were required to demonstrate understanding of content applied to nursing. She disapproved the practice, which some schools followed, of accepting, in entirety, the hospital school transcript and granting of a bachelor's degree in nursing after adding two years of study in

liberal arts and education courses. Her proposals increased the dichotomy between hospital schools and collegiate programs (Dolan et al., 1983).

In 1961 the Surgeon General of the United States Public Health Service assembled a consultant group on nursing to advise him "on nursing needs and to identify the appropriate role of the Federal Government in assuring adequate nursing services for our nation" (U.S. Public Health Service, 1963, p. xiii). The philosophy underlying this action was that government intervention offered hope of alleviating the nurse shortage. The consultants' report, formally titled Toward Quality in Nursing: Needs and Goals Report of the Surgeon General's Consultant Group on Nursing and informally known as the "Surgeon General's Report," was divided into two sections. The first section dealt with needs of nursing. The second section focused on means to improve the nursing situation. The committee felt that while nursing was confronted by increasingly complex and diverse tasks and problems, there were not sufficient opportunities for nurses to learn to cope with them. Another facet uncovered was that research in nursing practice was minimal. Moreover, the socioeconomic status of nursing made recruitment difficult. To help solve these problems, the consultants recommended federal funding to be used in loans and scholarships, building construction, experimentation with new forms of education, and studies to improve nursing education (U.S. Public Health Service, 1963).

The Nurse Training Act of 1964 grew out of this report (Kalisch & Kalisch, 1986). This act provided long-term, low-cost loans to students in nursing programs accredited by the National League for Nursing. It authorized almost \$288 million for the advancement of nursing education. Of that sum, \$41 million was authorized specifically to improve the quality of instruction in diploma programs (Kalisch & Kalisch, 1986).

There followed in 1965 the American Nurses' Association's "First Position on Education for Nursing." Commonly known as the ANA "Position Paper," it was prepared by the ANA Committee on Education and published in the December 1965 issue of the American Journal of Nursing, the association's magazine. The ANA Committee on education recognized the need for mastery of a complex body of knowledge and asserted that the association believed that:

The education for all those who are licensed to practice nursing should take place in institutions of higher education. . . . Minimum preparation for beginning professional nursing practice at the present time should be baccalaureate degree education in nursing. . . . Minimum preparation for beginning technical nursing practice at the present time should be associate degree education in nursing. . . . Education for assistants in the health service occupations should be short, intensive preservice programs in vocational education institutions rather than on-the-job training programs. (pp. 107-108)

This paper was approved by the ANA membership in 1966. State nurses' associations were urged to implement the goals in their areas. The Michigan Nurses' Association moved quickly with its plan for implementing the educational changes proposed in the ANA Position Paper. Their plan, entitled "Action Plan for the Future of Nursing Education in Michigan," showed a baccalaureate program at



Marquette and associate degree programs at Houghton, Ironwood, Escanaba, and Sault Ste. Marie (Executive Committee EACT Section of the Michigan Nurses' Association, 1966).

The National Commission for the Study of Nursing and Nursing Education was formed in 1967 in response to a recommendation in the Surgeon General's report that nursing education across the nation be studied. The National Commission's report, with recommendations, appeared in a book entitled An Abstract for Action (Lysaught, 1970). The timing of the study coincided with a period of emotional debate over the proposals of the ANA Position Paper (Lysaught, 1970). As a consequence, its proposals regarding moving nursing education into institutions of higher education have been criticized as equivocation (Miller, 1984). Recommendations of this commission, reported by Lysaught, were:

1. Each state have, or create a master planning committee that will take nursing education under its purview, such committees to include representatives of nursing, education, and other health professions, and the public, to recommend specific guidelines, means for implementation, and deadlines, to ensure that nursing education is positioned in the mainstream of American educational patterns with its preparatory programs located in collegiate institutions. (p. 107)
2. Those hospital schools that are strong and vital, endowed with a qualified faculty, suitable educational facilities, and motivated for excellence be encouraged to seek and obtain regional accreditation and degree granting power. (p. 109)
3. All other hospital schools of nursing move systematically and with dispatch (under the guidance of the state master planning committee), to effect inter-institutional arrangements with collegiate institutions so that:

- a. Graduates of the nursing preparatory program will receive an academic degree from the educational institution upon completion of their course of instruction;
- b. Joint planning takes place between the academic institution and the hospital on the articulation of instruction so that optimum use is made of clinical teaching facilities. (p. 109)

Dolan et al. (1983), using tables, suggested that these studies had an effect on nursing education. After a high point in the 1920s, schools of nursing entered a steady decline. Roberts (1963) identified the zenith as occurring in 1927, when there were 2,286 schools of nursing. She, likewise, showed a decline through 1950. Bayldon (1973), in an article commemorating the achievement of hospital schools, noted their decline and speculated on their future. In 1960 there had been 908 diploma schools (Kalisch & Kalisch, 1986). In 1982 only 282 remained (Kalisch & Kalisch, 1986). Schools of nursing based in institutions of higher education, on the other hand, increased from 229 in 1960 to 1,092 in 1980 (Dolan et al., 1983). They were in ascendancy.

It would seem, then, that coupled with advances in science and technology and changes in education, the numerous studies of nursing education may have affected the movement of nursing education from hospitals to institutions of higher education. That question, and others concerning the effect of the vagaries of politics and economics as well as the advances in education and science, will be examined in reference to each hospital school of nursing that existed in the Upper Peninsula of Michigan.

## CHAPTER III

### RESEARCH METHODS

#### Introduction

A challenge inherent in all historical research is the quest for data. Documents are misplaced and discarded. Informants move away and memories grow dim. Since most of the hospital schools in this study had been closed more than 50 years, a major concern was that much primary data had vanished. The likelihood that many alumnae or other informants familiar with the schools were available was, likewise, slim.

Nevertheless, state agencies had been involved with these schools. It was to be expected that the Michigan Board of Nursing, for instance, had records of these schools and their graduates. Hospitals, likewise, would have retained records of their alumnae. When even the hospitals no longer existed, it seemed possible that their records, including those of their alumnae, had been transferred to a central repository. It was also assumed that older nurses in the locality where the former hospital schools had operated could provide information about the schools or the alumnae. With those concerns and assumptions, the search for data was begun.

### Basic Search

The quest for data led the researcher along a convoluted path containing both surprising springs of information and disappointingly dry wells. The process extended over five years and was accomplished in bursts of activity interspersed with reflective periods. The primary technique was a combination of deduction and induction. Visits to the sites of the former schools aided in this process by divulging phenomena that might otherwise have eluded the researcher.

Data about the organizational pattern, students, faculty, and curriculum in the Upper Peninsula hospital schools of nursing were gathered, and the historical period in which these schools operated was studied. Accounts in Michigan histories such as the chapters on "Health and Social Welfare" and "The Healing Arts" written by Dunbar (1955) in Michigan Through the Centuries and found in Burr (1930) provided a base from which to begin. Polk's Directories of the turn of the century covering various localities in the Upper Peninsula and the 1902 publication, Polk's Medical Register of the United States and Canada, were also used. These directories confirmed the existence of Upper Peninsula hospitals, physicians, and, in some cases, nurses. Polk's Medical Register contained information on bed capacity, ownership, administration, location, and services of the hospitals.

Visits to the sites of the hospital schools and pictures of the hospitals at earlier periods helped familiarize the researcher with physical features of the schools. Local museums and exhibits where

artifacts could be viewed and handled added to the researcher's knowledge of the technology of the late nineteenth and early twentieth centuries. Local histories provided facts about events, industries, and institutions in the Upper Peninsula. Newspaper reports provided more detailed accounts, in a contemporary setting, about significant events. Histories, such as Morison's (1972) The Oxford History of the American People, Volume III, 1869-1963, placed these Upper Peninsula events in a national perspective. Sawyer's (1911) three-volume history of the Upper Peninsula provided an overview of events that occurred in the Upper Peninsula.

Data about the Upper Peninsula hospital schools of nursing were gathered to form a conceptualization of those schools. When this was accomplished and the historical context had been constructed, the research questions were applied to each school. Gathering the data on nursing education in the Upper Peninsula, however, required prolonged search. A questionnaire seeking information primarily about curriculum, but also asking about teachers, administrators, and student life, was devised and administered to 28 nurses who had graduated from five Upper Peninsula hospital schools of nursing. All were volunteers who attended nursing meetings and conferences, except for three who volunteered to respond during interviews. The earliest graduate among these nurses had finished school in 1921, and the last to finish had graduated in 1973, so a 52-year span of hospital school curricula was represented. The 13 participants who were alumnae of St. Joseph's Hospital School of Nursing in Hancock

had graduated in various years from 1927 through 1973. The graduates in this set contained at least one individual from each of the six decades in the span of years from 1920 to 1980. The first graduate of the 12 alumnae from St. Luke's Hospital School of Nursing had finished school in 1929, and the last had completed school in 1972. This set also contained at least one graduate from each of the decades from 1920 to 1980. One alumna from each of the three other Upper Peninsula schools participated. They were a 1921 graduate of Calumet & Hecla Hospital School of Nursing at Calumet, a 1924 graduate of Houghton County Training School for Nurses at Laurium, and a 1933 graduate of Chippewa County War Memorial Hospital Training School at Sault Ste. Marie. Groups were matched by decades in an effort to reduce the effect of change other than that produced by alteration in curricula.

In an effort to assess how Upper Peninsula hospital school graduates perceived the worth of their education in nursing, an opinion survey was mailed to 19 nurses known to the researcher. These nurses resided in various parts of the Upper Peninsula and had worked in a variety of health care settings. They represented four different hospital schools of nursing and had graduated during a period of time that extended over six decades.

Because most of the schools had been closed for over 50 years, it was anticipated that primary data would be scarce and difficult to locate. Thus, the search was pursued at both a local level and a regional-repository level, and much travel was involved. The State Archives of Michigan contain documents pertaining to state policies,

agencies, institutions, rules, regulations, and frequently, statewide private institutions. Hence, the staff at the Research Center at the State Archives of Michigan was approached, and annual reports to the Michigan Board of Nursing from two Upper Peninsula hospital schools were located at this repository. The reports from St. Luke's Hospital School of Nursing began in 1918 and concluded in 1959. Those from St. Joseph's Hospital School of Nursing began in 1931 and ended in 1959. These reports contained data on hospital patient census, teaching facilities, nursing personnel, faculty, students, curriculum, clinical experience, and information dealing with changes in the organizations or the acquisition of gifts or endowments during the reported year.

Minutes, starting in 1919, of the Michigan Board of Nursing were likewise located at the State Archives of Michigan. In these records were items concerned with the operation of schools of nursing throughout the state. During their meetings from November 5, 1919, through the meeting on September 19, 1934, each of the eight existing Upper Peninsula hospital schools was mentioned. The school of nursing at St. George's Hospital in Iron Mountain was not mentioned because it had closed before 1919. Also obtained from files of the State Archives of Michigan were brief histories of St. Joseph's Hospital School of Nursing and St. Luke's Hospital School of Nursing, which were written for the fiftieth anniversary of the Michigan State Nurses' Association. One of the most useful sources of data found at the State Archives of Michigan was McCabe's (1930)

manuscript entitled Nursing in Michigan, a History. Although this was not a primary source, it was an extremely valuable secondary source.

The Michigan Board of Nursing was visited. There the record of all nurses who had been licensed as Registered Nurse in Michigan was reviewed. Volumes I and II of the Record of Registered Nurses proved particularly helpful as they contained licensing data for almost the entire first half of this century. Usually, these data included the candidate's name, date of examination, subjects examined, examination scores, license number or report of failure at attempt to be licensed, the year of graduation, and the school from which the candidate had graduated. Two conditions occurred in which examination scores were not recorded. One exceptional condition occurred in cases of nurses who had been licensed under the waiver provided in Public Act 319 of 1909. The other exception occurred with nurses who had been licensed by examination in other states before applying for licensure in Michigan. Even in those situations, the school attended and year of graduation were faithfully recorded. This authoritative source revealed that nine Upper Peninsula hospital schools of nursing had prepared graduates for licensure as Registered Nurse. They were Lake Superior School for Nurses at Lake Linden; St. Luke's Hospital Training School for Nurses at Marquette, later known as St. Luke's Hospital School of Nursing and St. Luke's School of Nursing; St. George's Hospital Training School for Nurses at Iron Mountain; Sault Ste. Marie Hospital Training School, which was reorganized in 1923 as Chippewa



County War Memorial Hospital Training School, at Sault Ste. Marie; Newberry State Hospital Training School for Nurses at Newberry, which until 1911 was known as Training School for Nurses at Upper Peninsula Hospital for the Insane; Houghton County Training School for Nurses at Laurium; Calumet & Hecla Hospital Training School for Nurses at Calumet; St. Joseph Hospital Training School for Nurses at Menominee; and St. Joseph's Hospital School of Nursing at Hancock.

The Michigan State Nurses' Association Membership Register 1916-1928, found at the State Archives of Michigan, confirmed the existence of these nine schools. Because of its origin as an association of various alumnae groups, when members of the Michigan Nurses' Association met, the custom of indicating the school from which a member had graduated was followed in signing the roll. Therefore, schools of nursing located in the Upper Peninsula could be enumerated and tallied. The tally accounted for the same nine schools that had been identified in the records of the Michigan Board of Nursing. The schools are listed in Table 1, and their locations are illustrated on the map in Figure 2.

Further substantiation for the existence of three schools, which had been situated in Houghton County, occurred in a letter written by a consultant to the Michigan Board of Nursing. This letter, found in the historical file at the Medical Library of Portage View Hospital in Hancock, was written by Bertha Pullen in December 1962 in response to a student nurse's inquiry. It told of the Calumet & Hecla Hospital Training School, the Houghton County

Table 1.--Hospital schools of nursing in the Upper Peninsula, with location and period of operation.

School	Location	Period of Operation
Lake Superior School for Nurses	Lake Superior General Hospital, Lake Linden, Houghton County	1897-1919
St. Luke's Hospital Training School for Nurses/St. Luke's Hospital School of Nursing/St. Luke's School of Nursing	St. Luke's Hospital/Marquette General Hospital, Marquette, Marquette County	1899-1977
St. George's Hospital Training School for Nurses	St. George's Hospital, Iron Mountain, Dickinson County	1901-1903
Sault Ste. Marie Hospital Training School for Nurses reorganized as Chippewa County War Memorial Hospital Training School for Nurses	Sault Ste. Marie Hospital and Chippewa County War Memorial Hospital, Sault Ste. Marie, Chippewa County	1903-1933
Upper Peninsula Hospital for the Insane/Newberry State Hospital Training School for Nurses	Upper Peninsula Hospital for the Insane/Newberry State Hospital, Newberry, Luce County	1908-1925
Houghton County Training School for Nurses	Calumet Public Hospital, Laurium, Houghton County	1908-1932
Calumet & Hecla Hospital Training School for Nurses	Calumet & Hecla Hospital, Calumet, Houghton County	?1913-1921
St. Joseph Hospital Training School for Nurses	St. Joseph Hospital, Menominee, Menominee County	1918-1924
St. Joseph's Hospital School of Nursing	St. Joseph's Hospital, Hancock, Houghton County	1920-1974

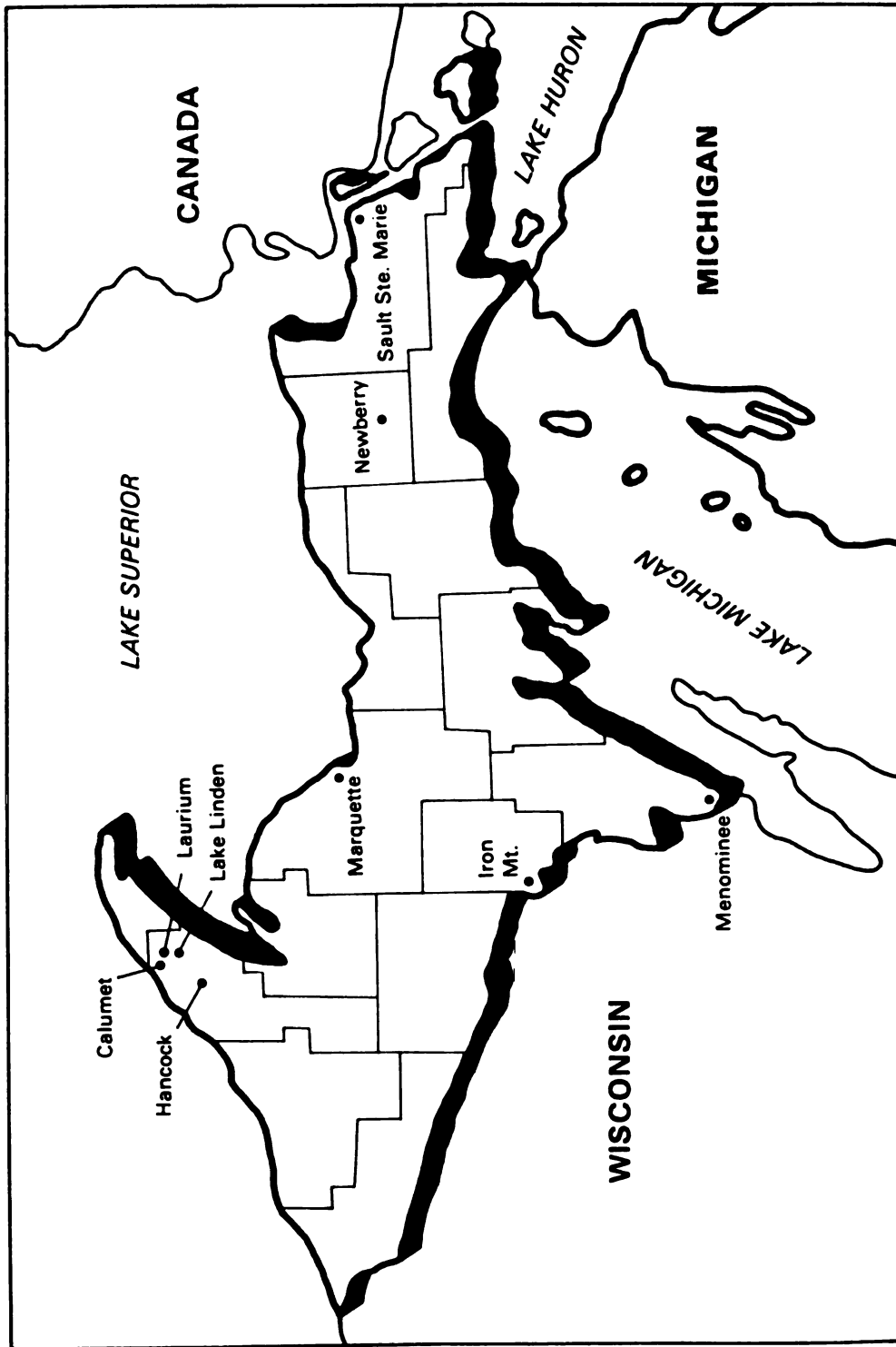


Figure 2.--Locations of hospital schools of nursing in the Upper Peninsula of Michigan.

Training School for Nurses, and the Lake Superior Training School for Nurses. The letter, which contained information reportedly copied from the files of the Michigan Board of Nursing, may be seen in Appendix A. It dealt with curriculum, textbooks, teachers, patient census, and bed capacity, and reported that the hospitals had been incorporated.

Copies of the corporate articles of two of the schools for nurses and of six hospitals that operated schools of nursing in the Upper Peninsula were subsequently obtained, either by requesting them from the clerks of the counties in which the institutions were located or by securing them from the Corporation and Securities Bureau of the Michigan Department of Commerce. The corporate articles of Calumet & Hecla Hospital, drawn up in 1913, specifically mentioned maintaining a training school for nurses in conjunction with the hospital. The school in Lake Linden was incorporated as Lake Superior Training School for Nurses. The hospital was not incorporated. Likewise, Houghton County Training School for Nurses was independently incorporated. No record of incorporation was found for Newberry State Hospital despite a search by the Corporation and Securities Bureau.

Inquiries, asking if information about their former schools of nursing was available and whether such information could be reviewed by the researcher, were made to authorities at six Upper Peninsula hospitals. Authorities at Calumet Public Hospital in Laurium, where Houghton County Training School for Nurses had been sponsored, and at Chippewa County War Memorial Hospital in Sault Ste. Marie, where

Sault Ste. Marie Hospital Training School for Nurses and its successor, Chippewa County War Memorial Hospital Training School for Nurses, had operated, responded affirmatively and invited the researcher to come to review the records. Similar responses were received from authorities at Marquette General Hospital and Portage View Hospital in Hancock. Both hospitals were successors of hospitals that had operated schools of nursing. Portage View Hospital had succeeded St. Joseph's Hospital, which had operated St. Joseph's Hospital School of Nursing. Marquette General Hospital was the successor of St. Luke's Hospital, which had operated St. Luke's Hospital Training School for Nurses. Authorities at Newberry State Hospital responded that a fire had destroyed many old records including, regrettably, those of the school of nursing. Authorities at St. Joseph-Lloyd Hospital in Menominee, which succeeded St. Joseph Hospital, responded that no records of the former school of nursing existed there. The researcher was told that all earlier records had been transferred to the mother house of the Third Order of St. Francis, the religious group that had operated the hospital when the school of nursing had existed. Authorities at the mother house, however, indicated that they had no information about the school.

#### Search Related to Specific Schools

##### Lake Superior School for Nurses

Although the researcher had from childhood known of the existence of Lake Superior School for Nurses, the search for data on

this, the earliest of the hospital schools of nursing in the Upper Peninsula, was very challenging. Reading a booklet, The History of Lake Linden Michigan, written by Monette (1975) guided the researcher to issues of The Daily Mining Gazette, a Houghton newspaper, published since 1859. These old issues were preserved in specially treated boxes at the office of The Daily Mining Gazette at Houghton. There the researcher was privileged to read and hand copy the accounts of the graduation of the first class of pupil nurses at Lake Superior School for Nurses. The Lake Linden newspaper, the Native Copper Times of November 14, 1899, which was available on microfilm at the Michigan Technological University library, was photocopied and read. The report of the graduation in this issue of the Native Copper Times substantiated the account in The Daily Mining Gazette. The corporate articles for Lake Superior School for Nurses filed July 10, 1902, were located at the Houghton County Clerk's Office and were hand copied.

The researcher inquired among older nurses in Houghton County seeking a graduate of this school at Lake Linden and was referred to a member of one of the last graduating classes. Unfortunately, this nurse was too infirm and frail to be interviewed. However, the letter written in December 1962 by the consultant to the Michigan Board of Nursing, which may be seen, in facsimile, in Appendix A, told of the curriculum, textbooks used, and scheduled clinical practice as well as entrance requirements, bed capacity, and length of the program of study. Some incidental facets of the life of a

pupil nurse at this school during the years 1911 to 1914 were provided by a journal kept by the researcher's mother. These included notes on a variety of nursing procedures that were taught. This journal, a picture or two, the diploma received by the researcher's mother, and her license are all pieces of data that were used to fill in parts of the framework provided by the other data.

Some information about the accomplishments of the matron of this first hospital school of nursing was provided in an article published in The Daily Mining Gazette on April 22, 1917, at the time she resigned. The school of nursing from which she had graduated, however, was not mentioned in that article. Because the researcher remembered that Mrs. Peiffer, the matron, had been buried in Lake Linden, gravestones in the cemetery of that community were read, her grave was located, and the year of her death was established. Next, the Houghton County Clerk's Office was visited, and the date of her death was learned from her death certificate. Last, her obituary in The Daily Mining Gazette ("Mrs. P. L. Peiffer," February 7, 1940) revealed that she, one of the first nurse educators in the Upper Peninsula, had graduated from Saginaw Women's Hospital Training School for Nurses in 1897.

St. Luke's Hospital Training School for  
Nurses/St. Luke's Hospital School of  
Nursing/St. Luke's School of Nursing

The gathering of information about the second oldest, and the last operating, Upper Peninsula hospital school of nursing began at

the Research Center of the State Archives of Michigan, where older annual reports from St. Luke's Hospital Training School for Nurses to the Michigan Board of Nursing were stored. The earliest of these annual reports dealt with events of 1918, and the last in the series reported the achievements of 1959. Eighteen of the reports were selected and photocopied because they concerned years when curriculum change occurred or because activities of the World War II era were mentioned. Minutes of the Michigan Board of Nursing, which were also found at the State Archives of Michigan, told of a variety of successes and problems encountered in the operation of the school of nursing at St. Luke's Hospital. Notes were written about events and phenomena chronicled in these minutes, which began on January 5, 1920, and concluded in 1933.

Annual reports of St. Luke's Hospital beginning in 1915 and concluding with 1940, but excluding the years 1929 and 1930, were found at the Marquette County Historical Museum. Those sections of the reports that dealt with the school of nursing or the alumnae were photocopied. Information in the questionnaires returned by the 12 alumnae of this school supplemented the data in the reports to the Michigan Board of Nursing and in the annual reports of the hospital. This accumulation of data was augmented by locating school bulletins from 1957 through 1974 in the alumnae files at Marquette General Hospital. These bulletins and a copy of an early application form were photocopied at the hospital. A facsimile of this application form may be seen in Appendix D. A program for the last graduation, that held on May 21, 1977, was also located in the



alumnae files. "Articles of Incorporation of St. Luke's Hospital in Marquette, Michigan," filed on October 2, 1897, were located and photocopied at the Marquette County Clerk's office. They did not mention the school of nursing, but they attested to the charitable purpose of the hospital.

Among the secondary sources used was the history of the school submitted by the director, Anne M. Brogan, in 1954 for the fiftieth anniversary of the Michigan State Nurses' Association. This summary, containing many details of the operation of the school and hospital, was located at the Research Center of the State Archives of Michigan. In addition, a variety of newspaper clippings, scholarly papers, and old city and county directories, located at the Marquette County Historical Museum, proved to be useful sources. Files of living graduates, maintained at Marquette General Hospital, the institution that succeeded St. Luke's Hospital, were neither needed nor used.

#### St. George's Hospital School for Nurses

While reviewing the Record of Registered Nurses at the Michigan Board of Nursing, the researcher first learned of St. George's Hospital School for Nurses in Iron Mountain. McCabe's (1930) manuscript, Nursing in Michigan, a History, listed this school as one of the schools approved by the Michigan Board of Nursing in 1910. However, nothing more was said of the school. A visit on July 13, 1984, with Bill Cummings, the curator of the Menominee

Range Historical Museum in Iron Mountain, provided more information. Cummings showed pictures of St. George's Hospital, cited newspaper stories, and pointed out a passage in Born From Iron, a 1978 publication of the Iron Mountain Centennial Committee, which reported that nursing had been taught to two pupil nurses at St. George's Hospital from 1901 to 1903. Thus, the researcher learned that the school at St. George's Hospital was the smallest of the Upper Peninsula hospital schools of nursing. The curator of the museum also directed the researcher to the public library in Iron Mountain. There an account from the February 3, 1910, Iron Mountain Press, the forerunner of the present newspaper, The Iron Mountain News, was located and photographed. This account, on microfilm, told of public health work performed by the nurses of St. George's Hospital. News stories from The Iron Mountain News were also photographed from microfilm. One was the obituary of Miss Beer, the matron and superintendent of St. George's Hospital, published in the March 10, 1926, issue of The Iron Mountain News. This account told of Miss Beer's education and nursing career. Likewise, the obituaries of Dr. Crowell, the proprietor of St. George's Hospital, and Anne Murphy, one of the two graduates of the training school for nurses at St. George's Hospital, were photographed from microfilm of the old issues of The Iron Mountain News. The researcher was unable to learn anything about the second graduate of the school, and no records of the school could be found. At the office of the Dickinson County Clerk, the researcher was informed that corporate articles of that era were no longer maintained locally but were

stored at the Corporation and Securities Bureau of the Michigan Department of Commerce. These documents were subsequently located at that state bureau.

Sault Ste. Marie Hospital Training  
School for Nurses/Chippewa County  
War Memorial Hospital Training  
School for Nurses

At Chippewa County War Memorial Hospital in Sault Ste. Marie, the researcher was invited to review the records of Sault Ste. Marie Hospital Training School for Nurses and its successor, Chippewa County War Memorial Hospital Training School for Nurses, in the office of the Director of Nursing, where the records were stored. The records for Sault Ste. Marie Training School for Nurses and Chippewa County War Memorial Training School contained a register of all students who had entered; an account of each student nurse's clinical experience, including vacations, affiliations at other institutions, and sick days; a summary, similar to a transcript, of the courses studied; admission data; detailed records of the performance and health of each student nurse; teachers' class books covering the period from 1919 to 1933, when the school closed; and copies of the annual reports to the Michigan Board of Registration of Nurses and Trained Attendants for 1922, 1925, and 1930. In addition, a carbon copy of a letter from Mary C. Wheeler, the General Secretary of the Michigan Board of Registration of Nurses and Trained Attendants, was found. This communication, dated March 17, 1928, contained a list of 78 nurses who had graduated from

1905 through 1927 and asked if the year of graduation shown for each of the graduates was correct.

The records were carefully reviewed. Each student's file was examined to determine whether or not the student had completed her schooling, and a tally of those who had graduated was kept. The teachers' class books were photocopied, as were students' clinical experience schedules for 1909 and 1910. Likewise, the reports to the Michigan Board of Registration of Nurses and Trained Attendants for 1925 and 1930 were photocopied, as was the carbon copy of the letter from Mary C. Wheeler to Anna B. Northup, a facsimile of which may be found in Appendix B. The clinical experience schedules for 1911 and 192 were hand copied. The summary records of eight students who were in school during the period from 1917 to 1923 and the complete record of one student who graduated in 1928 were photocopied to provide examples of the entrance requirements and curriculum standards of the time. The 1922 Annual Report to the Michigan Board of Registration of Nurses and Trained Attendants was hand copied, as was the list of the first 53 candidates admitted to Sault Ste. Marie Hospital Training School for Nurses. This encompassed the period from October 12, 1903, to October 22, 1914. All reviewing and copying were performed with the knowledge and assistance of the hospital authorities. Only records of students and graduates who were known to have died were chosen for copying.

Anne Wallis Rye, a graduate of the class of 1933, the last class, was interviewed at her home in Sault Ste. Marie on August 2, 1984. During the interview she told of her experiences as a student

nurse and reported that the reason given the graduates for closure of the school was that there were too many nurses and too little work. She displayed her pin, diploma, and certificate of registration and permitted the two documents to be photocopied.

Upper Peninsula Hospital for the  
Insane/Newberry State Hospital  
Training School for Nurses

Authorities at Newberry State Hospital were contacted by letter in the search for information about the hospital school of nursing. The acting director of nursing, Rosann Brown, responded, in a letter written on November 7, 1983, that records regarding the training school could not be found--that it was thought they had been destroyed in a fire. Moreover, she reported that there were no living graduates. She enclosed six pages photocopied from a 50-year celebration booklet that had been written in 1946. She assured the researcher that the information was accurate. She also referred the researcher to the daughter of a graduate of the school at Newberry State Hospital. Despite several efforts, however, the researcher was unable to contact the woman mentioned in this letter.

The section on "Nurses Training" in the celebration booklet reported that the school was organized at the Upper Peninsula Hospital for the Insane in the "summer of 1908" and that affiliations with hospitals at Sault Ste. Marie, Ontario, and Sault Ste. Marie, Michigan, and later at Cook County Hospital in Chicago, the University Hospital at Ann Arbor, and Children's Hospital at Detroit had been arranged (Newberry State Hospital, 1946).

Examination of the clinical experience records of students at Sault Ste. Marie Training School for Nurses showed that, starting in 1910, two or three pupil nurses from the school for nurses at the Upper Peninsula Hospital for the Insane were scheduled for three months of clinical nursing experience at Sault Ste. Marie. This practice continued until 1913, when four to five pupil nurses per year from Newberry State Hospital affiliated with Illinois Training School for Nurses for experience at Cook County Hospital.

An examination of the records of 23 student nurses from Newberry State Hospital Training School for Nurses who had affiliated with Illinois Training School for Nurses was conducted at the Special Collections Department of the Library of the University of Illinois at Chicago. This examination showed that during the three years from 1913 to 1916, four to five students each year were sent from Newberry to Chicago for six months of experience on the wards of Cook County Hospital. The experience was interrupted in 1916, and when it was resumed in 1918, the affiliation had been lengthened to nine months. No student records existed for the period after June 1920. No records were available from the University of Michigan, and an inquiry mailed to the Director of Nursing Education at Children's Hospital of Michigan produced a response from the Manager of Nursing Education, saying that records of affiliating students from that era had been destroyed and were no longer available.

Microfilms of the Newberry News, the weekly newspaper of Newberry, covering the 18-year period of 1908 through 1925 were secured from the Michigan State Library. These were scanned for reports of events at Newberry State Hospital Training School for Nurses. When such stories were encountered, names in the reports were compared with the names of affiliating students in the records of Illinois Training School for Nurses and with the names appearing on the clinical experience schedules at Sault Ste. Marie Hospital Training School for Nurses. That process clarified how students progressed through the curriculum at Newberry State Hospital Training School or the training school for nurses at the Upper Peninsula Hospital for the Insane, as the hospital was first named. Two other secondary sources were used. They were The History of Luce County: "Past Years," compiled by Minnie Ida Mattson in 1980, and the July 29, 1971, issue of a hospital publication called New Outlook. This issue contained a story about the early years of the state hospital. The account was illustrated by many pictures, some of which contained student nurses.

#### Houghton County Training School for Nurses

The records of Houghton County Training School for Nurses were reviewed at the Medical Library of Calumet Public Hospital in Laurium. It was this hospital that had operated Houghton County Training School for Nurses. The material housed in the Medical Library of Calumet Public Hospital contained the Training School Record beginning with the first student, who was admitted on

February 22, 1908, and concluded with the discontinuance of the training school in 1932. Students' records were intact and covered that 24-year period. The files also contained correspondence with the Michigan Board of Nursing, which began in 1917, when that body was known as the Michigan State Board of Registration of Nurses, and continued until June 6, 1932, when the board was called Michigan Board of Registration of Nurses and Trained Attendants. A copy of a report to the Michigan Board of Registration of Nurses and Trained Attendants for 1932 was one of the documents found. Among the other materials preserved was the light-hearted history, will, and prophesy of the class of 1932. This amusing account provided some insight into the lives and hopes of those student nurses.

Each record was carefully read. A list of all students who had graduated was hand copied as only 76 entries were involved. Correspondence with the Board of Nursing was photocopied, as was one student's training school record, the 1930 report to the Michigan Board of Registration of Nurses and Trained Attendants, the class will, and the certificate attesting to the filing of the corporate articles of the training school for nurses. All copying and reviewing were performed with the consent of the hospital administrator.

An interview on August 11, 1984, with Manila Noetzel Gipp, the last director of this school, provided much supplementary detail. She was able to tell about the arrangements made so students who were in school at the time the school closed could complete their



schooling elsewhere. Secondary sources, such as accounts about the school in the local papers, added to the store of data about this school.

#### Calumet & Hecla Hospital Training School for Nurses

The process of uncovering facts about Calumet & Hecla Hospital Training School for Nurses was fairly similar. The researcher knew, from overhearing in her youth, that there had been a school of nursing at Calumet & Hecla Hospital. McCabe (1930), in her manuscript, Nursing in Michigan, a History, listed it as one of the schools on the approved list of the Michigan Board of Nursing in 1913. The December 1962 letter of the consultant to the Michigan Board of Nursing, found at Portage View Hospital, contained information about the curriculum and textbooks used. It also told of the affiliation for clinical experience at Cook County Hospital arranged through Illinois Training School for Nurses.

The researcher inquired of several older nurses living in the Calumet area if they remembered anything about the school of nursing at Calumet & Hecla Hospital or if they knew of a graduate living in the area. Eventually, the researcher was referred to Alice Stillman O'Neil, a 1921 graduate of the school. On August 11, 1984, the researcher interviewed Mrs. O'Neil, who told of her experiences as a student nurse, showed her school pin, and displayed her certificate of affiliation at Illinois Training School for Nurses. Mrs. O'Neil permitted the researcher to photograph some of these materials.

The records of 39 pupil nurses from Calumet & Hecla Hospital Training School for Nurses who affiliated with Illinois Training School from 1914 to 1921 were reviewed at the Special Collections Department of the Library of the University of Illinois at Chicago. The corporate articles of the Calumet & Hecla Hospital were read and hand copied at the Houghton County Clerk's Office. All three elements, i.e., the interview, the records at the University of Illinois at Chicago, and the corporate articles, substantiated the data reported in Bertha Pullen's letter of December 20, 1962.

A search of the Special Collections Department of the Library of Michigan Technological University produced a copy of 1921 Calumet and Hecla Mining Company Report for the Year Ending December 31, 1921, in which it was written that "all operations [of the company] were suspended on April 1st and remained suspended during the balance of the Year" (Calumet and Hecla Mining Company, 1922, p. 9). This statement corroborated both the statement in the December 20, 1962, letter written by Bertha Pullen and the notation of May 24, 1921, in the minutes of the Michigan Board of Nursing that the training school for nurses at Calumet & Hecla Hospital closed in 1921. The year of its opening, however, remained obscure. Despite a fairly extensive search in reports of the mining company, study of the Record of Registered Nurses Volumes I and II maintained by the Michigan Board of Nursing, and inquiry to Universal Oil Products, the corporation that absorbed Calumet & Hecla Mining Company, no opening date could be determined. Records of the school, beyond those found in the Special Collections Department of the Library of

the University of Illinois at Chicago, seemed to have been lost. The Assistant Secretary at Universal Oil Products, Pamela J. Cissik, reported in a letter dated March 20, 1984, and contained in Appendix E that "we were unable to locate any information on the School of Nursing at Calumet & Hecla Hospital" (P. J. Cissik, personal communication, March 20, 1984).

St. Joseph Hospital Training School  
for Nurses (Menominee)

The researcher was told by authorities at St. Joseph-Lloyd Hospital in Menominee that all records for the period when the Sisters of the Third Order of St. Francis had operated the hospital had been transferred to the order's mother house at Peoria, Illinois. Subsequently, a letter inquiring about the records of this school was sent to the Archival Librarian of the Hospital Sisters of the Third Order of St. Francis. A reply from the Secretary General of that order stated that no information, beyond what the researcher already possessed from her reading of the minutes of the Michigan Board of Nursing, was available. However, this official sent a copy of a page from a privately published history of the order. In this, a work by Sister M. Thaddea Goedde entitled The Charity of Christ Urges Us, was written, "In 1918 a nursing school was established. . . . The first class graduated . . . [in 1921], but no other class was admitted and the school was closed" (Goedde, n.d., p. 113). That information conflicted with data from the minutes of the Michigan Board of Nursing and with an

account in the local newspaper, The Menominee Herald-Leader. Minutes of the January 11, 1921, meeting of the Michigan Board of Nursing stated, "St. Joseph Hospital, Menominee, was recommended for accreditation from September 1st, 1919 by a motion made by Mrs. Foy and seconded by Dr. Olin. Carried" (Moore, 1921, p. 17). The Menominee Herald-Leader of September 6, 1921, in a story entitled "New Fall Term at Local Nurses' School Is Open," reported that, with the enrollment of three new students, total enrollment in the school of nursing was 21. Moreover, it was April 15, 1924, more than two years later, that the minutes of the Michigan Board of Registration of Nurses and Trained Attendants noted that "the letter from Sister Rufina, St. Joseph Hospital, Menominee, stating that they are discontinuing the training school be acknowledged and their action approved" (Moore, 1924, p. 57).

Primary sources of data for St. Joseph Hospital School of Nursing at Menominee were scarce. However, corporate articles for the hospital were found at the Menominee County Clerk's Office. These were hand copied. Other primary sources included the Record of Registered Nurses Volume II and notations in the Minutes of the Michigan Board of Nursing for October 4, 1921; January 11, 1921; and April 14, 1924.

#### St. Joseph's Hospital School of Nursing (Hancock)

The search for information about the last school of nursing to open, St. Joseph's Hospital School of Nursing at Hancock, began with a review of the annual reports to the Michigan Board of Registration

of Nurses and Trained Attendants, which were stored at the State Archives of Michigan. These reports started with the report for 1931 and concluded with the report for 1959. From these reports 14 were selected and photocopied because they discussed curriculum change or mentioned activities of the years of World War II. Notations sprinkled in the minutes of the Michigan State Board of Registration of Nurses and the Michigan Board of Registration of Nurses and Trained Attendants from 1919 through 1933 told of the struggles and achievements of operating the school during its first 13 years. These sources were supplemented by records of interviews with 12 women who had graduated from St. Joseph's Hospital School of Nursing. (See Appendix C for interview form.) Other primary sources studied included school bulletins for 1963, 1969-1971, and 1971-1973, which were found in files at the Medical Library of Portage View Hospital, the hospital that succeeded St. Joseph's Hospital. Other items found in the files at the medical library included a student handbook for 1963, a copy of the program for the last graduation entitled "Final Commencement," and a press release dated March 28, 1972, which announced that the hospital was being reorganized under joint community and religious management. Corporate articles for St. Joseph's Hospital of Hancock were located at the Houghton County Clerk's Office. Interviews with graduates and former teachers were also helpful. The alumnae files, stored at the Medical Library of Portage View Hospital, contained a complete file of graduates.

Several secondary sources were consulted in gathering data about St. Joseph's Hospital School of Nursing. Among these was the history of the school, prepared by the director, Sister Rose Helene, in 1954 for the fiftieth anniversary of the Michigan State Nurses' Association. This account, found and photocopied at the Research Center at the State Archives of Michigan, contained three single-spaced, typewritten pages of information about the school. In addition, two newspaper articles and a local history, written by Monette (1982) and entitled Hancock, Michigan Remembered Volume I, were used. The earlier of the two newspaper articles, entitled "Fifty Years of Progress," gave an account of the school from its inception. This was published in The Daily Mining Gazette of Houghton on June 23, 1970. The second news story appeared in The Upper Peninsula Catholic, the Marquette diocesan newspaper, on May 17, 1974. It told of the closing of the school. Savage's (1923) work The Congregation of St. Joseph of Carondelet was also consulted in providing background for the development of the school.

### Summary

A variety of information from several sources was used to piece together the stories of the nine hospital schools of nursing in the Upper Peninsula. The chief sources used are summarized in Table 2. In addition, memories and opinions were drawn upon in an effort to discern what value former students perceived in this form of education.

Table 2.--Chief sources of information about each of the Upper Peninsula hospital schools of nursing.

Source	Lake Superior School for Nurses at Lake Superior General Hospital, Lake Linden	St. Luke's Hospital Training School for Nurses/St. Luke's Hospital School of Nursing, Marquette	St. George's Hospital Training School for Nurses, Iron Mountain
<b>I. Primary Sources</b>			
<u>Record of Registered Nurses, Vol. 1 &amp; 2</u>	1910, 1912, 1913, 1921, 1922	1910, 1911, 1912, 1913, 1914, 1917, 1918, 1921, 1922, 1923, 1924, 1925	1910
Corporate Articles	July 10, 1902	October 2, 1897	November 8, 1922
Minutes, Michigan Board of Nursing	July 1, 1921	Jan. 5, 1920; May 22, 1928; Oct. 8, 1930; April 8, 1931; May 26, 1933	--
Complete record of students' performance and progression in classroom and clinical setting	NOT AVAILABLE	Reviewed some records of deceased alumnae. Those reviewed were not complete.	NOT AVAILABLE
Annual reports to the Michigan Board of Nursing	NOT AVAILABLE	1918-1959 at State Archives of Michigan	NOT AVAILABLE
Clinical experience schedules	NOT AVAILABLE	Summary at Marquette General Hospital	NOT AVAILABLE
Records of learning experiences located at affiliating agency	NOT AVAILABLE	Summary as above	NOT AVAILABLE
School bulletins	NOT AVAILABLE	1957-1959; 1961; 1963- 1964; 1966-1972; 1974	NOT AVAILABLE
<b>II. Secondary Sources</b>			
Letter from Michigan Board of Nursing consultant	Dec. 1962	--	--
Newspaper articles	<u>The Daily Mining Gazette</u> <u>The Native Copper Times</u>	<u>The Daily Mining Journal</u> <u>The Marquette Chronicle</u>	<u>The Iron Mountain Press</u> <u>The Iron Mountain News</u>
Local or privately published history	Monette, 1977	--	--
<u>Nursing in Michigan, a History</u>	Not mentioned or listed	Mentioned	Mentioned
Corporate reports	--	1915-1928; 1931-1940	--
<b>III. Interviews</b>			
Interviews with graduates or teachers	--	12 graduates	--

Table 2.--Continued.

Source	Sault Ste. Marie Hospital/Chippewa County War Memorial Hospital Training School for Nurses, Sault Ste. Marie	Upper Peninsula Hospital for the Insane/Newberry State Hospital Training Hospital for Nurses, Newberry	Houghton County Training School for Nurses, Laurium
<b>I. Primary Sources</b>			
<u>Record of Registered Nurses, Vol. 1 &amp; 2</u>	1910, 1912, 1913, 1915, 1916, 1918, 1919, 1921, 1922, 1924, 1925	1911, 1912, 1913, 1914, 1916, 1918, 1919, 1921, 1922, 1923, 1924, 1925	1910, 1912, 1913, 1914, 1915, 1916, 1918, 1920, 1921, 1922, 1923, 1924, 1925
Corporate Articles	September 19, 1903	--	May 23, 1908
Minutes, Michigan Board of Nursing	July 22, 1921; Nov. 26, 1921; March 8, 1922; Oct. 26, 1927; June 17, 1932; May 26, 1933; Sept. 19, 1934	Nov. 3, 1925	Nov. 5, 1919; Jan. 5, 1920; Oct. 4, 1920; April 24, 1922; June 30, 1924; Oct. 8, 1924; Oct. 8, 1930; April 8, 1931; May 18, 1932
Complete record of students' performance and progression in classroom and clinical setting	All student records complete and available, 1903-1933	NOT AVAILABLE	All student records complete and available, 1908-1932
Annual reports to the Michigan Board of Nursing	1922, 1925 and 1930 at Office of Director of Nursing, War Memorial Hospital	NOT AVAILABLE	1930 at Medical Library of Calumet Public Hospital
Clinical experience schedules	Office of the Director of Nursing, War Memorial Hospital	NOT AVAILABLE	Medical Library, Calumet Public Hospital
Records of learning experiences located at affiliating agency	NOT AVAILABLE	Office of Director of Nursing, War Memorial Hospital and Special Collections Dept. of the Library of the Univ. of Illinois at Chicago	NOT AVAILABLE
School bulletins	NOT AVAILABLE	NOT AVAILABLE	NOT AVAILABLE
<b>II. Secondary Sources</b>			
Letter from Michigan Board of Nursing consultant	--	--	December 1962
Newspaper articles	--	<u>The Newberry News</u>	<u>The Calumet News</u>
Local or privately published history	--	Mattson, 1918	--
<u>Nursing in Michigan, a History</u>	Mentioned	Mentioned	Mentioned
Corporate reports	--	--	--
<b>III. Interviews</b>			
Interviews with graduates or teachers	Graduate of 1933	--	Graduate of 1924, Director



Table 2.--Continued.

Source	Calumet & Hecla Hospital Training School for Nurses, Calumet	St. Joseph Hospital Training School for Nurses, Menominee	St. Joseph's Hospital School of Nursing, St. Joseph's Hospital, Hancock
<b>I. Primary Sources</b>			
<u>Record of Registered Nurses, Vol. 1 &amp; 2</u>	1910, 1913, 1914, 1915, 1917, 1918, 1919, 1920, 1921, 1922, 1923, 1925	1921, 1922, 1923	1924, 1925
Corporate Articles	March 17, 1913	April 29, 1898	May 3, 1948
Minutes, Michigan Board of Nursing	Nov. 5, 1919; Oct. 4, 1920; May 24, 1921	Oct. 4, 1920; Jan. 11, 1921, pp. 17 & 18; April 15, 1924	Jan. 11, 1921; May 24, 1921; Sept. 26, 1921; Nov. 26, 1921; Feb. 2, 1922; April 24, 1922; Oct. 14, 1927; March 7, 1928; May 24, 1933; May 26, 1933; Sept. 19, 1934
Complete record of students' performance and progression in classroom and clinical setting	NOT AVAILABLE	NOT AVAILABLE	DID NOT EXAMINE
Annual Reports to the Michigan Board of Nursing	NOT AVAILABLE	NOT AVAILABLE	1931-1959 at State Archives of Michigan
Clinical experience schedules	NOT AVAILABLE	NOT AVAILABLE	Portage View Hospital (summary at)
Records of learning experiences located at affiliating agency	Special Collections Dept. of the Library of the Univ. of Illinois at Chicago	NOT AVAILABLE	Summary as above
School bulletins	NOT AVAILABLE	NOT AVAILABLE	1960-1971
<b>II. Secondary Sources</b>			
Letter from Michigan Board of Nursing consultant	Dec. 1962	--	--
Newspaper articles	--	<u>The Menominee Herald- Leader</u>	<u>The Daily Mining Gazette</u> <u>The U.P. Catholic</u>
Local or privately published history	--	City of Menominee Centennial Corp., 1983	Monette, 1982
<u>Nursing in Michigan, a History</u>	Listed	Mentioned	Mentioned
Corporate reports	Calumet & Hecla Mining Company Report, 1921	--	--
<b>III. Interviews</b>			
Interviews with graduates or teachers	Graduate of 1921	--	13 graduates

The research questions were applied to each school in an effort to rationalize their inceptions, trace the path of their development, and ultimately analyze their value to the society from which they had arisen. The schools were considered in the order of their inception. Each school was described, and then the research questions were applied to the school. An attempt was made in each case to (a) identify the ownership of the hospital, (b) show the position of the superintendent of the school of nursing in the administrative hierarchy, (c) tell of the credentials of the superintendent of nurses and of other faculty, and (d) report admission standards, the curriculum, duty hours, and clinical experiences of student nurses. Data gleaned from the application of the research questions were analyzed to identify major stimuli that contributed to the growth and development of the hospital schools of nursing in the Upper Peninsula.

## CHAPTER IV

### THE UPPER PENINSULA HOSPITAL SCHOOLS OF NURSING

#### Introduction

In this chapter data about each of the nine Upper Peninsula hospital schools of nursing are provided. The schools are presented in the order of their creation. A description of the physical characteristics and administrative organization of each hospital precedes a description of the faculty, curriculum, and students in each hospital school.

Because many of the schools had been closed for over 50 years, primary sources were often unavailable. This was especially true in the cases of those schools that had closed earlier. These schools were small and had only a few graduates. They could vanish and leave but little evidence of their existence.

More information is presented about St. Luke's Hospital Training School for Nurses than about any other school of nursing. This occurred because this school operated for 78 years, much longer than any other school of nursing in the Upper Peninsula. Moreover, it was the last to close. Therefore, the amount of information lost was minimized. The section on faculty at this school stretched out because of short tenure of faculty. At St. Joseph's Hospital School of Nursing at Hancock, that situation was avoided because

many of the faculty were nuns who were assigned for long periods. The length of the accounts of the schools and the detail in which the accounts are presented varied because of factors inherent in the circumstances, rather than because of conscious bias on the part of the researcher.

Lake Superior School for Nurses, Lake Linden, 1897-1919

Lake Superior School for Nurses, located in the village of Lake Linden in Houghton County, began operation in 1897. The school was accredited in 1910 by the Michigan State Board of Registration of Nurses and operated at Lake Superior General Hospital until 1919, when the last class of pupil nurses graduated. Lake Superior General Hospital was built in 1895 as a 20-bed institution (Sawyer, 1911). By 1902 it had expanded to 30 beds and had a daily average census of eight patients (Pullen, 1962). The hospital had facilities for performing surgery and delivering babies, as well as for providing medical and surgical care to patients of both sexes. It was, in short, a "full-service" hospital. This hospital was owned by a corporation of six stockholders. The principal stockholder was George W. Orr, M.D., who was chief physician at the hospital. The superintendent of the hospital, and of the training school for nurses as well, was Margaret J. Peattie (Polk's Houghton County Directory, 1905). She was a trained nurse, but where she trained is not known.

Lake Superior School for Nurses was owned by the same six stockholders who owned the hospital. The Articles of Association of

the Lake Superior School for Nurses (1902) declare the school was incorporated to:

conduct and carry on one or more hospitals for the care, treatment and medical and surgical attendance of the sick, injured or diseased, and the giving instructions therein and in hygiene; and to provide medical and surgical attendance to those in need of the same. (Article II)

The faculty of the school initially comprised Dr. Orr and Miss Peattie (Polk's Houghton County Directory, 1899). Then, in 1900, according to a story published at the time of her resignation in The Daily Mining Gazette of April 22, 1917, Zella DeWitt joined the faculty and became matron of the hospital as well ("Mrs. Phillip Peiffer's Resignation," 1917). After she arrived, Miss DeWitt, who was a graduate of Saginaw Women's Hospital School for Nurses, assumed responsibility for training the pupil nurses and supervising patient care ("Mrs. P. L. Peiffer Dies," 1940). The superintendent of the hospital and schools, Miss Peattie, was concerned with the daily general management of the institution, while Dr. Orr had charge of the medical management of patients. He, with help from the other stockholders, managed the institutional finances.

Women who were at least 21 years of age and had good mental, moral, and physical health were considered as candidates for entrance to the school. High school graduation was preferred but not required. Tuition was not charged. Instead, pupil nurses were paid \$3 per month in the first year and \$5 per month during the second and third years (Pullen, 1962).

The curriculum initially was two years in length but, by 1910, had been lengthened to three years. Subjects studied by 1910,

when the school was accredited, were: History of Nursing, 1 hour; Anatomy and Physiology, 72 hours; Hygiene, 12 hours; Bacteriology, 12 hours; Dietetics, 47 hours; Nursing Arts, 70 hours; Medical Diseases, 24 hours; Children's Diseases, 18 hours; Mental and Nervous Diseases, 10 hours; Communicable Diseases, 6 hours; Obstetrics, 24 hours; Materia Medica, 24 hours; Ethics, 12 hours; Eye, Ear, Nose, and Throat, 10 hours; and Surgical Nursing, including Operating Room, 50 hours. Pupil nurses had clinical experience in the following areas: General Medical-Surgical Nursing, in which the length of the experience was not reported; Pediatrics, 1 to 4 months; Obstetrics, 3 months; Night Duty, 5 to 8 months; Operating Room, 4 months; Diet Kitchen, 3 months; Clinic, 1 to 4 months; Special Duty, 3 to 9 weeks; and Charge Nurse, 4 months. In addition, pupil nurses did private duty in patients' homes in the second year. The hours on duty were 12, beginning at 7:00 a.m. and concluding at 7:00 p.m., with one hour off during that shift. Pupil nurses were given one half day off weekly, with an additional four hours off on Sunday. Two weeks' annual vacation was also granted.

St. Luke's Hospital Training School for Nurses,  
Marquette, 1899 to 1977

St. Luke's Hospital Training School was located in Marquette. It began operation in 1899 at the hospital, which was then located at 123 W. Ridge Street. The school was accredited by the Michigan State Board of Registration of Nurses in 1910. In 1915 the hospital and its school for nurses was moved to a location on Hebard Court at

College Avenue. The school continued in that block until it closed in 1977. The original name of the school of nursing was St. Luke's Hospital Training School for Nurses, but after 1941 that name was not used. From 1942 until 1974 the name appearing on school documents was St. Luke's Hospital School of Nursing. Once again, in 1974, the name shifted to St. Luke's School of Nursing. The year earlier, 1973, St. Luke's Hospital had merged with St. Mary's Hospital to form Marquette General Hospital (St. Luke's School of Nursing, 1974). Thus, the name St. Luke's Hospital School of Nursing had become inappropriate.

St. Luke's Hospital was incorporated in 1897 (Articles of Incorporation of St. Luke's Hospital, 1897). In its initial location at 123 W. Ridge Street, the hospital had accommodations for 50 patients and facilities for performing operations, deliveries, and X-rays (Marquette City and County Directory, 1899). In 1915 a larger building, accommodating 50 to 60 patients, a children's ward, and laundry in addition to operating and delivery suites, was built on Hebard Court ("St. Luke's Hospital Has No Peer," December 15, 1915). In 1930 an adjacent outpatient clinic providing services for children was built and operated by the James Couzens Fund (St. Luke's Hospital, 1931). The hospital's bed capacity was increased to 130 beds and 25 bassinets in 1938 with the construction of the James Couzens Memorial building (St. Luke's Hospital, 1938). In 1954 the adjacent facility, Northern Michigan Children's Clinic, was turned over to the hospital. These additions and the

construction of a wing in 1956 on the James Couzens Memorial building increased the capacity of the hospital to 175 beds (St. Luke's Hospital School of Nursing, 1963). Further remodeling of the James Couzens Memorial building yielded a total of 194 beds by 1970 ("Big Business of St. Luke's Hospital," November 3, 1970).

The hospital was incorporated in 1897 as a public hospital financed by voluntary donations (Articles of Incorporation of St. Luke's Hospital, 1897). A Board of Trustees set policy. An administrator, known in the early years as hospital superintendent, was responsible for operationalizing that policy. The first superintendent of the hospital was Frank Stolpe (Marquette City and County Directory, 1899). He had several years of experience doing hospital or nursing work but was not educated for it ("Forty-Five Years on Staff," 1940). Stolpe left that position in 1901 and was succeeded by Edna M. Brown, who was a graduate nurse (St. Luke's Hospital, 1922). Although her title was hospital superintendent, that position encompassed the roles of director of nursing service and education, as well as the role of hospital administrator. Following Miss Brown's tenure, eight women occupied this position with its multiplicity of roles until 1937, when the position of hospital superintendent was split into the positions of hospital superintendent and superintendent of nurses (St. Luke's Hospital, 1937). Under this arrangement the superintendent of nurses was responsible for directing nursing service and nursing education while the hospital superintendent, a nurse, continued as administrator. In 1958 the first professional hospital



administrator, Howard Lewald, was hired (St. Luke's Hospital School of Nursing, 1958), and in 1966 the position of director of nursing education was separated from the position of director of nursing service (St. Luke's Hospital School of Nursing, 1966).

### Faculty

1899-1919. When St. Luke's Hospital Training School opened in 1899, Verne Parker, an 1897 graduate of Illinois Training School for Nurses, was hired as superintendent of the school (Marquette City and County Directory, 1899). She stayed only a few weeks and was succeeded by Olive Pendill. Miss Pendill, a member of a respected Upper Peninsula pioneer family, was an 1898 graduate of St. Luke's Hospital Training School for Nurses in Chicago and a veteran of the Spanish-American War (Rankin, 1965). In the early years, these women and others who served as superintendents taught the pupil nurses. They were assigned by physicians, who contributed their services.

By 1915 the hospital superintendent, Clara Mack, who was also the superintendent of nurses, was assisted by the surgical nurse, Frances S. Clark, in teaching nursing to the pupils (St. Luke's Hospital, 1915). Both Mrs. Mack and Miss Clark were graduates of St. Luke's Hospital Training School. Mrs. Mack graduated in 1904, Miss Clark in 1911 (St. Luke's Hospital, 1916). They taught Practical Nursing. Dietetics was taught by Della McCallum, a faculty member at Northern State Normal School (Hilton, 1975), and physicians taught about medical conditions. The physicians were

Drs. H. M. Cunningham, T. M. Cunningham, H. T. Carriel, Bottom, H. Markham, Von Zellen, Main, Lunn, and Paul (St. Luke's Hospital, 1915).

This pattern continued, with some change in faculty members, until 1918 when an affiliation of three months in contagious diseases and diseases of children was contracted with Children's Hospital School for Nurses in Detroit (St. Luke's Hospital, 1919). Because Mrs. Mack had resigned in 1917, this contract was initiated by her successor, Miss Clark. At Children's Hospital School for Nurses the full-time instructor was Hilda Merkle, a graduate of Philadelphia Polyclinic Hospital (McCabe, 1930). At St. Luke's Hospital Training School the officers, in addition to the superintendent, were reported to be Mabel A. Fahey, the assistant superintendent and a 1914 graduate of the school; Katherine M. Solka, the night supervisor and a 1916 alumna; and Della McCallum, the dietitian and faculty member of Northern State Normal School (St. Luke's Hospital Training School for Nurses, 1918).

In 1919 Anatomy and Physiology and Bacteriology and Hygiene were taught by Dr. John Lowe, a biology teacher at Northern State Normal School (Hilton, 1975). Miss Clark and Mary L. Coppens, the operating-room supervisor, taught Practical Nursing, Practical Surgical Work, and Nursing Ethics. Miss McCallum continued to teach Dietetics, and the night supervisor, Margaret Vivens, assisted by overseeing the work of pupil nurses at night. Physicians, not

identified by name, taught about medical conditions (St. Luke's Hospital Training School for Nurses, 1919).

1920s. By 1923 the affiliation with Children's Hospital Training School for Nurses had been extended to four months, and the association with faculty from Northern State Normal School had been discontinued. The assistant superintendent of the hospital and school, Edna Blanche Groppe, a graduate of Mercy Hospital School for Nurses in Columbus, Ohio, bore the heaviest teaching load. She was assisted by the operating room supervisor, Helen Patterson, a 1923 alumna of St. Luke's; the night supervisor, Emilie Van Brocklin, who had graduated from St. Luke's in 1919; and the superintendent of the hospital and school, Katheryn R. Gutwald, a 1914 graduate of Conemaugh Valley Memorial Hospital School for Nurses in Johnstown, Pennsylvania. They taught all the nursing subjects and Dietetics. Physicians taught about medical conditions (St. Luke's Hospital Training School for Nurses, 1923; St. Luke's Hospital, 1923).

The four-month affiliation with Children's Hospital School for Nurses was discontinued in 1928, and two affiliations of three months each were begun at Herman Keifer Hospital and Grace Hospital Training School for Nurses (McCabe, 1930; St. Luke's Hospital, 1928). Celia E. Kovamaki Kepler, a member of the class of 1929, reported that student nurses on these affiliations were taught about, and given practice in, diet therapy and nursing care of people having contagious diseases and medical conditions. She did not recall the names of the teachers during these affiliations, and records about the faculty were not available from the affiliating

agencies. Records maintained by the home school did not contain accounts about the faculties of affiliating agencies, and McCabe (1930) mentioned only that Della DeLong became principal of the school of nursing at Grace Hospital in 1928. No other faculty, or data about faculty, were reported.

At St. Luke's Hospital Training School the practice of using nurses and physicians as teachers as well as care providers continued through the 1920s. In 1924 Miss Groppe resigned. Her position was filled by Miss Van Brocklin. Miss Huebner, a 1919 classmate of Miss Van Brocklin's, filled the vacancy created when Miss Patterson resigned as operating-room supervisor and Malvina Lagergren, a 1924 graduate of the school, became night supervisor (St. Luke's Hospital, 1924). In 1926, after the resignation of Miss Gutwald, Miss Van Brocklin became superintendent of the hospital and training school and Miss Huebner became her assistant (St. Luke's Hospital, 1926). Ingebur Peterson, a graduate of 1925, became operating-room supervisor, and when she resigned in 1928 to be married, Beulah Wright, a member of the class of 1919, assumed that position (St. Luke's Hospital, 1928). Celia Kovamaki Kepler reported in a 1984 interview that she was taught Principles of Nursing and Hospital Housekeeping by Emma Huebner; Diets and Food by Miss Van Brocklin; Operating Room Technique by Beulah Wright and Ingebur Peterson; Anatomy and Physiology by Dr. Howe; Bacteriology by Dr. Youngquist; Obstetrics by Dr. Howe and Dr. Casler; Eye, Ear, Nose and Throat by Dr. Hornbogen; and Chemistry by Dr. Lowe of

Northern State Teacher's College (C. K. Kepler, personal communication, August 27, 1981).

1930s. In 1930 the first full-time nurse instructor, Margaret Pringle, was hired. She was listed as "instructress of nurses" in the hospital's annual report for 1931 and as "Educational Director" in the school's report to the Michigan Board of Registration of Nurses and Trained Attendants. She had graduated from Royal Victoria Hospital School for Nurses in Montreal and from New Brunswick Normal. Following that, she had studied at McGill University. Miss Pringle taught Anatomy and Physiology, Personal Hygiene, Elementary Materia Medica, Elementary Principles and Practices of Nursing, History of Nursing, Materia Medica and Therapeutics, Advanced Principles and Practice of Nursing, Psychology, and Emergency Nursing and First Aid. Other nurses who were listed as faculty were the supervisors of the pediatric ward and the operating rooms and the superintendent of the hospital and school. Irene Pritchard, the supervisor of the pediatric ward, graduated from Indiana University's five-year program in nursing. Thus, she had a diploma in nursing and an A.B. degree. Mary E. Skeoch, the superintendent, graduated from Farrand Training School for Nurses and Stratford Normal School. The operating-rooms supervisor, Gladys Zimmerman, graduated from Jane Case Hospital School for Nurses in Delaware, Ohio, and had postgraduate work at Lakeside Hospital in Cleveland (St. Luke's Hospital, 1931).

Among the non-nurses who taught student nurses in 1931 were the hospital orderly, who taught elementary bandaging; seven physicians,

who taught about medical conditions; a dietitian; and a medical technologist. The orderly was Frank E. Stolpe, the first superintendent of the hospital. The physicians were A. L. Swinton, A. K. Bennett, L. W. Howe, H. B. Markham, F. McD. Harkin, F. O. Paull, and M. Cooperstock. Minnie Willmart, a graduate of North Dakota State College, taught nutrition and diet therapy while Gertrude Willmart, also a graduate of North Dakota State College, taught Bacteriology, General and Applied Chemistry, and Elements of Pathology (St. Luke's Hospital, 1931).

Records of the faculty who taught Obstetric Nursing, Communicable Disease and Tuberculosis Nursing, and Diet Therapy to students from St. Luke's Hospital when they affiliated at Herman Keifer Hospital were not available. Although, when they were surveyed in 1984, former student nurses could not recall the names of their teachers on this affiliation, one, Wilhelmina Haskins Hartvigh, reported that Ellen L. Stahlnecker, a member of the Michigan Board of Registration of Nurses and Trained Attendants, was Director of Nurses at Herman Keifer Hospital in 1933, when Mrs. Hartvigh affiliated there as a student nurse (W. H. Hartvigh, personal communication, April 13, 1987).

The affiliations changed three times during the 1930s. McCabe (1930) reported that affiliation for Obstetrics and Dietetics at Grace Hospital was terminated in 1930. Herman Keifer became, for three years, the sole affiliating hospital. Then, in 1933, an affiliation in Gynecology and Orthopedics was initiated at the

University of Michigan Hospital (St. Luke's Hospital, 1933). In 1936 the affiliation with Herman Keifer Hospital was discontinued, and the affiliation with the University Hospital School of Nursing of the University of Michigan was changed to provide learning experiences in Surgery and Gynecology (St. Luke's Hospital, 1936).

In 1935, Miss Pringle, whose title had become "Director of Nurses" in the hospital while remaining "Educational Director" in the school, resigned and Elinor Neal took her place. The only information available about Miss Neal was that she had a Bachelor of Science degree in addition to her license to practice nursing. Expansion of the obstetric and orthopedic wards in the hospital necessitated the creation of new positions. Miss Danielson, Miss Nelson, and Miss Thurman filled these (St. Luke's Hospital, 1935; St. Luke's Hospital Training School for Nurses, 1935).

These changes were reflected in faculty who were listed as teaching in 1936. Miss Neal carried the greatest number of courses. They were Anatomy and Physiology, Drugs and Solutions, Materia Medica, Principles and Practice of Nursing, Advanced Principles and Practice of Nursing, Psychology, and History of Nursing. In addition she taught Medical Nursing and Psychiatry with Dr. Swinton; Public Health with Dr. Drury; Pathology with Dr. Hirwas; Eye, Ear, Nose, and Throat with Dr. Hornbogen; and Urology with Dr. Bennett. Other nurses who taught were Miss Skeoch, the hospital superintendent, who taught Professional Adjustments and Ethics; Miss Thurman, the orthopedics supervisor, who taught Personal Hygiene and, with Dr. Elzinga, Orthopedic Nursing; Miss Zimmerman, the

operating-rooms supervisor, who taught Operating Room Technique; Miss Nelson, who, with Dr. Howe, taught Obstetrical Nursing; Miss Thurman, who teamed with Dr. Cowan to teach Communicable Disease; and Miss Olson, who, with Dr. Cooperstock, taught Pediatrics. The laboratory technician, Miss Galloway, taught Chemistry and Microbiology. Miss Lang, the physical therapist, taught Massage. Mr. Stolpe continued to teach Bandaging, while Miss Cole, the dietitian, taught Nutrition and Cookery. An intern taught Diet in Disease (St. Luke's Hospital, 1936). This intern was identified as Dr. LeGolván by two members of the class of 1937, Aurelia Swenor Hooper and Hildur Suomela Nelson, when they were interviewed on August 27, 1981.

In June 1937 Miss Neal resigned and Bertha Boekelheide, a nurse who had graduated from the University of Minnesota School of Nursing with a Bachelor of Science degree, took her place (St. Luke's Hospital, 1937). Miss Boekelheide left in 1938. She was succeeded by Helen Helz, a graduate of Evangelical Deaconess Hospital School of Nursing in Milwaukee and of Milwaukee-Downer College (St. Luke's Hospital, 1938). In August 1939 Jayne Killian became "Instructress of Nursing" (St. Luke's Hospital, 1939). She had a Bachelor of Science degree from the University of Alabama and a Master of Nursing from Western Reserve (St. Luke's Hospital Training School for Nurses, 1941). Miss Killian stayed through 1940. When she left to be married, Marie Elsner, a graduate of Michael Reese Hospital School of Nursing and Columbia University, became Educational



Director. Miss Elsner stayed until 1943, when Nettie E. Bealer filled the position (St. Luke's Hospital School of Nursing, 1944). Miss Elsner returned as Educational Director and Nursing Arts Instructor in 1945 and remained until 1948 (St. Luke's Hospital School of Nursing, 1948).

The pattern of short tenure in this office continued as in 1948 Lillian Raper became Director of the School of Nursing. She remained only one year. During that year she was assisted by Esther Fredrickson, who had the position of Nursing Arts Instructor (St. Luke's Hospital School of Nursing, 1948). No information about the educational preparation of either of these two nurses was available. Sadie Spielmacher assumed the position of Director of the School of Nursing in 1949. Her colleagues were Ruth Griffith, who served as Assistant Director; Frances Gallagher, who was Science Instructor; and Irene Anderson, who worked part time as Nursing Arts Instructor (St. Luke's Hospital School of Nursing, 1949). No records of the educational preparation of Misses Spielmacher, Griffith, or Gallagher were available, but Mrs. Anderson, whose maiden name was Irene Pritchard, was an Indiana University graduate.

1940s. In 1945 Helen Heikkinen, an Augustana Hospital School of Nursing graduate, taught Medical Nursing, Surgical Nursing, and Care Studies. In addition, she assisted with ward teaching and follow-up work. She was the first faculty member at St. Luke's Hospital School of Nursing to be designated "clinical instructor" (St. Luke's Hospital School of Nursing, 1945). Nevertheless, the practice of using supervisors and head nurses to teach the

specialties and function as ward teachers continued. In 1945, for example, Dora Maynard, a 1941 graduate of the school, and acting operating-room supervisor, taught First Aid and Operating Room Technique and supervised students as they performed in the operating rooms. That same year Aili Kangas, an alumna of 1939 who was pediatric supervisor, taught, with Dr. Cooperstock, Pediatric Nursing and Communicable Disease Nursing. Hellin Wahtera Seppala, a 1936 graduate who was assistant supervisor of medical, surgical, and obstetric wards, assisted in observing students as they performed nursing procedures on those wards. Signe Miners, a 1941 graduate and assistant supervisor in the private pavilion, likewise, assisted in observing students as they functioned on the surgical, medical, and obstetric wards, and Jean Schuck, the orthopedic nursing supervisor, taught Orthopedic Nursing. Mary Jokipii, the night supervisor, supervised the performance of students at night (St. Luke's Hospital School of Nursing, 1945). Thus, the nurse segment of the faculty in 1945 comprised nursing administrators and supervisors as well as nurses whose sole focus was teaching.

Starting in 1944 some courses were taught at Northern Michigan College of Education. Initially, the professors involved were Lucian F. Hunt, Ph.D., who taught Chemistry; Gilbert Brown, B.L., A.M., who taught Psychology; Albert H. Burrows, Ph.D., who taught Sociology; and Ruby Richey, B.S., M.A., who taught Nutrition, Foods, and Cookery (St. Luke's Hospital School of Nursing, 1944). Mrs. Richey taught until 1949, when Jane Bemis, M.A., took over the

course in Foods and Nutrition (Hilton, 1975; St. Luke's Hospital School of Nursing, 1949). Miss Bemis continued to teach the material on nutrition throughout the 1950s. Another member of the Home Economics Department at Northern Michigan University assumed responsibility for teaching in this area in 1966. Nutrition continued to be taught by faculty of Northern Michigan University until 1969, when the course was dropped from the curriculum of St. Luke's School of Nursing (St. Luke's Hospital School of Nursing, 1969). Dr. Hunt, only rarely relieved by another, taught Chemistry to student nurses from St. Luke's until his retirement in 1967 (Hilton, 1975; St. Luke's Hospital School of Nursing, 1966). From that time until 1970, when the curriculum changed, members of the department taught the course. Dr. Burrows, Dr. Pearman, and Professor Fritz shared the load in teaching Sociology to student nurses from 1948 to 1963, when Professor Fritz died (Hilton, 1975; St. Luke's Hospital School of Nursing, 1963). From that time through 1976, the task was assumed by the staff of the Sociology Department (St. Luke's School of Nursing, 1974). Professor Brown taught Psychology to the student nurses until he retired in 1946 (Hilton, 1975). Then, Professor Ray Cooper carried the course until he died in 1949. From 1949 to 1962 Dr. Schwitzgoebel, Mr. Fritz, and Dr. Rutherford shared in teaching the course. After 1962, members of the Department of Education taught the course (Hilton, 1975; St. Luke's Hospital School of Nursing, 1963). By 1948, Dr. Walter Schaefer of the Biology Department at Northern Michigan College had begun to teach Anatomy, Physiology, and Microbiology to

the student nurses (St. Luke's Hospital School of Nursing, 1948). This continued through 1957. Dr. Gordon Gill of the Biology Department picked up with teaching those courses until 1962, when members of the Biology Department assumed responsibility for teaching them (St. Luke's Hospital School of Nursing, 1963).

The number of nurses who taught student nurses during the 1940s varied from eight in 1940-1941 and 1943-1944 to 14 in 1948-1949. However, only two or three nurses during this period were involved solely in teaching. They carried the major teaching load. The other nurses involved in teaching also had responsibilities in nursing service. In addition, physicians and other hospital staff assisted in teaching.

The faculty serving in the fall of 1940 exemplify the scheme. Miss Manley, a nurse who had no nursing-service duties, taught Chemistry, Materia Medica, Psychology, Sociology, and History of Nursing. In addition, she and Dr. Bennett, a surgeon, teamed to teach Surgical Nursing and with Dr. Hirwas, she taught Medical Nursing. Miss Killian, another nurse without nursing-service responsibilities, taught Nursing Arts, Bandaging and Binders, Anatomy and Physiology, and Psychiatric Nursing. Miss Pringle, who was director of the school of nursing and director of nursing service, taught Drugs and Solutions, Professional Adjustments I, and Professional Adjustments II. She was also responsible for calling meetings of the School of Nursing Committee, which reviewed school policies and helped to solve problems arising in the school. Miss

Zimmerman, the operating-room supervisor, taught Operating Room Technique to student nurses and supervised their performance during their operating-room experience. Miss Nelsen, who supervised the nursing care of obstetrical, medical, and surgical patients, taught Obstetric Nursing cooperatively with Dr. Howe. She also supervised student nurses during their clinical experience on those wards. Miss Hodge, who was the supervisor of the pediatric ward and outpatient clinic, taught both Pediatric Nursing and Communicable Disease Nursing in cooperation with Dr. Cooperstock. In addition, Miss Hodge supervised students' nursing practice in those nursing areas. Miss Thurman, the orthopedic nursing supervisor, taught Orthopedic Nursing with the help of Dr. Elzinga, who was an orthoped. She also supervised students when they practiced nursing on the orthopedic unit. Both the evening and night nursing supervisors, Miss Huebner and Mrs. Tuominen, respectively, were responsible for supervising the nursing practice of student nurses throughout the evening and night shifts. Miss Lutz, the laboratory technician, taught Microbiology, and Miss Allen, the physiotherapist, taught Massage to student nurses. Miss Campbell, the hospital dietitian, taught Nutrition and Cookery and Diet in Disease. She also supervised the work of student nurses who were learning to prepare special diets. Dr. Hornbogen, an ophthalmologist, taught the portion about diseases of the eye in the course on Eye, Ear, Nose, and Throat, while Dr. Nicholson taught about conditions of the ears, nose, and throat. Dr. Drury lectured in Public Health and Community Hygiene. Finally, unnamed faculty at

the hospital of the University of Michigan in Ann Arbor were responsible for teaching nursing care of patients who had urologic and gynecologic surgeries, as well as other specialized surgical procedures (St. Luke's Hospital Training School for Nurses, 1941).

Although in 1944 some faculty at Northern Michigan College of education became responsible for teaching several courses, the teaching load of nurses and others who taught at St. Luke's Hospital Training School for Nurses changed little. In 1949, after the passage of five years, Sadie Spielmacher, the director of the school and of nursing service, carried no teaching responsibilities, but Ruth Griffith, the assistant director of the school and of nursing service, taught History of Nursing, Professional Adjustments I, Professional Adjustments II, Nursing Care Studies, and Social Problems in Nursing. Frances Gallagher, who had no nursing service ties, taught Drugs and Solutions, Pharmacology and Therapeutics, Medical Nursing, Surgical Nursing, and Psychiatry. Student nurses' clinical experiences in Medical and Surgical Nursing were supervised by Anne Kangas, the head nurse of the surgical ward; Sylvia Belmore, the head nurse of the medical unit; and Jean Schuck, the head nurse of the orthopedic unit. Irene Anderson, a nurse employed part time, taught Nursing Arts I and Nursing Arts II. Dora Maynard, who was the operating-rooms supervisor, taught Operating Room Technique and also supervised student nurses as they performed in the operating rooms. Aili Kangas, the head nurse of the pediatric unit, taught Pediatric Nursing with Dr. Kugel and Dr.

Woodward, and she supervised the students during their clinical experience on the pediatric unit. Mrs. Lindholm, the nurse in charge of the pediatric outpatient clinic, supervised students' activities during their experiences in that area. A team of Miss Kangas, Dr. Charles, and Dr. Feiginson taught Communicable Disease. Students' clinical experiences in nursing patients with communicable diseases were supervised by Marguerite Nault, the head nurse of the contagion unit. Mrs. Lowenstein, the physical therapist, taught Massage, and the medical technologist, Corinne Larson, teamed with a pathologist, Dr. Amolsch, taught Introduction to Medical Science. Dorothy Chechack, the dietitian, taught Diet Therapy and supervised the students during their clinical experience in the diet kitchen. Dr. Schweinsburg taught Eye Diseases, while Dr. Nicholson taught Ear, Nose, and Throat. Dr. Acocks taught about chest surgery and tuberculosis and Dr. Drury taught about venereal diseases. The nursing supervisor on evenings, Mrs. Clement, was responsible for supervising the nursing activities of student nurses during her shift, while Mrs. Eggers, the night nursing supervisor, fulfilled that role at night. Neither the names nor numbers of nurses at Women's Hospital who taught Obstetric Nursing were available. Likewise, the faculty of the hospital of the University of Michigan who taught nursing in the medical and surgical specialties were unreported (St. Luke's Hospital School of Nursing, 1949).

1950s. In the 1950s the practice of using as faculty nurses whose primary responsibility was to nursing service, other hospital personnel, and physicians, in addition to nurses whose entire focus

was teaching, continued. In 1959 the list of clinical teachers included nursing service personnel such as Chrissie Reynolds, head nurse of the operating rooms; Wilhelmina Hartvigh and Shirley Peterson, nurses on the pediatric ward; Sadie Lindholm, the head nurse of the children's outpatient department; and Dorothy Chechack, the dietitian. Among the classroom teachers were the pharmacist, Richard Mick, as teaching Pharmacology; Chrissie Reynolds, the head nurse of the operating rooms, as teaching Operating Room Techniques; Dorothy Chechack, the dietitian, as teaching Diet Therapy; Wilhelmina Hartvigh, the pediatric head nurse, as teaching Pediatric Nursing; and Jean Schuck, the head nurse on the orthopedic ward, who taught Orthopedic Nursing with "Doctors." She also taught Specialties in Medical and Surgical Nursing and Eye, Ear, Nose and Throat Nursing with "Doctors." Introduction to Medical Science, Communicable Disease, and Social Aspects of Nursing she taught alone. Mrs. Anderson, who by 1959 was director of the school and of nursing service, taught Professional Adjustments I and Professional Adjustments II. Mrs. Martha Hatch taught Nursing Arts and Public Health Nursing. Jane Mahowald, who had been hired as Clinical Instructor, taught History of Nursing and Nursing Care Studies (St. Luke's Hospital School of Nursing, 1959).

A change occurred in the 1950s in the role of the clinical instructor. By 1959 the clinical instructor guided students during their clinical experiences on various medical and surgical units. Jane Trevarthen Mahowald, who was the clinical instructor in 1959,



supervised and assisted students in their nursing practice on the various wards of the hospital. Shirley Peterson, an alumna of 1944 who had subsequently served in the Army Nurse Corps, filled the position during 1958 while Jane finished the requirements for a Bachelor of Science in Nursing at Wayne State University (St. Luke's Hospital School of Nursing, 1958).

Mrs. Anderson, who had been hired as part-time teacher of Nursing Arts in 1948, had stayed and by 1951 had become a full-time teacher. Mrs. Griffith, who also had been hired in 1949 as assistant director of the school and of nursing service, functioned as acting director of the school and of nursing service in 1951. She resigned in June 1951, and the role fell to Mrs. Anderson. Ruth Tetzloff, another nurse, also taught with Mrs. Griffith and Mrs. Anderson, but her preparation or experience was not reported (St. Luke's Hospital School of Nursing, 1951).

Anne M. Brogan, a graduate of Our Lady of Lourdes Hospital School of Nursing in Hot Springs, South Dakota, who had received a bachelor's degree from Catholic University and a master's degree from New York University, took over as director of the school and of nursing service in September 1953 ("Brogan Sisters Head Nursing School," 1954; St. Luke's Hospital School of Nursing, 1954). Her sister, Florence Brogan, who had a diploma in nursing from St. Joseph's Hospital School of Nursing in Fort Wayne, Indiana, and both bachelor's and master's degrees from Columbia University, came at the same time to be Educational Director. Mrs. Anderson resumed the role of teacher of Nursing Arts, Nursing Care Studies, and Public

Health Nursing. Caroline Williams, a nurse who had a Bachelor of Science from Western Michigan University and who had taught with Mrs. Anderson during the previous year, resigned (St. Luke's Hospital School of Nursing, 1954). She returned in 1959 as Medical Surgical Instructor (St. Luke's Hospital School of Nursing, 1959). The Misses Brogan and Mrs. Anderson continued to serve the school. In 1957 they were joined by Jane F. Trevarthen Mahowald, who left after that year to go back to school (St. Luke's Hospital School of Nursing, 1957). The Misses Brogan also left, so Mrs. Anderson became director of the school and of nursing service in 1958. Serving with her as instructors of nursing in the school that year were Eileen M. Mullen, who had a diploma in nursing from St. Mary's Hospital School of Nursing in Duluth, Minnesota, and a Bachelor of Science in Nursing Education from the College of St. Scholastica; Martha B. Hatch, who had a diploma in nursing from the University of Minnesota School of Nursing; and G. Shirley Peterson, who held a diploma in nursing from St. Luke's Hospital School of Nursing in Marquette (St. Luke's Hospital School of Nursing, 1958).

In 1959 Jane Trevarthen Mahowald returned as clinical instructor, and G. Shirley Peterson became assistant head nurse of the pediatric ward. Mrs. Williams also returned that year, and Marian Thomas was hired as a part-time teacher of Nursing Arts. So, nurses whose energies were devoted to teaching, in addition to Mrs. Anderson, in 1959 were Eileen Mullen, Martha Hatch, Caroline Williams, Marian Thomas, and Jane Mahowald. The complement of

nurses devoted to teaching student nurses had grown to five, but an item in the report to the Michigan Board of Nursing, written by Mrs. Anderson, who had prepared the school's budget, revealed, "It is becoming increasingly difficult to operate the school because of the heavy financial burden as well as the problem of obtaining qualified instructors" (St. Luke's Hospital School of Nursing, 1959, p. 11-A).

Affiliations continued in the 1950s. Clinical experience in Psychiatric Nursing was started in 1950. Through 1954 this experience was offered at Winnebago State Hospital at Oshkosh, Wisconsin, where Ruth Hopper was director of nursing and was in charge of the learning experiences of student nurses. Miss Hopper's educational preparation, however, was not reported (St. Luke's Hospital School of Nursing, 1951). By 1957 the clinical experience in Psychiatric Nursing had been moved to Kalamazoo State Hospital, where it remained throughout the 1950s. At Kalamazoo, Myrtie Dunavin, R.N., B.A., was responsible for student nurses' learning experiences (St. Luke's Hospital School of Nursing, 1957).

The affiliation with Women's Hospital in Detroit, which had begun in 1942, continued throughout the 1950s. Frances Anderson, who had a diploma in nursing and a Bachelor of Science in Nursing Education from the University of Minnesota, directed students' learning experiences during this affiliation (St. Luke's Hospital School of Nursing, 1951, 1959). In 1957 an affiliation at Herman Keifer Hospital was added so students could have experience in Nursing in Tuberculosis and Communicable Disease. First Germaine Hines and then Dorothy Shaffer was charged with directing the

learning experiences of students at Herman Keifer Hospital. Nothing about their educational preparation was reported (St. Luke's Hospital School of Nursing, 1957, 1958).

1960s. While the 1950s ended with five nurses whose sole responsibility was teaching, during the 1960s never were fewer than six nurses employed solely to teach student nurses. In 1961 seven nurses, in addition to Mrs. Anderson, staffed the school. Mrs. Anderson continued to fill the role of director of nursing service as well as nursing education. Five of the seven teachers were designated as "instructor." One was titled "clinical instructor," and one was known as "assistant clinical instructor." The roles of physicians were diminished to "special lecturers" in the school.

The credentials of the five instructors were as follows. Caroline Williams had a Bachelor of Science degree from Western Michigan University in addition to her diploma in nursing from Bronson Hospital School of Nursing in Kalamazoo. Edna McColeman had earned a diploma from General Hospital School of Nursing in Hamilton, Ontario, and a Bachelor of Science in Nursing Education from Western Reserve University. She had also completed graduate courses at the Universities of Michigan, Minnesota, and Northern Illinois. Miriam Thomas had a diploma from St. Mary's School of Nursing at Rochester, Minnesota, and a Bachelor of Science in Nursing Education from the University of Chicago. Barbara King held a Bachelor of Science with a major in nursing from College of St.

Scholastica in Duluth, Minnesota. Martha B. Hatch had earned a diploma from the University of Minnesota School of Nursing and had taken courses at the University of Minnesota, Teachers College at Moorehead, Colorado State College, and Northern Michigan College (St. Luke's Hospital School of Nursing, 1961).

The clinical instructors were licensed to practice nursing in Michigan. Florence Buhrman, the assistant clinical instructor, had a diploma from Kahler School of Nursing at Rochester, Minnesota. In addition, she had taken courses at Northern Michigan College. Jane Mahowald had a diploma from St. Luke's Hospital School of Nursing in Marquette and a Bachelor of Science in Nursing from Wayne State University (St. Luke's Hospital School of Nursing, 1961).

In 1963, following a curriculum revision the previous year, nursing courses in the school were taught by Irene Anderson and Jane Mahowald, who had become educational director, and five faculty. Mrs. Hatch no longer taught. Instead, she was "Student Health Advisor." Physicians functioned as consultants in clinical instruction. The faculty consisted of Florence Buhrman, R.N.; Janet Gharrity, R.N., B.S.N.; Sylvia Belmore, R.N., B.S.; Jean Reader, R.N., B.S.N.; and Karen Wertanen, R.N. Janet Gharrity, who taught in Medical-Surgical Nursing, had earned her Bachelor of Science in Nursing at the University of Wisconsin, while Jean Reader, who taught Pediatric Nursing, had been educated at the University of Michigan School of Nursing. Sylvia Belmore, who taught Medical-Surgical Nursing with Janet Gharrity and Florence Buhrman, held a diploma from St. Luke's Hospital School of Nursing and a Bachelor of

Science from Northern Michigan University. Karen Wertanen, who taught Operating Room Nursing, had a diploma from St. Luke's Hospital School of Nursing (St. Luke's Hospital School of Nursing, 1963).

By 1966 Irene Anderson had stepped down as director of the school and of nursing service. Instead, she became consultant to the faculty of the school, and Jane Mahowald became acting director of the school. Martha Hatch continued as student health advisor. Sylvia Belmore and Florence Buhrman continued to teach Medical-Surgical Nursing. Sylvia Belmore was now Instructor and Florence Buhrman was designated as Associate Instructor. They had been joined in teaching Medical-Surgical Nursing by Bernice Anderson, R.N., a 1946 graduate of St. Luke's Hospital School of Nursing. Her rank was Assistant Instructor.

There were other changes in the faculty also. After Jean Reader left to pursue advanced study in 1965, Phoebe Taisey Crouch, a graduate of Mary Fletcher Hospital School of Nursing in Burlington, Vermont, who possessed a Bachelor of Science in Nursing from Boston University, taught Pediatric Nursing. However, she also left after a year to do graduate work. Other new faculty, hired to teach Fundamentals of Nursing and help with clinical instruction, were Janet Erickson, Gail Oust, Ann Sarkela, and Mary Sundberg. Mary Sundberg and Ann Sarkela both were graduates of Augustanta Hospital School of Nursing. Ann Sarkela had additional course work at Northern Michigan University as did Gail Oust, who had a diploma

from Providence Hospital School of Nursing in Detroit. Janet Erickson was a graduate of St. Joseph's Hospital School of Nursing in Hancock, Michigan (St. Luke's Hospital School of Nursing, 1966).

Jane Mahowald, R.N., M.A.; Bernice Anderson, R.N.; Irene Anderson, R.N., A.B.; and Florence Buhrman, R.N. remained with the school through 1969. Mrs. Mahowald, who had earned a Master of Arts at Northern Michigan University, became director of the school in 1967. Irene Anderson had shifted to teaching Introduction to Nursing I. Florence Buhrman and Bernice Anderson taught Care of Adults. Sylvia Belmore had left to pursue graduate work as a full-time student. Nancy Birch, with a diploma in nursing from the University of Michigan, came in 1968 to teach Pediatric Nursing. She followed Mary Louise Bell, R.N., who had filled that position in 1967. Suzanne Swaine, who had a diploma in nursing from Iowa Lutheran Hospital in Des Moines, a Bachelor of Science in Nursing from State University of Iowa, and a Master of Science from U.C.L.A., taught Introduction to Nursing II and Team Nursing (St. Luke's Hospital School of Nursing, 1969). She had come in 1967 when, for a brief time, she taught Pediatric Nursing. Other new members of the faculty were Trudence Dalton, R.N., Assistant Instructor; Geraldine James, R.N., Assistant Instructor; Natalie Make, R.N., Associate Instructor; and Shirley Woods, R.N., Assistant Instructor. These four nurses primarily assisted and supervised students during their experiences on hospital units. Emma Moyle had replaced Martha Hatch as Student Health Advisor (St. Luke's Hospital School of Nursing, 1969).

Affiliations changed during the 1960s. The affiliation for Psychiatric Nursing was shifted to Ypsilanti State Hospital by 1966. Elvetta Walker, R.N., was director of Nursing Education at that agency. Nothing about her educational preparation, however, was reported (St. Luke's Hospital School of Nursing, 1969). The affiliation with Herman Keifer Hospital was discontinued after 1963, but the association with Women's Hospital lasted throughout the decade (St. Luke's Hospital School of Nursing, 1969).

1970s. In September 1970 the program was shortened to 21 months. The affiliations for Psychiatric Nursing and Maternity Nursing were discontinued. Instead, those courses were taught at the home school. Changes in courses taken at Northern Michigan University also occurred. Chemistry and Child Growth and Learning were no longer part of the curriculum in nursing. Human Anatomy, Human Physiology, Microbiology, Sociology, General Psychology, and Humanities, which had been added in 1969 when Nutrition was dropped from the curriculum, remained as required courses in the revised curriculum. These six courses and American Economy, which became a component of the curriculum in 1970, were taught by faculty of Northern Michigan University (St. Luke's Hospital School of Nursing, 1970).

Jane Mahowald continued as Director of the School of Nursing. Eleven nurses served with her as faculty, and Emma Moyle, R.N., remained as Student Health Advisor. New nurse faculty were Connie Hager and Marilyn Tuoriniemi. Both were hired as "Assistant



Instructor." Marilyn Tuoriniemi, who taught with other faculty in a series of three courses called Physical and Mental Illness I, II, and III, had a diploma from Morningside College, Methodist Hospital School of Nursing, in Los Angeles. Her focus in those courses was nursing in mental health states. Connie Hager taught in that same series of courses, but her focus was in physical health states. She had earned a diploma in nursing from Wesley Memorial Hospital School of Nursing in Chicago and had taken additional courses from Northern Michigan University (St. Luke's Hospital School of Nursing, 1970).

Trudence Dalton, a graduate of Michael Reese Hospital School of Nursing who had also studied at Northern Michigan University, taught in Parental and Child Health with Nancy Birch. Suzanne Swaine taught Fundamentals of Nursing. Irene Anderson taught Nursing Trends I and Nursing Trends II. The remaining faculty members were involved in teaching the courses in the series known as Physical and Mental Illness (St. Luke's Hospital School of Nursing, 1970).

By 1974 the entire faculty had changed. Jane Mahowald had left. In her place, as director, was Phoebe Taisey Crouch, who by this time had a Master of Science in Nursing from Colorado University. Fundamentals of Nursing, known at this time as Nursing I, was taught by Edith Roberts, Kerri Klotz, and Marian Rowe. Nursing II, which included Maternity Nursing, was taught by Kerri Klotz, Edith Roberts, Marian Rowe, and Gloria Clocklin. The series of three courses in Physical and Mental Illness was taught by Lorraine Lee, Carol Rombach, Daniel Nichols, and Mary Martin. Mrs.

Crouch taught Nursing Trends I and Nursing Trends II (St. Luke's School of Nursing, 1974).

In 1974 Humanities and American Economy had been replaced by Modes of Discourse and Medical Sociology. Faculty at Northern Michigan University taught these courses as well as five other undergraduate courses in the hospital school's curriculum. As it was known that the school was to close, faculty were released after courses they had taught were no longer offered. Some of the faculty found positions in the School of Nursing and Allied Health Sciences at Northern Michigan University. Others moved into positions in the hospital or community, and still others left the locality. A new class had not been accepted in 1976, and the school closed with graduation of the class of 1977.

Summary of data about nurse faculty. Although data were not available for each year, a tally of nurses known to have taught in the school of nursing showed that no fewer than 63 nurses who had nursing service responsibilities also had teaching responsibilities during the 78 years of the school's operation. A tally of nurses known to have fulfilled only teaching positions amounted to 54 nurses in the last 47 years of the school's operation. All five of the nurses known to have only teaching responsibilities in the 1930s had preparation beyond a diploma in nursing, as shown in Table 3. One had graduated from a normal school and had continued study at the graduate level. Another had a master's degree in nursing. The remaining three possessed bachelor's degrees. Data available for the 1940s showed that four nurses, of the 12 known to have fulfilled

only teaching roles, had work beyond the diploma in nursing. A nurse who had been hired in 1939 had a master's degree in nursing. The other three nurses had bachelor's degrees. The data available for the 1950s revealed nine nurses who functioned solely as faculty at St. Luke's Hospital School of Nursing. Of these nine nurses, seven were known to have preparation beyond the diploma. One had a Master of Science degree. Five had bachelor's degrees, and one lacked only a few credits for a bachelor's degree. Of the five faculty who had bachelor's degrees, two held the Bachelor of Science in Nursing Education degree and one possessed a Bachelor of Science in Nursing.

Table 3.--Preparation of nurses identified with responsibility limited to teaching at St. Luke's Hospital School of Nursing, by decade, 1930 to 1970.

Decade	Number of Nurses					
	Respon- sible Solely for Teaching	With Master's Degree	With Bachelor's Degree of Equivalent	With College Credit Beyond Diploma	With Diploma Only	With Creden- tials Unknown
1930s	5	1	4	0	0	0
1940s	12	1	3	0	1	7
1950s	9	1	5	1	1	1
1960s	25	2	9	4	5	5
1970s	21	3	5	4	6	3

Of the 25 nurses identified as serving only in faculty roles during the 1960s, 15 were known to have preparation beyond a diploma in nursing. Two held master's degrees. Nine had bachelor's degrees. Two of the nurse faculty with bachelor's degrees had Bachelor of Science in Nursing Education degrees. Three faculty had Bachelor of Science in Nursing degrees. The remaining four faculty who held bachelor's degrees had studied in non-nursing areas. Another four faculty employed during the 1960s had accumulated some college credit in addition to their diplomas in nursing. Data available for the 1970s showed that of 21 nurses known to teach at the school, three had master's degrees and five had bachelor's degrees. Four other nurse faculty had some college credit beyond their hospital school diplomas. A summary of data about the preparation for teaching of those nurses at St. Luke's Hospital School of Nursing who were identified as having roles in which their responsibility was confined to teaching student nurses is provided in Table 4.

Table 4.--Percentage of nurses identified as faculty at St. Luke's Hospital School of Nursing known to have academic credit beyond a diploma in nursing, by decade, 1930 to 1977.

Decade	Percent of Faculty	
	With Bachelor's or Higher Degree	With Some College Credit Beyond Diploma
1930s	100.0	--
1940s	33.0	--
1950s	66.0	77.7
1960s	44.0	60.0
1970s	38.1	57.1

The data about nurse faculty employed at St. Luke's Hospital School of Nursing revealed that 100% of those nurses identified as having responsibility limited to nursing education in the 1930s had substantial educational preparation beyond a diploma in nursing. During the 1940s, 4 of the 12 nurses (33%) identified as being hired to teach student nurses were known to have either a bachelor's or a master's degree in addition to a diploma in nursing. During the 1950s, six of the nine nurses (66%) identified as being hired to teach student nurses were known to have either bachelor's or master's degrees. Seven of the nine, or 77.7%, however, had some preparation beyond a diploma in nursing. In the decade of the 1960s, 11 of the 25 nurses (44%) known to have taught student nurses at St. Luke's Hospital School of Nursing had either a bachelor's or a master's degree. Fifteen of the 25 nurses (60%) who were hired to teach student nurses during the 1960s had at least some college credit in addition to a diploma in nursing and a license to practice. During the seven years of the 1970s, of the 21 nurses who were identified as teaching student nurses, eight (38.09%) had a bachelor's or higher degree. Twelve of these 21 nurses (57.1%) had at least some college work beyond a diploma in nursing and a license to practice.

### Students

Two students entered the training school for nurses as pupil nurses in 1899, but only one stayed on to graduate in 1901 (Rankin, 1965). How many pupil nurses were in school from 1900 through 1977

is not known, but each graduate, by year of graduation, was meticulously recorded and the record kept in the files of St. Luke's Hospital School of Nursing Alumnae Association. The largest graduating class occurred in 1972, when 33 nurses graduated (St. Luke's School of Nursing, 1985). In 1902, 1905, and 1917 there were no graduates, and in 1901, 1904, 1906, 1909, 1910, and 1913 only one nurse graduated. There were fewer than ten graduates in each graduating class until 1937. In all, there were 879 graduates in 77 years, as can be seen in Table 5. The average number of nurses in each graduating class from 1901 through 1977 was 11.41. It was a small school.

In the early years, women who were at least 19 years of age, had a grammar-school education, and were healthy and morally fit could apply (St. Luke's Hospital Training School for Nurses, 1918, 1919). They could be married, single, or widowed, but if they had children, the children needed to be provided for because the duty hours and living arrangements precluded a pupil nurse's caring for her own children. This need was pointed out in the application to the school seen in Appendix D. Later, the minimum age was dropped to 18 years (St. Luke's Hospital Training School for Nurses, 1923), and by 1945, applicants who were 17 and one-half years old were accepted (St. Luke's Hospital School of Nursing, 1945).

Married women were no longer admitted in 1936 (St. Luke's Hospital Training School for Nurses, 1936). This policy on marriage remained in force until 1949, when married women could again be admitted (St. Luke's Hospital School of Nursing, 1949). The

Table 5.--Number of graduates of St. Luke's Hospital School of Nursing,  
by year and decade, 1901 to 1977.

Decade	Year of Graduation	No. of Graduates	Decade	Year of Graduation	No. of Graduates
1900s	1901	1	1940s	1940	8
	1902	0		1941	9
	1903	3		1942	18
	1904	1		1943	20
	1905	0		1944	20
	1906	1		1945	15
	1907	5		1946	25
	1908	2		1947	11
	1909	1		1948	17
	Total	14		1949	19
		AVERAGE CLASS SIZE	1.2		
				Total	
				162	
				AVERAGE CLASS SIZE	
				16.2	
1910s	1910	1	1950s	1950	9
	1911	2		1951	12
	1912	4		1952	19
	1913	1		1953	24
	1914	2		1954	13
	1915	3		1955	12
	1916	3		1956	16
	1917	0		1957	30
	1918	3		1958	20
	1919	3		1959	12
		Total	22		
		AVERAGE CLASS SIZE	2.2		
				Total	
				167	
				AVERAGE CLASS SIZE	
				16.7	
1920s	1920	4	1960s	1960	14
	1921	2		1961	16
	1922	3		1962	14
	1923	3		1963	12
	1924	4		1964	15
	1925	2		1965	18
	1926	6		1966	25
	1927	5		1967	23
	1928	6		1968	25
	1929	7		1969	23
		Total	42		
		AVERAGE CLASS SIZE	4.2		
				Total	
				185	
				AVERAGE CLASS SIZE	
				18.5	
1930s	1930	5	1970s	1970	32
	1931	7		1971	20
	1932	8		1972	33
	1933	5		1973	24
	1934	8		1974	28
	1935	7		1975	25
	1936	7		1976	28
	1937	10		1977	24
	1938	6		Total	214
	1939	10		AVERAGE CLASS SIZE	26.75
		Total	73		
		AVERAGE CLASS SIZE	7.3		
				ALL GRADUATES 77 YEARS:	
				879	
				77-YEAR AVERAGE CLASS SIZE:	
				11.41	

statement on marriage in the 1958 bulletin indicated that marriage was not advisable, and a student who wished to be married was urged to discuss her plans with the director (St. Luke's Hospital School of Nursing, 1958). That statement remained in the bulletins through 1964.

Men were not admitted until 1964. The first male student was Elmer Moisio, who graduated in June 1967. By December 1967, five men were enrolled. Jane Mahowald, the director of the school, told about these five men in a letter she wrote to alumnae on December 15, 1967. She stated that four were first-year students and the fifth was in the second year of the program (Mahowald, 1967).

In 1918 and 1919, according to reports to the Michigan State Board of Registration of Nurses, high school graduation was required for entrance to the training school for nurses. However, the report for 1923 indicated that two years of high school were sufficient for entrance (St. Luke's Hospital Training School for Nurses, 1923), and only in 1926 was it stated in the hospital's annual report that "the requirement for admission has been changed so that hereafter only those who have had a standard high school course, or its equivalent will be eligible" (St. Luke's Hospital, 1926, p. 6). Gradually, admission requirements were raised so that by 1942 student nurses had to be eligible for college entrance (St. Luke's Hospital School of Nursing, 1942).

The early students were paid. The first two pupil nurses, both of whom were mature women possessing some nursing experience,



were paid \$15 per month in addition to maintenance (Rankin, 1965). A local newspaper, The Marquette Chronicle of December 21, 1915, reported that during the probationary period pupil nurse candidates received only room, board, and laundry ("St. Luke's Hospital Has No Peer," 1915). In addition to maintenance, first-year pupil nurses received \$4 per month, second-year pupil nurses were paid \$6 per month, and third-year pupils received \$8 per month ("St. Luke's Hospital Has No Peer," 1915). By 1923, pupil nurses were given stipends of \$6 per month during the first year, \$8 per month during the second year, and \$10 per month in the third year (St. Luke's Hospital Training School for Nurses, 1923). In the depression years this changed. By 1936 no stipend was paid, but a breakage fee was charged (St. Luke's Hospital Training School, 1936).

In 1941, \$25 tuition was charged students, who also paid \$200 for uniforms and books (St. Luke's Hospital Training School, 1941). By 1942, tuition was \$100 and the cost of uniforms was additional (St. Luke's Hospital School of Nursing, 1942). In 1945, stipends of \$15, \$20, and \$30 per month, depending on the seniority of the student, were again paid. At that time students paid \$101 for books and uniforms, but tuition was free (St. Luke's Hospital School of Nursing, 1945). Some of these students were members of the United States Cadet Nurse Corps, which had been established in 1943. By August 1944, 55 students at St. Luke's Hospital School of Nursing were cadets (Bealer, 1944).

Gradually, tuition was increased. From 1948 through 1954, tuition and fees totaled \$375 for the three years of school (St. Luke's Hospital School of Nursing, 1948, 1949, 1951, 1954). By 1969, the last year when a three-year program was offered, the tuition and fees amounted to \$2,855. Books and uniforms were excluded from this sum (St. Luke's Hospital School of Nursing, 1969). By 1970, when the 21-month program was initiated, cost to the students, excluding books and uniforms, amounted to \$3,020 (St. Luke's Hospital School of Nursing, 1970). In 1974, room and board were no longer provided. Hence, tuition and fees fell back to a sum of \$1,346 for two academic years and an eight-week summer session (St. Luke's School of Nursing, 1974).

### Curriculum

The curriculum of the school of nursing at St. Luke's Hospital evolved gradually. It began as a simple, loosely structured design for teaching practical nursing lore to a few goal-oriented, mature women and progressed to a complex, scientifically based model taught by a variety of teachers to young adults preparing for a career.

Early years. Exactly what was taught in the curriculum of the very early years is unknown. The diploma, dated August 10, 1901, of the first graduate of St. Luke's Hospital, Mary S. McKerrigan, stated she had been:

a pupil nurse in this hospital for the full period of two years, during which time she has had large experience of all sorts of medical, surgical and obstetrical nursing under the care and supervisory instruction of its staff of graduate

physicians and nurses, and has showed herself in character, skill, reliability and physical endurance worthy of an honorable Diploma. (August 10, 1901)

Since pupil nurses performed private duty in homes during the first two years of this program, and because the great majority of women delivered at home at the turn of the century, it is probable that most of Mrs. McKerrigan's obstetrical nursing experience was acquired during home deliveries and confinements (McCabe, 1930). Regardless of what her learning experiences were, the Michigan State Board of Registration of Nurses granted her, without examination, license number 1,253 to practice as a Registered Nurse on October 25, 1912 (Michigan State Board of Registration of Nurses, 1910-1914). The accounts of St. Luke's Hospital School of Nursing in McCabe (1930) reported that the textbooks used by pupil nurses during the early years were Isabel Adams Hampton's Nursing, Daniel E. Hughes's Practice of Medicine, Diane Clifford Kimber's Anatomy and Physiology, and Lavinia Dock's Materia Medica.

1910s. The school was accredited by the Michigan State Board of Registration of Nurses in 1910 (McCabe, 1930). Therefore, its curriculum must have been approved by that body, and it is likely that the school met the minimum curriculum standards promulgated by the Michigan State Board of Registration of Nurses in 1911. This curriculum included Hospital Housekeeping and a variety of nursing procedures during a probationary period, followed by a lecture course in the junior terms, which included eight hours of Materia Medica, six hours of Anatomy, six hours of Physiology, six hours of Hygiene and Sanitation, four hours of Dietetics, four hours of

Bacteriology, and three hours of Urinalysis. During the senior terms, according to this curriculum, pupil nurses should have received a minimum lecture course of six hours in each of the following: Surgical Nursing, Obstetric Nursing, Medical Nursing, and Nursing in Infectious Diseases. In addition, pupil nurses would have had four hours of lecture in Nursing of Sick Children, four hours of Nursing in Nervous Diseases, and two hours in Anesthetics during the senior terms (McCabe, 1930).

In 1915 the program at St. Luke's Hospital Training School for Nurses was lengthened to three years. At that time the courses in the curriculum were Anatomy, Physiology, Bacteriology, Laboratory Work, Dietetics, Practical Nursing, Nursing Ethics, Materia Medica, Obstetrics, Diseases of Children, Infectious Disease, Tuberculosis, Eye and Ear, and Anesthesia (St. Luke's Hospital, 1915). The course in Anesthesia reflected the minimum curriculum promulgated by the nursing board in 1911, while Practical Nursing, Ethics, and Eye and Ear were elements of the model curriculum designed by nurses on the nursing board and circulated in 1914 to superintendents of schools of nursing. The model curriculum of 1914 had a total of 340 hours allocated as follows: Materia Medica, 24 hours; Anatomy and Physiology, 40 hours; Dietetics, 36 hours; Bacteriology, 15 hours; Chemistry, 6 hours; Obstetrics, 20 hours; Children's Diseases, 18 hours; Communicable Diseases, 6 hours; Eye, Ear, Nose and Throat, 10 hours; Ethics, 12 hours; Practical Nursing, 74 hours; Surgery, Surgical Nursing, Gynecology, Orthopedics, and Operating Room

Technique, 25 hours; Nervous and Mental Diseases, 10 hours; Medical Diseases, 22 hours; and Advanced Subjects, 10 hours.

How teaching about surgical nursing and the various surgical conditions occurred at St. Luke's Hospital Training School for Nurses was not reported. Likewise, how Hygiene, Mental Disease, Nervous Disorders, or medical conditions and the required nursing were taught was not recorded. Nevertheless, the minimum curriculum promulgated by the Michigan State Board of Registration of Nurses in 1911 required that those subjects be taught. Therefore, those subjects probably were taught as part of another course; e.g., Surgery might have been discussed with Anesthesia, and Medical Nursing might have been subsumed in Tuberculosis, or both could have been discussed in Practical Nursing. Whatever the case, Surgery became part of the curriculum at St. Luke's Hospital Training School for Nurses in 1916 (St. Luke's Hospital, 1916). There it remained until 1936, when it became known as Surgical Nursing (St. Luke's Hospital, 1936). In 1919 Hygiene and Medical Diseases were added to the curriculum (St. Luke's Hospital Training School, 1919). Nervous conditions, mental disorders, and the nursing involved finally emerged as a course in the curriculum in 1931 (St. Luke's Hospital, 1931).

In 1918 an affiliation with Children's Free Hospital of Detroit was initiated "as a condition of State Registration" (St. Luke's Hospital, 1919, p. 4). Affiliations, for one clinical experience or another, continued from that time until 1970. The "condition of State Registration" referred to a 1915 rule of the Michigan State

Board of Registration of Nurses, which stipulated that if a training school could meet only minimum requirements of the board, satisfactory supplemental training had to be arranged to justify a three-year curriculum (McCabe, 1930).

The curriculum of 1919, as seen in Table 6, changed little from earlier curricula, but as St. Luke's had no instructor to teach a part of the curriculum, i.e., Dietetics and the biology courses, these courses were taught at the neighboring institution, Northern State Normal School. This action complied with the Michigan State Board of Registration of Nurses' 1919 ruling that a competent person was required to have charge of all classwork (McCabe, 1930). At its January 5, 1920, meeting, the state board of nursing recorded its support for this arrangement at St. Luke's Hospital Training School for Nurses (Moore, 1920-1921).

The curriculum of 1919 had a total of 297 hours of classroom instruction. These lectures and demonstrations were usually held in the afternoon. First-year students were offered 132 hours comprised of Dietetics, 15 hours; Materia Medica, 20 hours; Anatomy and Physiology, 10 hours; Nursing, 50 hours; Bacteriology, 15 hours; Hygiene, 10 hours; Ethics, 6 hours; and Chemistry, 6 hours. Second-year students had 103 hours of class divided into Obstetrics, 24 hours; Surgery, 15 hours; Anatomy and Physiology, 12 hours; Medical Diseases, 20 hours; Dietetics, 12 hours; and Practical Nursing, 20 hours. The remaining 62 hours came in the third year as 24 hours of Children's Diseases; 10 hours of Surgery; 6 hours of Communicable

and Infectious Diseases; 12 hours of Ear, Eye, Nose and Throat; and 10 hours of Urinalysis (St. Luke's Hospital Training School, 1919).

Table 6.--Curriculum at St. Luke's Hospital Training School for Nurses, 1919.

Year	Course	Hours of Instruction
First	Dietetics	15
	Materia Medica	20
	Anatomy & Physiology	10
	Nursing	50
	Bacteriology	15
	Hygiene	10
	Ethics	6
	Chemistry	6
Hours in First Year		132
Second	Obstetrics	24
	Surgery	15
	Anatomy & Physiology	12
	Medical Diseases	20
	Dietetics	12
	Practical Nursing	20
Hours in Second Year		103
Third	Children's Diseases	24
	Surgery	10
	Communicable & Infectious Diseases	6
	Eye, Ear, Nose & Throat	12
	Urinalysis	10
Hours in Third Year		62
Total Hours		297

Each nurse spent three months as a probationer. If she was accepted as a nurse following that testing period, she served the remainder of the three years in the following areas: six months

each on the medical and surgical wards and on night duty and three-month periods in the diet kitchen, the obstetric ward, the operating room, at Children's Free Hospital, and, as a senior student, in charge of a department. During the experience on the obstetric ward, students were expected to attend 15 to 20 deliveries, and in the operating room each student assisted at 20 major surgeries and 29 minor cases. Day duty during these experiences was nine hours, while night duty stretched to ten hours. Classes were fitted into the three free hours of the day. Two weeks of vacation were scheduled, and each student nurse was allocated three to four hours of free time each Sunday, with an additional one half-day each week whenever possible (St. Luke's Hospital Training School, 1919).

1920s. During the next decade no major changes in curriculum occurred, although some modifications were made to maintain the accreditation of the school. The changes involved affiliations. First, in 1923 the association with Children's Free Hospital was extended by a month so public health and social service could be included (St. Luke's Hospital, 1923). Then, in 1928 the affiliation with Children's Free Hospital was discontinued and two three-month affiliations with two different agencies were contracted. One of these was arranged with Herman Keifer to provide experience in nursing care of people with communicable diseases; the other was arranged with Grace Hospital so student nurses could have a six-week experience in the diet kitchen and six weeks on the medical wards (St. Luke's Hospital, 1928). These changes complied with standards



for accredited schools of nursing set by the Michigan Board of Registration of Nurses and Trained Attendants in 1925 (McCabe, 1930).

The standards of 1925 raised lecture and recitation time to 480 hours and made other demands about the types of services available at hospitals operating schools of nursing. The 480 hours of class time were apportioned as follows: 105 hours in Principles of Nursing with Housekeeping and Bandaging; 60 hours in Dietetics and Diet and Disease; 45 hours in Anatomy and Physiology; 30 hours of Materia Medica with Drugs and Solutions; 30 hours in Bacteriology; 30 hours in History and Ethics of Nursing; 30 hours of Medical Nursing and Communicable and Skin; 30 hours in Surgical, Orthopedic, Gynecological, Eye, Ear, Nose and Throat Nursing; 30 hours in Obstetrical and Prenatal Hygiene; 15 hours in Psychology and Mental Hygiene; 15 hours of Hygiene and Sanitation; 15 hours of Pediatrics and Infant Feeding; 15 hours in Emergency and First Aid; 15 hours in Pathology and Urinalysis; and 15 hours in Modern Social and Health Movements and Professional Problems (Michigan Board of Registration of Nurses and Trained Attendants, 1925). Standard I, which dealt with the size of the hospital and the services offered by the hospital, stipulated that if the patient census averaged fewer than 50 patients per day, student nurses must affiliate for not less than six months, and the affiliation must be approved by the Board of Registration of Nurses (Michigan Board of Registration of Nurses and Trained Attendants, 1925). Moreover, an experience of at least one month's service in a diet kitchen was required for each

student, and service in Special Duty, Contagious and Tuberculosis Nursing, Psychiatry, Hydrotherapy, and Massage was recommended. Although St. Luke's Hospital met the requirements in medical, surgical, operating-room, obstetric, and pediatric services, it did not have an average daily patient census of at least 50 patients. The small hospital, likely, did not have sufficient special diets to support giving each student nurse at least one month's experience in the diet kitchen. These deficiencies were noted by members of the Michigan Board of Registration of Nurses and Trained Attendants, and at their May 22, 1928, meeting means of correcting the inadequacies were formulated and forwarded to the school (Moore, 1921-1928). The school complied and remained accredited by the Board of Registration of Nurses and Trained Attendants.

1930s. The curriculum reported to the Michigan Board of Registration of Nurses and Trained Attendants in 1931 contained 950 hours of lecture and recitation, as shown in Table 7. In the first term, 345 hours were offered as follows: 50 hours of Anatomy and Physiology, 90 hours of Principles and Practice of Nursing, 30 hours of History of Nursing, 30 hours of Dietetics, 30 hours of Drugs and Solutions, 45 hours of Bacteriology, 15 hours of Personal Hygiene, 10 hours of Ethics, and 45 hours of Chemistry. In the second term the curriculum showed 160 hours: an additional 40 hours of Anatomy and Physiology, 30 hours of Advanced Nursing, 30 hours of Psychology, 30 hours of Materia Medica, 15 hours of Massage, and 15 hours of Operating Room Technique. The third term contained 180

Table 7.--Curriculum at St. Luke's Hospital Training School for Nurses, 1931.

Term	Course	Hours of Instruction	
First	Anatomy & Physiology	50	
	Principles & Practice of Nursing	90	
	History of Nursing	30	
	Dietetics	30	
	Drugs & Solutions	30	
	Bacteriology	45	
	Personal Hygiene	15	
	Ethics	10	
	Chemistry	45	
	Term		345
Second	Anatomy & Physiology	40	
	Advanced Nursing	30	
	Psychology	30	
	Materia Medica	30	
	Massage	15	
	Operating Room Technique	15	
	Term		160
Third	General Medical Diseases	30	
	General Surgical Diseases	30	
	Obstetrical Nursing	30	
	Diet in Disease	30	
	Pediatrics	30	
	Psychiatry & Mental Hygiene	30	
	Term		180
Fourth	Communicable Diseases (Includes TB)	90	
	Pathology	15	
	Term		105
Fifth	Public Sanitation	10	
	Orthopedics	15	
	Pediatrics	30	
	Term		35
Sixth	Gynecology & Urology	15	
	Eye, Ear, Nose & Throat	15	
	First Aid	15	
	Public Health	30	
	Professional Problems	30	
	Term		105
Total Hours in Curriculum			950

hours distributed as 30 hours of General Medical Diseases, 30 hours of General Surgical Diseases, 30 hours of Obstetrical Nursing, 30 hours of Diet in Disease, 30 hours of Pediatrics, and 30 hours of Psychiatry and Mental Hygiene. The fourth term continued with 90 hours of Communicable Disease, which occurred at Herman Keifer Hospital while student nurses affiliated there. During that term 15 hours of Pathology lectures also occurred. During the fifth term, student nurses had 10 hours of instruction in Public Sanitation, 15 hours in Orthopedics, and another 30 hours of Pediatrics for a total of 55 hours of instruction. The last term contained 105 hours of instruction divided as Gynecology and Urology, 15 hours; Eye, Ear, Nose, and Throat, 15 hours; First Aid, 15 hours; Public Health, 30 hours; and Professional Problems, 30 hours.

Practical experience in the 1931 curriculum consisted of four months of Elementary Nursing in the first year. Some of this time was spent on the surgical wards and some on the medical wards. This experience counted toward the total of 48 weeks reportedly spent in nursing people with medical diseases, and the 32 weeks spent in caring for patients who had had surgery. Six months of the second year were spent at Herman Keifer Hospital in Detroit, where student nurses gained experience in Diet Kitchen, Contagious Disease, and Obstetrics. Students had one month's vacation each year, so the remaining five months of the second year were occupied at St. Luke's Hospital, where each student nurse experienced seven weeks in the operating room while the remaining 15 weeks of the year were spent in gathering experience on the medical, surgical, obstetric, or

children's wards. During the third year student nurses worked on the obstetric, pediatric, medical, and surgical wards. In this fashion each student received a minimum experience of 12 weeks Obstetrical Nursing, 32 weeks Surgical Nursing, 48 weeks Medical Nursing, and night duty of 180 nights during the three-year program (St. Luke's Hospital Training School for Nurses, 1931).

Very little change occurred in the curriculum throughout the 1930s. The affiliation for Communicable Disease and Tuberculosis with Herman Keifer Hospital in Detroit continued through 1935 (St. Luke's Hospital Training School, 1935). However, the affiliation for experience in the diet kitchen was discontinued in 1933, when that experience could be provided at St. Luke's Hospital. In the same year an affiliation with the hospital of the University of Michigan was started for six weeks' experience in Gynecologic Nursing and six weeks' experience in Orthopedic Nursing (St. Luke's Hospital, 1933). The affiliation in Gynecologic Nursing lasted many years, but by 1936 Orthopedic Nursing was taught at St. Luke's Hospital. Instead, students affiliated at the hospital of the University of Michigan for broader experience in caring for people with surgical conditions (St. Luke's Hospital, 1936). The affiliation at Herman Keifer Hospital was discontinued at the end of 1935, and experience in Communicable Diseases was provided at St. Luke's Hospital in 1936 (St. Luke's Hospital, 1936).

Although the courses taught changed little, there was fluctuation in the hours reported as being spent in the classroom.

The greatest change occurred when the 966 hours of classroom instruction reported to the Michigan Board of Registration of Nurses and Trained Attendants in 1935 dropped to the 820 hours disclosed in the hospital's annual report of 1936. Two courses were not mentioned as taught in 1936, according to the hospital's annual report. The discontinued courses were two third-year courses, Hygiene and Sanitation, with 30 hours of instruction, and First Aid, which occupied six hours (St. Luke's Hospital, 1936). A greater loss of instructional time, however, occurred in Communicable Disease. That course was reduced from 119 hours in 1935 to 30 hours in 1936 (St. Luke's Hospital Training School, 1935). Instruction in Principles of Nursing was cut by 25 hours. There was no change in instructional time in ten courses, and the time allocated to seven courses was increased. In addition, two courses opened in 1936. They were Massage, which claimed 15 hours of instruction, and Public Health, which was also taught in 15 hours (St. Luke's Hospital, 1936).

Practical experience in nursing provided student nurses was reported only in the 1931 and 1935 reports to the Michigan Board of Registration of Nurses and Trained Attendants. Time apportioned to most of the experiences in 1935 varied little from that reported in 1931. The time allotted to experience in Elementary Nursing, Children's Diseases, Operating Room, Diet Kitchen, Obstetrical Nursing, Contagious Disease, and Night Duty in 1935 was the same as in 1931 (St. Luke's Hospital Training School for Nurses, 1935). In 1935 experience in Eye, Ear, Nose and Throat was reported as 30 to

40 days. Time allotted to Orthopedics was similar (St. Luke's Hospital Training School for Nurses, 1935). A major change occurred in the time reportedly allocated to nursing people with medical and surgical conditions. The 1931 report to the Michigan Board indicated that experience in Surgical Nursing occurred in 32 weeks, and experience in Medical Nursing was acquired during 48 weeks (St. Luke's Hospital Training School for Nurses, 1931). The 1935 report to that agency stated that experience in Medical Nursing amounted to 120 days in three years, and experience in Surgical Nursing totaled 125 days in three years (St. Luke's Hospital Training School, 1935). Experience in Medical Nursing was reduced by 216 days, while in Surgical Nursing experience was cut by 99 days. Vacation time was unchanged.

The 1936 Report to the Michigan Board of Registration of Nurses indicated that after the first semester student nurses were scheduled for a 50-hour week of experience and classes. They were introduced gradually to this rigorous schedule in the first semester. No duty was scheduled for the first two weeks, but from the third week through the second month probationers were scheduled for 12 hours of duty each week. Then, from the third month to the end of the first semester, students spent 28 hours a week acquiring experience (St. Luke's Hospital Training School for Nurses, 1936). Experience on night duty began in the second semester. Three blocks of night duty occurred during the three years. Each block of night duty encompassed at least four weeks. There were no nights

scheduled free during a block of night duty. Hence, while a week of day duty and class amounted to 50 hours, a week of night duty, not counting class time, amounted to 56 hours. In 1936 a shift of duty was reported as eight hours (St. Luke's Hospital Training School, 1936).

1940s. According to the annual report of 1940, the hours of instruction in the curriculum had increased to 955. Ethics was no longer taught. Other courses not taught in 1940 were Advanced Principles of Nursing, Pathology, Bandaging, and Urology. The 80 hours of instruction freed by discontinuation of those five courses were consumed in five new courses. They were Sociology, which required 15 hours; Social Problems in Nursing, which also was taught for 15 hours; Diseases of the Eye, which claimed 10 hours; Professional Adjustments II, which took 30 hours of instruction; and First Aid, which was restored to the curriculum with 10 hours of instruction. The amount of instruction in eight courses was unchanged, while in five courses the instruction was reduced by a total of 40 hours. For 11 courses, however, instructional time increased a total of 215 hours (St. Luke's Hospital, 1940).

The 1941 report to the Michigan Board of Registration of Nurses and Trained Attendants showed a total of 1,082 hours of classroom instruction in the curriculum. This gain of 87 hours occurred although Personal Hygiene, Social Problems in Nursing, and Diseases of the Eye were dropped from the curriculum, removing 40 hours of instruction. Bandaging and Binders, which required 15 hours, was the only course added to the curriculum, but ten courses increased



in instructional time by a total of 112 hours. The three-month affiliation with the hospital of the University of Michigan for Surgical Nursing experience and Gynecology continued.

Nursing practice provided for students in the curriculum of 1941 was reported in a range from a minimum to maximum number of days accumulated on each service throughout the three years of schooling. All students who graduated in 1941 reportedly had experienced 150 days in Medical Nursing and 240 days in Surgical Nursing. The minimum number of days accumulated in Obstetric Nursing was 120, while the maximum experienced by a graduating student was 135 days. The minimum number of days of training in Pediatric Nursing was 90 and the maximum was 120 days. Experience in Orthopedic Nursing ranged from 60 to 90 days and in the operating rooms from 70 to 90 days. In the diet kitchen the time aggregate ranged from 28 to 48 days. Experience in Communicable Disease Nursing totaled 60 days, while experience in the outpatient department amounted to 28 days. Time on night duty was reported as "about five months" during the three-year program (St. Luke's Hospital Training School, 1941).

A day duty was eight hours in length, and a week of days contained 52 hours. This schedule included some of the class periods. Night duty was reported as eight and one-half hours, and a week of night duty contained 57 hours, excluding class time (St. Luke's Hospital Training School, 1941).

Class hours, exclusive of six months of affiliation, reported in 1942 to the Michigan Board of Registration of Nurses and Trained Attendants amounted to 1,141 hours. The increase of 59 hours resulted from a series of changes, which included the addition of five new courses totaling 136 hours of instruction, the reduction of a total of 127 hours in ten courses, and increasing the instructional time in seven courses by 50 hours. The new courses were Nursing Arts II, Introduction to Medical Science, Public Sanitation, Social Aspects of Nursing (which had been deleted the previous year), and Diseases of the Eye. This course also had not been taught in 1941. The report to the Michigan Board of Registration of Nurses and Trained Attendants for 1942 separated hours of lecture and recitation from laboratory instruction for the first time. It showed 279 hours of instruction in laboratory demonstrations and 862 hours in lecture and recitation classes.

The affiliation for Gynecological Nursing at Ann Arbor continued, but in 1942 the affiliation for Surgical Nursing was shifted to an affiliation for Medical Nursing. An additional three-month affiliation for Obstetric Nursing began in 1942 at Women's Hospital in Detroit. Microbiology, Chemistry, Psychology, and Sociology were reported as taught at Northern Michigan College of Education. The relationship between the college and the school of nursing, which had been suspended after World War I, was resumed at this time.

Nursing practice days, which were provided for students during the three years of their schooling, were reported in ranges of

minimum to maximum. The number of days of practice reported in Medical Nursing ranged from 71 to 148. In Surgical Nursing practice the report for 1942 showed a minimum of 113 days of practice and a maximum of 176 days. In Obstetric Nursing the minimum time allocation was 76 days and the maximum was 173 days. In Pediatric Nursing the distribution of practice days shifted from a minimum of 76 days to a maximum of 196 days. In Communicable Disease Nursing the minimum practice was 21 days; the maximum was 79 days. In Orthopedic Nursing the minimum time aggregate was reported as 78 days and the maximum as 148 days. In Eye, Ear, Nose and Throat Nursing the minimum practice time was 7 days, and the maximum was 46 days. Service in the operating room tallied a minimum of 56 days, while the maximum was reported as 81 days. Minimum practice in the diet kitchen amounted to 42 days, while the maximum reported was 62 days. Experience on evening duty ranged from 35 to 138 evenings, while night-duty experience was reported as ranging from a minimum of 100 nights to a maximum of 190 nights during the three years (St. Luke's Hospital School of Nursing, 1942).

The hours during a week of day duty amounted to 44 and included class time. Student nurses were given two half days off each week during day duty. A week of night duty was reported as 44 hours in length, but class time was additional. Two half nights were scheduled as free during a week of night duty according to the 1942 report to the Michigan Board of Registration of Nurses and Trained Attendants. Day duty hours were reported as "broken"; i.e., a

student was scheduled on duty from 7:00 a.m. to 1:00 p.m. and again from 4:00 p.m. to 7:00 p.m. (St. Luke's Hospital School of Nursing, 1942).

Although the curriculum changed little, the hours of instruction reported for 1944 increased by 298.5 hours to 1,439.5 hours. This increase occurred because of a series of actions, which included the addition of 30 hours of instruction in Ward Teaching and 45 hours in Physical Education, both new courses; a reduction of 102 hours of instruction in a total of eight courses; the deletion of Social Aspects of Nursing, a course that had been added in 1942; and the addition of 325.5 hours distributed among 17 courses. The report to the Michigan Board of Registration of Nurses and Trained Attendants indicated that instruction in Obstetric Nursing increased by 70 hours and that 78 hours of instruction had been added in Nursing Arts. Thus, offerings in clinical nursing courses accounted for much of the increase in instructional hours (St. Luke's Hospital School of Nursing, 1944).

Affiliations for Gynecologic Nursing and Medical Nursing continued at Ann Arbor, as did the affiliation at Women's Hospital in Detroit for Obstetric Nursing.

Nursing practice time continued to be reported in the minimum and maximum number of days of practice throughout the three years' schooling on each service. For 1944 St. Luke's Hospital Training School for Nurses reported to the Michigan Board of Registration of Nurses and Trained Attendants that the minimum number of days of service in Medical Nursing was 110 while the maximum was 183. In

Diet Kitchen the minimum was 30 and the maximum was 60 days. In Surgical Nursing the minimum period of service was 77 and the maximum was 159. The minimum number of days practiced in the operating rooms was 56 while the maximum was 62. The minimum of Obstetric Nursing practice was reported as 100 days while the maximum was 190 days. In Pediatric Nursing the minimum time allocation was 120 while the maximum was 232. The minimum time spent in the formula laboratory was reported as 15 days while the maximum time spent was 21 days. In Communicable Disease Nursing the time aggregate ranged from 14 to 60 days. Practice in Orthopedic Nursing ranged from a minimum of 90 days to a maximum of 160 days, and in Eye, Ear, Nose and Throat Nursing the range was 30 to 39 days. In the outpatient department the minimum practice time was 14 days and the maximum was 30 days. Experience on evening duty ranged from 90 to 120 evenings, while on night duty the minimum experience reported was 129 nights and maximum was 164 (St. Luke's Hospital School of Nursing, 1944).

The number of hours in a week of day duty experience remained 44, and class time continued to be included. A week of night duty was reported as 44 hours, but class time was excluded from the accounting. Day duty continued as broken time, with the shift beginning at 7:00 a.m. and continuing to 1:00 p.m., at which time three hours of free time occurred. This free time was followed by three hours of duty from 4:00 p.m. to 7:00 p.m. (St. Luke's Hospital School of Nursing, 1944).

Instructional hours increased again in 1945. The report to the Michigan Board of Registration of Nurses and Trained Attendants showed a total of 1,490 hours of instruction in the curriculum in 1945. This was an increase of 50.5 hours over the previous year. A course in Urologic Nursing and another called Health in the Family were added. These accounted for 29 hours of instruction. Seventeen courses gained a total of 200 hours, but 133.5 hours of instruction were cut from a total of 10 courses, and two courses, Bandaging and Community Hygiene, with 45 hours of instruction were deleted. Foods and Nutrition, which had been added to the list of courses taught at Northern Michigan College in 1944, raised the total number of courses taught at the college to five. Affiliations for Medical and Gynecologic Nursing continued at the hospital of the University of Michigan. The new course in Urologic Nursing was also taught in Ann Arbor. The affiliation for Obstetric Nursing at Women's Hospital in Detroit continued (St. Luke's Hospital Training School, 1945).

The report of the amount of nursing practice provided in the curriculum indicated that in Medical Nursing the minimum number of days was 85 and the maximum was 172. In Surgical Nursing the range of practice days started with a minimum of 122 days and concluded with a maximum of 217 days. In the diet kitchen the minimum number of days served was 28 and the maximum was 59. No fewer than 56 days were served in the operating rooms and no more than 62. The minimum number of days of practice in Obstetric Nursing was 92; the maximum was 200. In Pediatric Nursing the minimum length of experience was 109 days and the maximum was 173. The minimum time

allotted to the formula laboratory was 14 and the maximum was 18. Anywhere from 12 to 94 days were served in Communicable Disease Nursing. While the minimum time of practice in Orthopedic Nursing was 49 days, the maximum was 222 days. In Eye, Ear, Nose and Throat Nursing the length of practice varied from 14 days to 20. The amount of evening duty varied from a minimum of 32 evenings to a maximum of 203. The minimum time served on night duty was 44 nights and the maximum was 185. The length of the week on day duty was 48 hours. This included class time. On evening duty, likewise, there were 48 hours in a week. A week of night duty, too, totaled 48 hours, but class time was not included as it was on days and evenings (St. Luke's Hospital School of Nursing, 1945).

By 1948 the curriculum had been reduced to 1,197 instructional hours. Ward Teaching and Health in the Family were discontinued, with a loss of 52 hours of instruction. The instructional time in 20 courses was reduced, cutting 378 hours from the curriculum. On the other hand, three new courses, i.e., Community Health, Chest Surgery and Tuberculosis, and Disease of the Skin, were opened. These three courses added 25 hours to the curriculum. Moreover, instructional time in 11 courses was increased. This added 112 hours to the curriculum. These changes produced a net reduction of 293 hours from the curriculum offered in 1945 (St. Luke's Hospital School of Nursing, 1948).

For the first time, Anatomy and Physiology were offered as separate courses. They were taught at Northern Michigan College of

Education along with Microbiology, Foods and Nutrition, Chemistry, Psychology, and Sociology. Affiliation for Medical Nursing, Gynecologic Nursing, and Urologic Nursing continued at the hospital of the University of Michigan. The affiliation in Obstetric Nursing at Women's Hospital in Detroit also remained unchanged (St. Luke's Hospital School of Nursing, 1948).

Clinical experience continued to be reported as minimum and maximum time served on the various units of hospitals by graduating seniors. The report to the Michigan Board of Registration of Nurses and Trained Attendants for 1948 showed that students graduating that year from St. Luke's Hospital School of Nursing served no fewer than 128 days in Medical Nursing and no more than 229 days. No fewer than 42 days were spent in the diet kitchen and no more than 49 days. In Surgical Nursing the minimum length of clinical experience was 88 days and the maximum was 213 days. Minimum experience in the operating room accounted for 56 days, while the maximum clinical practice was 71 days. In Gynecologic Nursing the experience ranged from 13 to 33 days, while in Urologic Nursing the range of clinical experience was 13 to 18 days. The minimum number of days of Orthopedic Nursing was 63 days and the maximum was 122 days. Eye, Ear, Nose, and Throat Nursing occupied anywhere from 2 to 82 days of clinical practice. The minimum clinical experience in Obstetric Nursing was 83 days and the maximum was 114 days. Pediatric Nursing occupied from 45 to 141 days. In Communicable Disease Nursing the minimum clinical experience amounted to 35 days while the maximum was 110 days. Clinical practice in the formula laboratory amounted



to six days, and experience in Tuberculosis Nursing totaled 19 days. Clinical experience in the outpatient department occurred in 43 days (St. Luke's Hospital School of Nursing, 1948).

Clinical experience on evening duty ranged from 22 to 151 evenings during three years. Practice on night duty ranged from 92 to 143 nights during the second and third years of schooling. The report filed with the Michigan Board of Registration of Nurses and Trained Attendants in 1948 indicated that a week of clinical experience amounted to 48 hours including class time, regardless of whether day, evening, or night duty was involved.

In 1949 the curriculum decreased to 1,195 hours of instruction. A series of shifts within the curriculum produced this change. Public Health, Orthopedic Nursing, Community Health Nursing, First Aid Nursing, and Nursing in Skin Diseases, accounting for 86 hours of instruction, were discontinued. Nursing in Venereal Diseases was opened as a new course with three hours of instruction, and 12 courses in the curriculum gained a total of 81 hours. The affiliations with the hospital of the University of Michigan for Medical and Urologic Nursing were discontinued during 1949, but the affiliation for Gynecologic Nursing continued, as did the affiliation with Women's Hospital in Detroit for Obstetric Nursing (St. Luke's Hospital of Nursing, 1949).

The amount of clinical experience reported to the Michigan Board of Registration of Nurses and Trained Attendants continued to be expressed as a range from minimum to maximum days of service,

accumulated by graduating seniors, on various hospital units during the entire program. The minimum number of days of clinical experience in Medical Nursing was 127 and the maximum was 199 days. Practice in the diet kitchen ranged from 42 to 50, while in Surgical Nursing the minimum clinical nursing experience was 85 days and the maximum amounted to 148 days. Time spent in the operating rooms ranged from 57 to 133 days. The minimum number of days practiced in Gynecologic Nursing was 14 and the maximum was 16. The same range applied in Urologic Nursing, but in Orthopedic Nursing clinical experience ranged from 64 to 139 days. The minimum time spent in Obstetric Nursing was 84 days; the maximum was 116 days. In Pediatric Nursing minimum experience accounted for 81 days, while maximum experience amounted to 149 days. In Eye, Ear, Nose and Throat Nursing no graduating senior had fewer than three days' clinical experience, while the maximum was 74 days. Practice in the formula laboratory ranged from two to five days and in Communicable Disease Nursing from 48 to 86 days. The experience in the outpatient department totaled 26 days (St. Luke's Hospital School of Nursing, 1949).

Experience on evening duty ranged from 99 to 222 evenings during the three years. Practice on night duty occurred during the second and third years of the program. The minimum number of nights experienced by graduating seniors was 40 and the maximum was 132. The clinical experience week was reduced to five and one-half days and 44 hours in 1949. This applied regardless of the shift, and it included class hours (St. Luke's Hospital School of Nursing, 1949).

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1950s. By 1951 the hours of instruction in the curriculum had increased to 1,318.5 hours. Two courses, Public Health and Orthopedics, were re-introduced into the curriculum, adding 61 hours. A series of shifts within the courses in the curriculum resulted in six courses losing a total of 104 hours while another 14 courses gained a total of 166.5 hours. An affiliation in Psychiatric Nursing, which had been started in 1950 at Winnebago State Hospital near Oshkosh, Wisconsin, continued, as did the affiliation with Women's Hospital for Obstetric Nursing. However, all Medical and Surgical Nursing classes and experiences were located at the home school according to the 1951 report to the Michigan Board of Registration of Nurses and Trained Attendants.

Clinical experience reported for graduating seniors showed a range of 135 to 165 days of practice in Medical Nursing and 93 to 111 days of experience in Surgical Nursing. Obstetric Nursing experience ranged from 84 to 107 days, while Pediatric Nursing experience varied from 92 to 102 days. Seniors had practiced from 57 to 105 days in the operating rooms and from seven to eight days in a formula laboratory. Orthopedic Nursing experience was reported as ranging from 70 to 114 days. Experience in Eye, Ear, Nose and Throat Nursing ranged from a minimum of 9 days to a maximum of 27 days. In practice in the outpatient service seniors had accumulated 20 or 21 days. In Communicable Disease Nursing the minimum number of days practiced was 91 and the maximum was 115 days. Each senior had also practiced Psychiatric Nursing for 91 days. This experience

demonstrated one of the first attempts to equalize the length of practice time in clinical nursing areas (St. Luke's Hospital School of Nursing, 1951).

Evening and night duty experiences were confined to the second and third years of the program. The accumulated practice on evening duty ranged from a minimum of 104 evenings to a maximum of 162 evenings. Night duty experience ranged from 5 nights to 39 nights. The duty week continued to have 5.5 days or 44 hours. These hours, regardless of shift, included class time (St. Luke's Hospital School of Nursing, 1951).

By 1954 the number of hours in the curriculum had increased to 1,510. Nursing Arts II and Massage, which together accounted for 51 hours, were no longer taught in 1954 according to the report to the Michigan Board of Nursing. No new courses opened in 1954. Instead, the increase in hours of instruction resulted from adjustments within the curriculum. Eight courses increased instructional time by a total of 415 hours. The largest increase occurred in two courses, Nursing Arts and Medical and Surgical Diseases and Nursing. Instruction in Nursing Arts increased by 227 hours. In Medical and Surgical Diseases and Nursing, 102 hours were added. Seven courses reduced instructional time amounting to 172.5 hours (St. Luke's Hospital School of Nursing, 1951).

According to the report filed with the Michigan Board of Nursing in 1954, six courses were taught at Northern Michigan College of Education. All six, i.e., Anatomy and Physiology; Microbiology; Nutrition, Foods and Cookery; Chemistry; Psychology;



and Sociology, had been taught continuously at the college since 1948. Psychiatric Nursing was taught during an affiliation with Winnebago State Hospital in Wisconsin, and Obstetric Nursing continued to be taught at Women's Hospital in Detroit. All other courses were taught at St. Luke's Hospital.

The amount of clinical practice in each course that had accrued at graduation was reported to the Michigan Board of Nursing in 1954 as a range from minimum to maximum days on a service. The minimum experience in Medical Nursing was 117 days, the maximum 152. Minimum clinical experience in Surgical Nursing was 81 days, while the maximum was 116 days. In Obstetric Nursing the minimum time served was 104 days and the maximum was 125 days. The experience in Pediatric Nursing ranged from a minimum of 91 days to a maximum of 123 days. In Psychiatric Nursing all graduating seniors had either 91 or 92 days of clinical experience. Experience in Communicable Disease Nursing ranged from 85 to 105 days. Clinical practice in the operating rooms ranged from 56 to 89 days. In Orthopedic Nursing the minimum clinical experience accounted for 56 days, while the maximum amounted to 81 days. The minimum practice in the diet kitchen was 35 days and the maximum was 56. The clinical experience range in Gynecological Nursing was 11 to 24 days. All graduating seniors had practiced seven days in the formula laboratory and had visited in patients' homes one day with the Marquette City Visiting Nurse. The range of clinical experience among the graduating seniors in Eye, Ear, Nose and Throat Nursing spread from 5 to 24

days, and in the outpatient department the minimum amount of time accumulated was 16 days while the maximum was 27 days (St. Luke's Hospital School of Nursing, 1954).

Experience on evening duty accounted for a minimum of 70 evenings and a maximum of 147 evenings among the graduating seniors of 1954. Night duty amounted to a minimum of 23 nights and a maximum of 72 nights. A shift on days or nights lasted eight hours, and a week of these experiences accounted for 40 hours when class time was included (St. Luke's Hospital School of Nursing, 1954).

According to the school bulletin for 1957, the curriculum contained a total of 1,431 class hours and 123 weeks of clinical experience. This tally of clinical experience excluded activities during the initial pre-clinical period. Changes in class hours and courses from 1954 were evident. The ten-hour course in Case Studies was discontinued. Four courses requiring a sum of 40 instructional hours were opened. These courses were grouped together with four existing courses and taught under the rubric of Medical and Surgical Nursing Specialties. This amalgam accounted for 86 hours. Two courses were restored to the curriculum. They were Tuberculosis Nursing, which required 75 hours of instruction, and Emergency Nursing First Aid, which took 20 hours. Mental Hygiene, a 15-hour course, also opened. Other adjustments within the curriculum occurred. Eleven courses were reduced by a total of 293 hours, but seven other courses increased by a total of 74 hours (St. Luke's Hospital School of Nursing, 1957).

The course in Tuberculosis Nursing was taught during a six-week affiliation at Herman Keifer Hospital in Detroit. This affiliation occurred during the first semester of the third year. Likewise, the 13-week affiliation during which Psychiatric Nursing was taught occurred in the first semester of the third year. The affiliation for Psychiatric Nursing, however, had been moved to Kalamazoo State Hospital at Kalamazoo, Michigan, following 1954. The 13-week affiliation during which Obstetrical Nursing was taught fell into the second semester of the second year. Anatomy and Physiology, Chemistry, Microbiology, Foods and Dietetics, Introductory Sociology, and Psychology continued to be taught at Northern Michigan College (St. Luke's Hospital School of Nursing, 1957).

Progression through the theory portion of the curriculum, according to the bulletin for 1957, started with 567 class hours in the first semester. Of those hours 295 were spent in laboratory work, and the remaining 272 were involved with lecture and recitation. The second semester contained no laboratory performance but included 264 hours of lecture and recitation. The third semester contained 101 hours of instruction in Medical and Surgical Nursing Specialties and Mental Hygiene. Three courses, Communicable Disease Nursing, Obstetrical Nursing, and Pediatric Nursing, occupied the fourth semester and required 165 hours of lecture and recitation. During the fifth semester Psychiatric Nursing and Tuberculosis Nursing were presented for a total of 239 hours of

lecture and recitation. In the last semester four courses, Emergency First Aid Nursing, Nursing and Health Service in the Family, Professional Adjustments II, and Social Aspects of Nursing, were presented for a total of 95 hours (St. Luke's Hospital School of Nursing, 1957). The sequence of courses and hours in the curriculum of 1957 are displayed in Table 8.

According to the bulletin for 1958, no major changes occurred in the curriculum, and the instructional hours remained at 1,431, as in 1957. However, the sequence in which some courses occurred was changed. Introductory Sociology was moved into the first semester and Microbiology was moved to the second semester. A summer term was opened. During the summer term History of Nursing and Mental Hygiene were taught. The first semester's load was reduced by 51 hours, and the second semester's hours were increased by 36. Because of these changes the course work was a little more evenly distributed (St. Luke's Hospital School of Nursing, 1958).

The report to the Michigan Board of Nursing for 1959 indicated that total instructional hours had increased by 284 hours to 1,715 hours. The change resulted from adjustments within the curriculum. Seven of the small courses that had comprised the Medical and Surgical Nursing Specialties were integrated into one course called Medical and Surgical Nursing Specialties. This course was offered for 71 hours. Orthopedic Nursing was accorded independent status and required 34 hours. These two adjustments accounted for a loss of 68 hours. Seventy hours were added to Nursing Arts, and 59 were added to Tuberculosis Nursing. Another course, Medical and Surgical

Table 8.--Curriculum at St. Luke's Hospital School of Nursing, 1957.

Semester	Course	Hours		
		Lecture & Recitation	Laboratory	Total
First	Anatomy & Physiology	54	72	126
	Chemistry	36	36	72
	Microbiology	54	36	90
	Pharmacology I	15	15	30
	History of Nursing	15		15
	Introduction to Medical Sciences	15		15
	Nursing Arts	50	100	150
	Foods & Dietetics	18	36	54
	Professional Adjustments I	15		15
			Semester	567
Second	Medical & Surgical Nursing	90		90
	Diet Therapy	18		18
	Psychology	54		54
	Introductory Sociology	54		54
	Pharmacology II	30		30
	Operating Room Technique	18		18
			Semester	264
Third	Mental Hygiene	15		15
	Medical & Surgical Nursing Specialties:			
	Dermatology	6		6
	Endocrinology	5		5
	Gynecology	12		12
	Integumentary Systems	10		10
	Orthopedics	18		18
	Orthopedics	18		18
	Urology	10		10
	Eye	10		10
	Ear, Nose and Throat	15		15
			Semester	101
Fourth	Communicable Disease Nursing	30		30
	Obstetrical Nursing	90		90
	Pediatric Nursing	45		45
			Semester	165
Fifth	Psychiatric Nursing	164		164
	Tuberculosis Nursing	75		75
			Semester	239
Sixth	Emergency First Aid Nursing	20		20
	Nursing & Health Service in the Family	30		30
	Professional Adjustments II	30		30
	Social Aspects of Nursing	15		15
			Semester	95
Total Hours in Curriculum				1,431

Nursing, increased by 64 hours. Nine other courses in the curriculum increased by a total of 159 hours (St. Luke's Hospital School of Nursing, 1959).

Affiliations remained unchanged, except that any one of the three could occur during either the second or the third year of the program. The social and biologic sciences and nutrition continued to be taught at Northern Michigan College during the first year. Clinical practice continued to be reported as a range from the minimum to the maximum number of days accumulated on a service by graduating seniors during the three-year program. The minimum number of days experienced in Medical Nursing was reported as 105, while the maximum was 187. In Surgical Nursing the range of clinical experience reported was 52 to 153 days. Obstetric Nursing practice ranged from 85 to 141 days. In Pediatric Nursing no graduating senior had fewer than 63 days of clinical experience or more than 135 days. Seniors had accumulated from 49 to 112 days in the operating rooms and from 28 to 35 in the diet kitchen. Each senior had experienced 14 days in the formula laboratory and from 28 to 42 days in the outpatient department. In Tuberculosis Nursing the minimum clinical time was 39 days; the maximum reported was 49. In Communicable Disease Nursing no senior had practiced fewer than 26 days, and none had accumulated more than 37 days. All seniors had amassed 34 days in Urologic Nursing. Experience in Orthopedic Nursing ranged from 48 to 105 days, while in Eye, Ear, Nose and Throat Nursing it ranged from 1 day to 30 days. No senior had fewer

than two days' clinical practice in Gynecologic Nursing or more than 35 according to the 1959 report to the Michigan Board of Nursing.

Practice on evening duty accounted for a minimum of 65 evenings and a maximum of 100. Night duty experience ranged from a minimum of seven nights to a maximum of 58. Both evening and night duty experiences occurred during the second and third years of the program (St. Luke's Hospital School of Nursing, 1959).

1960s. The curriculum in 1961 had a total of 1,866 instructional hours, according to the school bulletin for that year. Part of the gain in hours occurred because Biology, with 108 hours, was added as a first-semester course. Microbiology shifted into the second semester. Anatomy and Physiology were separated into two courses. Each portion had 126 hours. Anatomy was taught in the first semester and Physiology in the second. In the first semester the courses taught were Biology, Anatomy, Chemistry, Fundamentals of Nursing, Professional Adjustments I, and Pharmacology. Microbiology was taught in the second semester along with Physiology, Fundamentals of Nursing, Introduction to Medical Science, and Introduction to Medical and Surgical Nursing. Introduction to Medical and Surgical Nursing was a new course with 20 hours of instruction. During the summer term Psychology, Sociology, and Medical and Surgical Nursing I were taught. Medical and Surgical Nursing I was a new course. It continued into the first semester of the second year and amounted to a total of 158 hours. Other new courses in the curriculum were Medical and Surgical Nursing II and Managerial Skills, a 15-hour course that was taught during the last

semester. Courses that were no longer taught were Communicable Disease Nursing, Orthopedic Nursing, and Public Health Nursing. These and other shifts in the curriculum accounted for the gain of 151 hours of instruction in the curriculum of 1961.

Clinical practice amounted to 156 weeks over the entire three-year program, according to the bulletin of 1961. Eighteen weeks of experience were provided in both Medical Nursing and Surgical Nursing. The pre-clinical period contained 39 weeks of various introductory clinical experiences. Pediatric Nursing, Obstetrical Nursing, and Psychiatric Nursing each was allocated 12-week segments of clinical practice. Ten weeks during the three years were allotted to vacation. An eight-week block of experience that encompassed four weeks in the operating rooms and two weeks each in the recovery and emergency rooms was required. Experience in the outpatient department amounted to six weeks, as did clinical experience in Tuberculosis Nursing. Orthopedic Nursing accounted for four weeks; so did practice in the diet kitchen. Another four weeks were spent during the last semester in an elective area of nursing. Managerial Skills, another third-year course, occupied three weeks of clinical experience in the role of charge nurse (St. Luke's Hospital School of Nursing, 1961).

By 1963 instructional hours in the curriculum had climbed to 3,404. The first semester of the program had changed again. Biology, Anatomy, Chemistry, Sociology, Professional Adjustments I, and Orientation to Nursing were taught for a total of 342 hours.



Orientation to Nursing was not assigned hours of instruction but met throughout the semester to acquaint the student with the hospital and nursing, according to the 1963 bulletin. During the second semester Physiology, Microbiology, Food and Dietetics, General Psychology, and Growth and Development were taught for a total of 396 hours. During the summer session 300 hours were devoted to Nursing Skills. Medical-Surgical Nursing I, Mental Hygiene, and First Aid were taught for 558 hours in the first semester of the second year. During the second semester of that year Pediatric Nursing I, Operating Room Nursing, and History and Trends of Nursing were taught. Hours of instruction that semester amounted to 540. The senior year was considered as a whole, rather than being divided into two semesters. During that third year 12 weeks of Psychiatric Nursing, 12 weeks of Obstetrical Nursing, and 6 weeks each of Pediatric Nursing II, Tuberculosis Nursing, Medical-Surgical Nursing II, and Managerial Skills were offered. The senior year accounted for 918 hours of instruction. The last segment of instruction occurred during a ten-week session in which Advanced Nursing Problems and History and Trends of Nursing II were taught in 350 hours (St. Luke's Hospital School of Nursing, 1963).

In this curriculum students were enrolled at Northern Michigan University during the first two semesters. The only courses taught at the hospital were Professional Adjustments I and Orientation to Nursing until the summer session, when Nursing Skills was taught at the hospital. During the second year, when clinical nursing theory was taught, students practiced that type of nursing in the hospital.

In this curriculum theory and practice occurred concurrently throughout the program. Thus, standardization of the length of experience in each clinical nursing area was achieved. During the senior year, students studied and practiced in the nursing specialties and were readied for entry into the profession (St. Luke's Hospital School of Nursing, 1963). This curriculum no longer followed a pattern of medical services. Instead, it was based on nursing problems and patients' needs and provided similar experiences for all students.

The curriculum was further re-designed in 1966, and instructional hours climbed to a peak of 3,774. Nursing courses were reduced from 16 to 9, but the instructional time in nursing courses rose from 2,684 hours in 1963 to 3,046 hours in 1966. The nursing courses offered in 1966 were Introduction to Nursing, Fundamental Skills of Nursing, Nursing Care of Adults I, Nursing Care of Adults II, Pediatric Nursing, Obstetric Nursing, Psychiatric Nursing, Managerial Skills in Nursing, and Senior Seminar in Nursing (St. Luke's Hospital School of Nursing, 1966).

In the clinical nursing courses, experience in the related field of nursing was provided at the same time the theory was taught in class. Thus, in the clinical nursing areas each student received the same length of experience; i.e., in Care of Adults I each student had an 18-week clinical experience caring for adult patients with medical and surgical conditions. Students' practice was expanded in the 18 weeks of Care of Adults II as they applied

advanced nursing skills and intervened to prevent problems. Likewise, a 12-week clinical practice was provided concurrently with classroom learning in Obstetric, Pediatric, and Psychiatric Nursing. A 12-week clinical practice also accompanied the theoretical component of Managerial Skills in Nursing. Senior Seminar was a 10-week course in which a student concentrated on an area of nursing, studying it conceptually, while practicing in that field in the clinical setting (St. Luke's Hospital School of Nursing, 1966).

Students continued to affiliate for Obstetric Nursing at Hutzel Hospital (formerly Women's Hospital). The affiliation for Psychiatric Nursing occurred at Ypsilanti State Hospital in 1966 instead of at Kalamazoo as in 1963. The affiliation with Herman Keifer had been discontinued. In 1966, as in 1963, all non-nursing courses were taught at Northern Michigan University. These courses, in 1966, amounted to 36 credit hours at the university and accounted for 728 instructional hours (St. Luke's Hospital School of Nursing, 1966).

By 1969 the curriculum design of nursing courses constructed on a foundation of physical, social, and biological sciences was firmly established, and the school was accredited by the National League for Nursing (St. Luke's Hospital School of Nursing, 1969). The nursing courses began with introductory courses in which basic nursing skills were learned. Then, the nursing program proceeded to courses that the faculty believed required advanced skill and greater knowledge (St. Luke's Hospital School of Nursing, 1969).

The bulletin stated that clinical learning experiences were selected so that classroom learning would be complemented (St. Luke's Hospital School of Nursing, 1969). The curriculum contained 3,566 hours of instruction. Non-nursing courses accounted for 814 hours of instruction. All these courses were placed in the first two semesters and the first summer session. Nursing courses accounted for 2,752 hours of instruction in the curriculum of 1969. That amounted to a reduction of 294 hours from the nursing courses in the curriculum of 1966 (St. Luke's Hospital School of Nursing, 1969).

The non-nursing courses continued to be taught at Northern Michigan University. They accounted for 36 hours of credit. Affiliations with Hutzel Hospital in Detroit and Ypsilanti State likewise continued (St. Luke's Hospital School of Nursing, 1969).

1970s. In 1970 the program was shortened to 21 months and was considered to be a technical program as explained in the philosophy and objectives of the school (St. Luke's Hospital School of Nursing, 1970). The school maintained its accreditation with the National League for Nursing. The curriculum began, as in the past, with emphasis on the biological and social sciences. The non-nursing courses were Human Anatomy, Sociology, Human Physiology, General Psychology, Microbiology, Humanities, and American Economy. These courses accounted for a total of 28 credit hours and 548 hours of instruction. Nursing courses began in the first semester with a course teaching basic nursing skills and concepts. Following that course were Parental and Child Health, Physical and Mental Illness I, Physical and Mental Illness II, Nursing Trends I,

Physical and Mental Illness III, and Nursing Trends II. Altogether these courses were valued at 44 credits, but those credits were not directly transferable to the university because they had been generated at a hospital school. The total hours of instruction in nursing courses amounted to 1,496 hours. The sequence of courses, credit hours, and hours of instruction are shown in Table 9. No affiliations with other hospitals occurred in this curriculum. All clinical learning experiences were planned to take place at the home school.

The curriculum discussed in the last bulletin of the school, printed in 1974, also had a total of 72 credits. Hours of instruction, however, had increased to 2,062. This 18-hour gain in instructional time came about through a reapportionment of laboratory and lecture time in Microbiology. Two other changes occurred. Modes of Discourse, a course in which writing skills were practiced, replaced Humanities, a course that focused primarily on literature, and Medical Sociology supplanted American Economy. All clinical learning experiences were planned to complement the classroom learning, which occurred concurrently. The only affiliation that continued in this last curriculum was that with Northern Michigan University, where 28 hours of credit in Human Anatomy, Sociology, Human Physiology, General Psychology, Modes of Discourse, Microbiology, and Medical Sociology were taught.

Table 9.--Curriculum at St. Luke's School of Nursing, 1970.

Semester	Course	Credit	Hours of Instruction	
First	Human Anatomy	4	90	
	Sociology	4	72	
	Fundamentals of Nursing	8	288	
	Semester		16	450
Second	Human Physiology	4	90	
	General Psychology	4	72	
	Parental & Child Health Nursing	8	288	
	Semester		16	450
Summer Session	Microbiology	4	80	
	Nursing in Physical & Mental Illness	4	128	
	Semester		8	208
Third	Humanities	4	72	
	Nursing in Physical & Mental Illness	10	360	
	Nursing Trends I	2	36	
	Semester		16	468
Fourth	American Economy	4	72	
	Nursing in Physical & Mental Illness	10	360	
	Nursing Trends II	2	36	
	Semester		16	468
	Curriculum		72	2,044

Summary of St. Luke's School of Nursing

From 1899, when the first pupil nurse entered St. Luke's Hospital Training School for Nurses, through May 21, 1977, when the

last student nurse received a diploma from St. Luke's School of Nursing, the school graduated 879 nurses. For the first 16 years (1899-1915) of its existence, this hospital school operated with a two-year program. For the next 55 years (1915-1970), the curriculum was three years in length. For the last seven years of operation, the curriculum reverted to two years' length. The curriculum originated as a loose structure in which classes were held when convenient and evolved into a design modeled on an academic pattern that incorporated courses from a neighboring academic institution. The curriculum content initially consisted of an amalgam of practical nursing, basic sciences, and information distilled from medical specialties. It expanded and gradually more nursing courses were added. By 1963 half the curriculum dealt with the roles and practice of nursing. As a result of the movement to reduce the influence of medicine on the curriculum, the role of physicians in teaching was diminished. Initially, the school had relied heavily on physicians to teach. In the early years they comprised the majority of the faculty. Until 1915 only physicians and staff nurses taught. That year a faculty member from Northern State Normal School taught dietetics. So, in 1915 the faculty, as listed in the hospital's annual report, comprised nine physicians, two nurses, and the dietetics teacher from the neighboring normal school (St. Luke's Hospital, 1915).

Only in 1930 was a nurse hired solely to teach nurses (St. Luke's Hospital, 1931). Until 1960 staff nurses assisted in

teaching student nurses. Throughout the 1930s and the 1940s, much of the classroom as well as clinical teaching was done by hospital staff nurses who had dual roles. In the specialty areas like orthopedics and the operating rooms, this custom continued throughout the 1950s (St. Luke's Hospital School of Nursing, 1959). By the 1960s teaching student nurses in the clinical setting as well as in the classroom had become almost exclusively the province of faculty hired for that purpose. Thus, the number of nurse faculty rose so that by 1966 ten nurses were employed solely to operate the school of nursing (St. Luke's Hospital School of Nursing, 1966). Physicians were listed as "Special Lecturers" in the bulletin of 1961 and as "Consultants in Clinical Instruction" in the school's bulletin for 1966. They no longer engaged in teaching. By 1970 the number of nurse faculty had risen to 12 (St. Luke's Hospital School of Nursing, 1970). From this crest, the nurse faculty fell back to nine in 1974, according to the bulletin for that year, but no physicians were among the faculty. The faculty were nurses and they taught nursing.

At the time the school closed in 1977, no reason for its closure was published, but in 1972, Mrs. Mahowald, who was then director of the school, pointed out, according to a story in the Mining Journal, that closing hospital schools of nursing was a nationwide trend (Hains, 1972). She also identified the financial burden of operating the school of nursing as one of the factors weighed in considering the closing of St. Luke's School of Nursing.



Third, she pointed out that in our culture a college degree has more attraction than a diploma from a non-degree-granting institution. Last, Mrs. Mahowald said the board of trustees of the hospital no longer felt an obligation to produce nurses for the community because Northern Michigan University had met that need (Hains, 1972).

St. George's Hospital School for Nurses,  
Iron Mountain, 1901 to 1903

St. George's Hospital School for Nurses was located at St. George's Hospital on Merritt Avenue near Flesheim Street in Iron Mountain (Cummings, 1979). The school began to operate in 1901 and ceased operating in 1903, when its two pupil nurses graduated. Despite this, the school was accredited by the Michigan State Board of Registration of Nurses in 1910 (McCabe, 1930). This was done, likely, so its two graduates could be licensed as Registered Nurses according to the law enacted in 1909.

St. George's Hospital, where the school was operated, was built as a ten-bed facility in 1899 for Dr. John D. Cameron and Dr. Joseph A. Crowell, according to an article in an Iron Mountain newspaper of that time ("New Hospital," 1889). Polk's Medical Register of the United States and Canada (1902) indicated that by 1900 this full-service hospital had expanded to accommodate 15 patients. By 1902 it also had nurses' quarters and an ambulance service (Cummings, 1979).

Articles of incorporation for that early period could not be found, but corporate articles filed in 1923 were located at the

Corporation and Securities Bureau of the Michigan Department of Commerce. A news story printed in The Menominee Range on August 15, 1899, stated that "Drs. Cameron and Crowell are building a hospital." Moreover, Cummings (1979) in Born of Iron, a history of Iron Mountain, claimed that "Drs. Cameron and Crowell built and equipped" St. George's Hospital. Therefore, the hospital was not only "private" as reported in Polk's Medical Register of the United States and Canada (1902) but also was proprietary, i.e., owned by the two physicians who had it built. By 1902 the superintendent of the institution and its school for nurses was Mary R. Beer (Polk's Medical Register of the United States and Canada, 1902). The medical staff consisted of the two owners and Drs. Hutchinson and Krohn, who were employed as assistants (Cummings, 1979).

Miss Beer, the superintendent of the school at St. George's Hospital, was an 1893 graduate of Illinois Training School for Nurses (Schryver, 1930). She came to Iron Mountain in 1899 and first became matron at St. George's Hospital and then superintendent of the hospital, according to her obituary in The Iron Mountain News ("Miss Mary Beer," 1926). She taught nursing to the two pupils the school was known to have. Both were already employed at caring for patients in the hospital when Miss Beer taught them. They had true on-the-job training. Dorothea Alexander graduated on June 2, 1903, according to Record of Registered Nurses, Volume I, and Anne B. Murphy graduated one day later (Michigan State Board of Registration of Nurses, 1910). Miss Alexander was issued license number 208, and

Miss Murphy received license number 216. The content of the curriculum they studied is unknown, but it and they satisfied the requirements of the Michigan State Board of Registration of Nurses.

McCabe (1930) wrote:

The applicant was required to furnish satisfactory proof that she was, at least, twenty one years old, of good moral character, and that she had completed a grammar school education. When these qualifications were satisfactory, the applicant might be registered without examination if she could show a diploma, or certified copy of the same according to the board's ruling, issued before December first, 1912, by a training school connected with a general hospital, state hospital, sanitarium, or a special hospital where a two year systematic course of training was given. (p. 6)

No other pupil nurses were known to have been trained at St. George's Hospital. What happened to Miss Alexander is not known, but according to her obituary in The Iron Mountain News, Miss Murphy remained in Iron Mountain and nursed for many years as a hospital nurse, school nurse, and industrial nurse for the Oliver Iron Mining Company ("Anne Murphy Dies," 1942).

Sault Ste. Marie Hospital Training School for Nurses, Sault Ste. Marie, 1903 to 1923, and Chippewa County War Memorial Hospital Training School, 1923 to 1933

A school of nursing operated at Sault Ste. Marie for a total of 30 years, from 1903 to 1933. For the first 20 years of that period, the school was conducted by Sault Ste. Marie Hospital, a nonprofit, general hospital (Articles of Association of Sault Ste. Marie Hospital, 1903). For the last ten years of operation, the school was conducted by Chippewa County War Memorial Hospital, a public institution, supported by tax funds (McCabe in Burr, 1930). The school was accredited by the Michigan State Board of Registration of

Nurses and placed on its list of approved schools in February 1910 (McCabe, 1930).

The first hospital was established in 1903 by a group of 24 philanthropic men and women. The Articles of Association of Sault Ste. Marie Hospital (1903) stated that the purposes of that corporation were:

To maintain and conduct a hospital in the city of Sault Saint Marie, Michigan: to create a fund for the endowment and support of such hospital: to provide such nurses and medical attendance as shall be necessary for the care and treatment of patients at such hospital. (Article II)

This hospital was located at the corner of East Spruce Street and Bingham Avenue and had, in 1910, a bed capacity of 30 (Polk's Medical Directory, 1910). When the hospital was reorganized in 1923, it became a county hospital. At the time the hospital was reorganized, the bed capacity was increased to 52 (McCabe in Burr, 1930).

The school was among those accredited by the Michigan State Board of Registration of Nurses and placed on the list of approved schools in February 1910 (McCabe, 1930). The school remained accredited until December 1, 1921, when the board of nursing removed it from the list of accredited schools. This action was taken because the school had "not met requirements of the Board," according to the minutes of the November 26, 1921, meeting of the Michigan State Board of Registration of Nurses (Moore, 1921-1928, p. 29). The nature of the failure was not discussed. On March 8, 1922, the Michigan State Board of Registration of Nurses rescinded

its earlier action and restored the accredited status of the school. The school remained accredited until it closed in 1933.

The roster of women who served as superintendents of nurses, a position that carried with it responsibility for teaching pupil nurses during the school's operation, is not clear. Records telling of their succession and tenure were not available. Helen Fremlin, a nurse, was identified by printing on the frame of her picture, as first superintendent of the hospital. Her tenure was recorded on the frame as "circa 1900." The signature of "Miss R. Thoms" was written on the fly leaf of a record book containing the monthly schedule of clinical practice of all pupil nurses from November 1903 to November 1914. No record of her employment or tenure, however, was found. Moreover, her name was not listed among the names of women who became licensed as Registered Nurse. Who she was, or what her duties were, was not clear. An examination of the records of student nurses, which had been preserved, showed that Emma B. Dickison, a 1914 graduate of Sault Ste. Marie Hospital Training School for Nurses, was one of the superintendents of nurses. It was she who signed the records of student nurses who graduated in September 1919. She may have been superintendent before that time, but no student records before September 1919 bore a signature. Records preserved from earlier periods contained only a schedule of clinical practices.

Fern A. Baker followed Emma Dickison as Superintendent of Nurses. No record of Fern Baker's educational preparation was available. However, her license as Registered Nurse, number 4,135,

had been recorded at the Office of the County Clerk of Chippewa County on December 10, 1920. Likely, that had occurred soon after she arrived in Sault Ste. Marie, for McCabe (1930) reported that the registration act required a nurse to file a copy of her certificate of licensure with the clerk of the county in which the nurse resided. Margaret A. Rapson succeeded Fern Baker as Superintendent of Nurses. Miss Rapson graduated from Sault Ste. Marie Hospital Training School for Nurses on January 22, 1922, according to records preserved at Chippewa County War Memorial Hospital. She wrote the examination for licensure as Registered Nurse in April 1922 and was issued license number 5,720 (Michigan Board of Registration of Nurses and Trained Attendants, 1922). She became Superintendent of Nurses in time to submit the school's report for 1922 to the Michigan Board of Registration of Nurses and Trained Attendants. The next woman to fill the position of Superintendent of Nurses was Marion A. Hickler. She was appointed to the position on February 28, 1924, and thus became Superintendent of Nurses at Chippewa County War Memorial Hospital and principal of the reorganized school, Chippewa County War Memorial Hospital Training School for Nurses (Chippewa County War Memorial Hospital Training School for Nurses, 1925). Miss Hickler was a 1922 graduate of Johns Hopkins Hospital School of Nursing. The next nurse to be principal of Chippewa County War Memorial Hospital Training School for Nurses was Anna B. Northup. She was appointed on March 7, 1927. Miss Northup had graduated from Homeopathic Hospital of Rhode Island in

1908 (Chippewa County War Memorial Hospital Training School for Nurses, 1930). Miss Northup left in 1931, and Miss Dickison returned to the position as Superintendent of Nurses at Chippewa County War Memorial Hospital. It was she who signed the diplomas of the last class of nurses to graduate from Chippewa County War Memorial Hospital Training School for Nurses in 1933.

### Faculty

Until 1919 there is no mention in the students' records of who taught them. However, because Sault Ste. Marie Hospital Training School for Nurses was approved by the Michigan State Board of Registration of Nurses, it must have met that board's criteria. McCabe (1930) reported that in 1915 the Michigan State Board of Registration of Nurses ruled that each accredited training school must employ a registered nurse as principal and that the principal should have at least two paid graduate nurse assistants. One of these assistants was to act as night supervisor (McCabe, 1930). In addition, authorities at the training school for nurses at Newberry State Hospital sent pupil nurses to affiliate at Sault Ste. Marie Hospital Training School for Nurses. This practice occurred from 1910 to 1913. It is unlikely this affiliation would have been sanctioned if the teaching staff at Sault Ste. Marie had been judged to be inadequate.

A record summarizing a student nurse's learning experiences was signed in September 1919 by "E. B. Dickison, R.N." This was the first instance in which the name of a teacher was mentioned in the

records available in the files of the director of nursing at Chippewa County War Memorial Hospital. Next, M. A. Rapson reported a "summary of class work for all classes from October 1923 to January 1, 1924," in a class book (Chippewa County War Memorial Hospital Training School for Nurses, 1919-1924). At that time Miss Rapson reported she had taught probationers Anatomy and Physiology, 22 hours; Nursing, 18 hours; Materia Medica, 22 hours; Ethics, 19 hours; Bacteriology, 19 hours; Solutions, 3 hours; and Principles of Housekeeping, 3 hours. To the intermediate students she had taught 15 hours of Obstetrics and 15 hours of Surgery. To seniors she had taught 10 hours of Survey of the Nursing Field. To both seniors and intermediate students she had taught Emergency First Aid, 10 hours; History of Nursing, 15 hours; Professional Problems, 10 hours; and Advanced Topics, 10 hours.

By 1919 students from Sault Ste. Marie Hospital Training School for Nurses affiliated at Children's Free Hospital in Detroit for experience in caring for and learning about the needs of sick children. From 1900 onward, M. A. Rogers signed the grade and experience reports of student nurses from Sault Ste. Marie who affiliated at Children's Free Hospital. Miss Rogers was a graduate of Philadelphia Polyclinic Hospital Training School and, according to McCabe (1930), became superintendent of Children's Hospital during World War I.

The custom of having the superintendent of nurses teach student nurses was in use at Sault Ste. Marie until 1930. The record of a student nurse who graduated in 1924, for example, showed that she



had been taught by Fern A. Baker and Margaret Rapson, both of whom were, at different times, Superintendent of Nurses at Sault Ste. Marie Hospital. In addition, this student had had lectures from Dr. Mehlig in Bacteriology, Dr. Maloney in Anatomy, and Dr. Felsh in Materia Medica.

The report submitted for 1925 to the Michigan Board of Registration of Nurses and Trained Attendants by the Supervisor of Nurses at Chippewa County War Memorial Hospital Training School for Nurses listed F. R. Fleming, a layman, as superintendent of the hospital and Marion C. Hickler, R.N., as principal of the school. Since this report indicated that there were no graduate nurses, Miss Hickler was actually in charge of both nursing service and nursing education (Chippewa County War Memorial Hospital Training School for Nurses, 1925). Marion Hickler was assisted in providing nursing service and teaching student nurses by at least three assistants, as required by the board of nursing. The assistants were Frances Ross, who was the operating-room supervisor; Cora McLoed, who was supervisor of the surgical and maternity ward; and Helen Runson, who supervised care on the medical wards. The nursing supervisor who guided the practice of student nurses at night was Marion A. Collver, a 1922 graduate of Sault Ste. Marie Hospital Training School. In addition, a dietitian was employed to teach diet therapy to student nurses (Chippewa County War Memorial Hospital Training School for Nurses, 1925).

The report Miss Northup filed with the Michigan Board of Registration of Nurses and Trained Attendants in 1930 showed that Lucy Erdman, a graduate of St. Joseph Hospital School of Nursing in Milwaukee, was a full-time instructor in the school of nursing at Chippewa County War Memorial Hospital (Chippewa County War Memorial Hospital Training School for Nurses, 1930). Miss Erdman began teaching at Sault Ste. Marie in September 1929, according to class books for that year (Chippewa County War Memorial Hospital Training School for Nurses, 1929). The class book dealing with probationers revealed that starting in September 1929, Miss Erdman taught Sanitation and Hygiene, Anatomy and Physiology, Hospital Housekeeping, Practical Nursing, Bandaging, Drugs and Solutions, and Materia Medica. The class book dealing with intermediate and senior students showed that Miss Erdman taught 25 hours of Surgical Nursing with the help of Dr. Conrad in the fall of 1929 and winter of 1930.

The report to the Michigan Board of Registration of Nurses and Trained Attendants for 1930 indicated that Miss Erdman also taught Emergency and First Aid and, with the gratuitous help of four physicians, she taught several other courses. Miss Erdman taught Psychology, and Dr. Bundy helped her in teaching Mental Health. With assistance from Drs. Blain, Griffith, Webster, Willison, and Maloney, she taught Medical Nursing and Nursing in Communicable Diseases and Skin Conditions. Dr. Conrad assisted her in teaching nursing in Surgical, Orthopedic, Gynecological, and Eye, Ear, Nose, and Throat Conditions. Other people assisting Miss Erdman in teaching, according to the report to the Michigan Board of

Registration of Nurses and Trained Attendants for 1930, were the hospital laboratory technologist, Miss Acree, who taught Bacteriology; Miss McQuade, a dietitian who was hired to teach Dietetics and Diet in Disease to student nurses; Miss Northup, the principal of the school and superintendent of nurses, who taught History and Ethics of Nursing, Modern Social and Health Movements, and Professional Problems; and Mr. Brown, a high school teacher who gratuitously taught Chemistry. Miss Arrand, a 1928 graduate of Chippewa County War Memorial Hospital, taught Obstetrical Nursing and Prenatal Hygiene with the help of Drs. Whitmarsh and Husband. Students' activities on the clinical units at night were supervised by Jemina Larson, R.N., the night supervisor. When students practiced on the medical wards and the maternity section, their performance was supervised by Johannah Arrand, R.N., who was in charge of care of medical and maternity patients. Gladys Cuthbert, the operating-room supervisor, guided student nurses during their experiences there, and Viola Richardson supervised student nurses who cared for patients on the surgical wards (Chippewa County War Memorial Hospital Training School for Nurses, 1930).

No reports to the Michigan Board of Registration of Nurses and Trained Attendants dated later than 1930 were found among the records kept in the office of the director of nursing at the hospital in Sault Ste. Marie. Class books relating to classes admitted after 1930 only occasionally listed the name of a teacher. A nurse, Emma Mattill, assisted by Dr. Blain, taught Medical Nursing

to the classes admitted in 1931 and 1932. With Dr. Husband she taught Obstetrical Nursing to the same students. With Dr. Conrad she taught Surgical Nursing and, helped by Dr. Husband, she taught Urology and Gynecology to students admitted in 1931. Although Miss Mattill taught all these courses, no records of her employment or educational preparation were available. A Miss Spiers taught Psychology to a group of student nurses who graduated in 1932 and Ethics to another group who entered in September 1932. Again, in Miss Spiers's case, no record of her employment or education was available. Miss Acree, the hospital laboratory technologist, was listed as teaching Bacteriology and Pathology to the classes who entered in 1931 and 1932. Dietetics and Diet in Disease were taught to those students by Miss Conrad. Miss Wright taught Operating Room Technique to student nurses who entered Chippewa County War Memorial Hospital Training School for Nurses in 1931. No records were available to tell of Miss Wright's background. Dr. Mertaugh presented lectures in Communicable Diseases to the women who comprised the intermediate students in 1933, and Drs. Vegors and Bart taught that group Eye, Ear, Nose, and Throat Conditions (Chippewa County War Memorial Hospital Training School for Nurses, 1931, 1932).

### Students

No fewer than 121 women graduated from the nursing program at Sault Ste. Marie. A letter written on March 17, 1928, by Mary C. Wheeler, the General Secretary of the Michigan Board of Registration

of Nurses and Trained Attendants, tallied 78 graduates from 1905 through 1927 (Wheeler, 1928). The files of an additional 43 women who graduated from 1928 through 1933 were found in the office of the director of nursing at Chippewa County War Memorial Hospital. The tally of graduates through 1927 showed that the largest classes had graduated in 1916 and 1927. Seven nurses graduated during both those years. The tally of graduates from 1928 through 1933 showed 11 nurses had graduated in 1931 and another 11 had graduated in 1932. For 1933, the year when the school closed, the files of only three graduates could be found. During 1918 and 1923 no graduates had been reported, according to Mary Wheeler's letter, which may be seen in Appendix B. The average number of nurse graduates each year from 1905 through 1933 was a small fraction over four and five twenty-ninths ( $4 \frac{5}{29}$ ). Table 10 shows the number of graduates during each year from 1905 through 1933.

Table 10.--Number of graduates from Sault Ste. Marie Hospital Training School for Nurses and Chippewa County War Memorial Hospital Training School, 1905 to 1933.

Year	Gradu- ates	Year	Gradu- ates	Year	Gradu- ates	Year	Gradu- ates
1905	1	1912	3	1919	3	1926	4
1906	3	1913	3	1920	3	1927	7
1907	1	1914	6	1921	5	1928	5
1908	2	1915	3	1922	1	1929	5
1909	6	1916	7	1923	0	1930	8
1910	4	1917	3	1924	5	1931	11
1911	4	1918	0	1925	4	1932	11

The first woman to complete the two-year program in nursing at Sault Ste. Marie Hospital Training School for Nurses was Catherine Hedington. She graduated on December 12, 1905, according to a list entitled "Record of Training School," which was kept in the office of the director of nursing at Chippewa County War Memorial Hospital. Nothing, however, was recorded about her career.

Women who applied to Sault Ste. Marie Hospital Training School for Nurses were expected to respond to a series of questions that were used to help judge their suitability for training as a nurse. Several questions related to health. Others asked about domestic responsibilities, education, and religious affiliation, as can be seen in "Sault Ste. Marie Hospital Training School for Nurses Application Blank" in Appendix F. Although the form was altered after 1923, the questions asked on the application to Chippewa County Memorial Hospital School of Nursing were the same, as can be seen on the application blank for Chippewa County War Memorial Hospital Training School for Nurses in Appendix G. The criteria for entry were based on education, good health, and evidence of acceptable morals.

McCabe (1930) reported that in 1930 high school graduation was made a requirement for entrance to the school of nursing at Sault Ste. Marie. Until that time, according to a report submitted in 1930 to the Michigan Board of Registration of Nurses and Trained Attendants, two years of high school or its equivalent was sufficient for admission to Chippewa County War Memorial Hospital Training School for Nurses. From 1925 through 1930, however, a

student was only provisionally accepted until the Michigan Board of Registration of Nurses had approved the level of her preliminary educational preparation. McCabe pointed out that in 1925 the Michigan Board of Registration of Nurses and Trained Attendants ruled that entrance to training would be denied applicants who had not completed two full years of high school. Furthermore, a ruling in 1928 required that the training school send the state office a student's credentials before admitting the student to the school. Letters in the files of former students at Chippewa County Memorial Hospital Training School for Nurses attest to this school's complying with the board's rules. A copy of such a letter may be seen in Appendix H.

No information about how student nurses were housed, the size of their allowances, or how they lived was available for the years before 1925. The report to the Michigan Board of Registration of Nurses and Trained Attendants for 1925 stated that students lived in a residence that was separate from the hospital. This residence was reported to have a reception room, one single-bed room, five double rooms, and a dormitory with five beds. A chaperone was responsible for the operation of his home. Students ate their meals in the hospital dining room, not at the nurses' residence. By 1930 students were housed in a new nurses' home, which accommodated 14 people (Chippewa County War Memorial Hospital Training School for Nurses, 1930). Students paid no tuition and were provided an allowance of \$8 per month throughout their program, according to the

1925 report to the Michigan Board of Registration of Nurses and Trained Attendants. The 1930 report to that board indicated that an allowance of \$8 per month continued to be paid all students and tuition remained free. Students did, however, pay for their uniforms and books.

### Curriculum

What pupil nurses who were enrolled in the nursing program at Sault Ste. Marie studied in the years from 1903 to 1916 is not known. Although a ledger containing a list entitled "Record of Training School," which began in 1903 and ended in 1914, and clinical rotation schedules for April 1909 through May 1912 were found at Chippewa County War Memorial Hospital, no information about what pupil nurses learned in the classroom before 1917 was found.

Both the "Record of Training School" and the clinical rotation schedules indicated that pupil nurses entered the program whenever it was convenient for them. The first student entered the school on October 12, 1903, and continued in the program to graduate on December 12, 1905. The second student entered on December 28, 1903. She served her month's probationary period and was admitted to the training program on January 28, 1904. This second student graduated on January 4, 1906, two weeks before two calendar years of training would have been concluded. No mention of why she graduated two weeks early was found. Perhaps she was given a terminal vacation. A third student entered on January 14, 1904, and a fourth on August 28, 1904 (Sault Ste. Marie Hospital Training School for



Nurses, 1903-1916). This practice of admitting pupils at irregular intervals continued through 1914 but had ceased by 1919 when classes had been organized.

Little standardization of clinical experience existed through 1914. However, both the clinical rotation schedules and the "Record of Training School" showed that by 1909 the program had stabilized at two calendar years, with one month's probationary period included in that time (Sault Ste. Marie Hospital Training School for Nurses, 1909-1912). Each student was provided experience in caring for gynecological, surgical, and medical patients as well as given experience on night duty and in the care of patients in their homes on private duty. All students were scheduled to have 41 or 42 days' vacation during their two-year program. Some students received experience in preparing and serving special diets; others did not. The length of time spent on a service varied. Table 11 shows how many days five pupil nurses who entered the program in 1909 spent in each of the clinical experiences available to them. Students began their clinical experience as probationers, during which time they learned simple nursing and hospital housekeeping skills. Then they were assigned to care for gynecological or medical patients. After two or three months of initial training, each student spent a month on night duty. Private duty, preparation of special diets, and care of surgical patients were experiences usually reserved for the second year of training. Whether students got experience in caring for women in childbirth while caring for gynecologic patients or whether this experience occurred during stints of private duty was

not reported, but because many of these pupil nurses later became licensed as Registered Nurses, they must have received this requisite experience while in school.

Table 11.--Clinical experience days of five pupil nurses, 1909 to 1911.

Area of Clinical Experience	Pupil Nurse 1	Pupil Nurse 2	Pupil Nurse 3	Pupil Nurse 4	Pupil Nurse 5
Probationary Period	31	31	30	24	31
Gynecology	131	151	152	98	135
Medical	120	80	153	161	122
Surgical	150	211	110	150	126
Night Duty	138	124	150	181	168
Special Diets	6	27	15	0	14
Private Duty	112	63	94.5	76	93
Vacation	42	41	42	37	42
Illness	0	0	3	4	0
Other Absences	7	2	0	0	0
Total days	737	730	729.5	731	731

A ledger, started in 1919, summarized the classroom and clinical experiences of students who entered the program from 1917 to 1922 (Sault Ste. Marie Hospital Training School for Nurses, 1917-1922). Many of these summaries were not complete. One student's transcript, however, can serve as an example of what student nurses at Sault Ste. Marie Hospital Training School for Nurses studied during this period. The curriculum seen in Table 12 was experienced by a student who entered the program in March 1918 and graduated two and one-half years later in October 1920. It contained a total of

Table 12.--Curriculum experienced by student nurse at Sault Ste. Marie Hospital Training School for Nurses, March 1918 to October 1920.

Term	Course	Hours of Instruction	
First	Anatomy & Physiology	32	
	Bacteriology	8	
	Hygiene	6	
	Materia Medica	28	
	Dietetics	32	
	Ethics	10	
	Chemistry	3	
	Term Total	199	
Second	Anatomy & Physiology	30	
	Bacteriology	7	
	Hygiene	6	
	Materia Medica	18	
	Dietetics	30	
	Ethics	5	
	Term Total	96	
Third	Anatomy & Physiology	15	
	Dietetics	30	
	History of Nursing	9	
	Medical Diseases	12	
	Surgical Techniques	12	
	Obstetrics	12	
	Term Total	90	
Fourth	Anatomy & Physiology	15	
	Dietetics	30	
	Medical Diseases	10	
	Surgery	10	
	Obstetrics	12	
	Term Total	77	
Fifth	Formula Instruction	3	
	Surgery	13	
	Children's Diseases	12	
	Communicable & Infectious Diseases	6	
	Eye, Ear, Nose & Throat	3	
	Advanced Topics in Social Hygiene	3	
	Term Total	40	
Total Hours in Curriculum		422	

422 hours of classroom instruction, which was presented in five terms. The first two terms consisted of courses on which nursing is based, and the fifth term contained medical specialties and advanced nursing topics. During the third and fourth terms, conditions common to hospitalized and sick people were covered.

A summary of the hours of instruction in this curriculum tallies: Anatomy and Physiology, 92 hours; Dietetics, 122 hours; Formula Instruction, 3 hours; Materia Medica, 46 hours; Bacteriology, 15 hours; Hygiene, 12 hours; Ethics, 15 hours; Chemistry, 3 hours; History of Nursing, 9 hours; Medical Diseases, 22 hours; Surgical Techniques, 12 hours; Surgery, 23 hours; Obstetrics, 24 hours; Children's Diseases, 12 hours; Communicable and Infectious Diseases, 6 hours; Eye, Ear, Nose and Throat, 3 hours; and Advanced Topics in Social Hygiene, 3 hours. This student's transcript also revealed the sum of her clinical experiences as 180 days of Surgery and Gynecology, 180 days of Medicine, 150 days of Operating Room, 125 nights of duty, 90 days of Obstetrics, 90 days of Sick Children, 21 days of Private Duty, and 14 days of practice in the diet kitchen. During the 90 days of experience in Obstetrics, she attended 15 births. During the 150 days in the operating room this pupil scrubbed for 32 major surgeries, i.e., abdominal surgery or amputations, and 61 minor operations. Although the record does not say so, it is likely that ~~the~~ remainder of the time in the operating room was spent in circulating for operations and preparing linens, sutures, dressings,

instruments, and other equipment, as well as cleaning and sterilizing. Regardless, these experiences met the criteria of the Michigan Board of Registration of Nurses and Trained Attendants, for McCabe (1930) reported that by 1920 all accredited schools "were required to provide four services, medical, surgical, pediatrics, and obstetrical along with work in dietetics" (p. 30).

The curriculum reported by McCabe (1930) as being taught at Chippewa County War Memorial Hospital Training School for Nurses in 1929 accounted for 706 hours of classroom instruction without including the course in Pediatrics at Children's Hospital in Detroit. In this report the "practical experience" was reported in hours per year. These hours were reported, not in a range, but as absolute numbers. As it was very unlikely that each student served identical time in any service, let alone that all students in all services spent identical lengths of time in each area, it was assumed that the hours reported in practical experience represented an average. These average hours per year in each clinical experience were converted to the average number of days per year spent by students in each clinical experience. Because it was reported in McCabe that the length of duty was ten hours per day, that proportion was used in the conversion.

The curriculum for 1929 at Chippewa County War Memorial Hospital Training School for Nurses, as reported by McCabe (1930), showed that in the first year 489 hours of instruction occurred. This was offered as Anatomy and Physiology, 90 hours; Bacteriology, 45 hours; Hygiene, 15 hours; Hospital Housekeeping, 12 hours;

Bandaging, 12 hours; Sanitation, 15 hours; Ethics, 10 hours; Dietetics, 60 hours; Chemistry, 60 hours; Pathology, 10 hours; and History of Nursing, 15 hours. During this first year, students had an average of 257.7 days of clinical experience apportioned as Elementary Nursing, 40.3 days; Medical Nursing, 34.2 days; Surgical Nursing, 85.4 days; Obstetrical Nursing, 5.7 days; Maternity Nursing, 3.1 days; practice in the operating room, 16.6 days; practice in the diet kitchen, 7.1 days; service in the dispensary, 12.9 days; 12.9 days of practicum in office nursing; and an average of 14.7 days in the hospital laboratory. In addition, first-year students experienced an average of 24.8 nights on duty and had an average of 11.2 days of vacation.

During the second year of the curriculum reported in McCabe (1930), students were offered 187 hours of instruction as follows: 20 hours of Surgical Nursing; 20 hours of Emergency and First Aid; 18 hours of Communicable Diseases; 10 hours of Nursing Communicable Diseases; 10 hours of Operating Room Technique; 15 hours of Surgical Diseases; 28 hours of Medical Diseases; 18 hours of Nursing Medical Diseases; 5 hours of Eye, Ear, Nose and Throat; 5 hours of Gynecology; 20 hours of Obstetrics; 13 hours of Obstetrical Nursing; and 5 hours of Skin and Venereal Diseases. In the second year, students averaged 255 days of clinical experience. That experience was apportioned as an average of 56.3 days of Medical Nursing, 21.1 days of Surgical Nursing, 38.4 days as the average length of experience in both Obstetrical Nursing and Maternity Nursing, 52.4

days as the average clinical experience in the operating room, and 19.6 days as the average length of experience in the diet kitchen. Second-year student nurses averaged 28.8 nights on duty. The average length of vacation during this year was 14 days (McCabe, 1930).

The curriculum reported by McCabe (1930) for the third year included 12 hours of Mental Diseases and Neurology and 10 hours of a course called Professional Problems. In addition, student nurses studied Pediatrics and Orthopedics during a three-month affiliation at Children's Hospital in Detroit. The clinical experience, as reported in McCabe (1930), averaged 56.2 days excluding the three months in Detroit. Students spent an average of 19.7 days in Medical Nursing, 19.4 days in Surgical Nursing, 3.3 days in the diet kitchen, and 13.8 nights on duty. In addition, third-year students received an average of 23.5 vacation days (McCabe, 1930). In this curriculum, clinical experience occurred in many fields before classroom instruction in the care of patients with such conditions had occurred. In the first year, student nurses provided care to medical, surgical, obstetric, and maternity patients before classroom teaching about caring for those kinds of patients occurred. Likewise, students served in the diet kitchen, dispensary, and operating room before they had instruction in diet therapy, first aid, or operating-room technique. Notably, private duty was no longer reported as a clinical learning experience.

The curriculum reported to the Michigan Board of Registration of Nurses and Trained Attendants in 1930 showed a total of 755 hours

of instruction and included the course in Pediatrics offered by affiliation at Children's Hospital. According to this report, the first term contained 325 hours of instruction apportioned as 90 hours of Principles of Nursing with Housekeeping and Bandaging, 60 hours of Anatomy and Physiology, 15 hours of Materia Medica with Drugs and Solutions, 45 hours of Applied Chemistry, 45 hours of Bacteriology, 30 hours of Dietetics and Diet in Disease, 15 hours of History and Ethics of Nursing, and 25 hours of Hygiene and Sanitation. The second term contained 183 hours of instruction. This occurred as Principles of Nursing with Housekeeping and Bandaging, 20 hours; Anatomy and Physiology, 30 hours; Materia Medica with Drugs and Solutions, 30 hours; Dietetics and Diet in Disease, 30 hours; Psychology and Mental Hygiene, 20 hours; History and Ethics of Nursing, 15 hours; Medical Nursing with Communicable Diseases and Skin Conditions, 18 hours; and Pathology and Urinalysis, 20 hours. During the second year, student nurses received 189 hours of instruction offered as 20 hours of Principles of Nursing with Hospital Housekeeping and Bandaging; 55 hours of Medical Nursing with Communicable Diseases and Skin Conditions; 38 hours of Surgical, Orthopedic, Gynecological, and Eye, Ear, Nose and Throat Nursing; 50 hours of Obstetrical and Prenatal Hygiene; 10 hours of Emergency and First Aid; and 10 hours of Modern Social and Health Movements and Professional Problems. The last six months contained only 58 hours of instruction. This comprised 10 hours in Psychology and Mental Hygiene; 18 hours in Surgical, Orthopedic,



Gynecological, and Eye, Ear, Nose and Throat Nursing; and 30 hours in Pediatrics and Infant Feeding (Chippewa County War Memorial Hospital Training School for Nurses, 1930).

Seven of the courses reported in this curriculum were offered for a period of two terms, and Anatomy and Physiology was presented in three terms. Perhaps some progression from simple to more complex materials was attempted, or seasonal illnesses may have influenced the sequence in which materials in these courses were presented. However, no reason for extending any course beyond one term was advanced (Chippewa County War Memorial Hospital Training School for Nurses, 1930).

The 1930 report to the Michigan Board of Registration of Nurses and Trained Attendants indicated that a shift of night duty for student nurses at Chippewa County War Memorial Hospital Training School for Nurses was eight hours in 1930. A day shift was also eight hours. All classes were held either in the morning or afternoon; none was held in the evening. The length of a work week, however, was not reported.

No record of the curriculum during the last three years of the school's operation was available. The actual closing date is obscure, but in an interview conducted on August 2, 1984, Anne Wallis Rye, who graduated from Chippewa County War Memorial Hospital Training School on November 9, 1933, as one of the last graduates, said she believed the school actually closed in June 1933. Her recollection of the event was that the three seniors, including her, were permitted to finish what little remained to complete of their

curriculum at their home school and then conclude their program on affiliation at Children's Hospital. Arrangements were made for other students in the hospital school at Sault Ste. Marie, she recalled, to transfer, if they wished, to Highland Park General Hospital School of Nursing, Hackley Hospital School of Nursing, Bronson Hospital School of Nursing, or Butterworth Hospital School of Nursing (A. W. Rye, personal communication, August 2, 1984).

Anne Rye (personal communication, August 2, 1984) said that student nurses were informed that the decision to close the school of nursing had been based on the cost of educating student nurses and the oversupply of nurses existing in the nation. She recalled being told that it was futile to produce more nurses when graduate nurses could not find work. M. Louise Fitzpatrick (1975), a nursing historian, confirmed that the depression had a profound effect on nursing. She said that at no time in history had nursing encountered a worse employment situation. The Michigan Board of Registration of Nurses and Trained Attendants attempted to preserve nursing work in Michigan for nurses already registered in Michigan by moving, on November 18, 1932, to discontinue registering nurses from outside the state "for an indefinite period due to the over supply of nurses in this state" (Stahlnecker, 1928-1934, p. 145).

Earlier that year, on June 17, 1932, the Michigan Board of Registration of Nurses and Trained Attendants had moved to warn the school at Sault Ste. Marie that unless a six-week affiliation for Obstetrical Nursing and a three-month affiliation in Medical Nursing

were added to the existing three-month affiliation for Children's Diseases, the board would recommend closing the school (Stahlnecker, 1928-1934). The school and the hospital, which operated it, were dependent on county tax revenues. These were seriously reduced by 1932. Therefore, it is not surprising that there was no record of the suggested measures being implemented. Instead, the minutes of the Michigan Board of Registration of Nurses and Trained Attendants for May 26, 1933, read that Chippewa County Memorial Hospital was to be removed from the list of accredited schools on September 1, 1933, for "insufficient clinical material, lack of supervision in the hospital and Nurses' home, poorly kept records, and inadequate teaching facilities" (Stahlnecker, 1928-1932, p. 148).

Upper Peninsula Hospital for the Insane, or Newberry  
State Hospital Training School for Nurses,  
Newberry, 1908 to 1925

According to an account in Fifty Years of Progress, a booklet published in commemoration of Newberry State Hospital's fiftieth year of operation, the school of nursing at Upper Peninsula Hospital for the Insane, as the hospital was then known, was organized during the summer of 1908 (Newberry State Hospital, 1946). A story in the local weekly paper, The Newberry News, on June 3, 1910, told of the graduation of the first five nurses from the school for nurses at Upper Peninsula Hospital for the Insane. The year the school closed, according to most accounts, was 1925. However, McCabe in Burr (1930) reported that nurses' training at Newberry State Hospital ceased after 1921. The booklet published for the

hospital's fiftieth anniversary told of the school's closing in 1925 (Newberry State Hospital, 1946). New Outlook, a hospital publication, in the July 29, 1971, issue gave the year in which the school closed as 1925 ("Newberry State Hospital History," 1971). Moreover, The Newberry News of June 26, 1925, carried a story about the graduation of student nurses from Newberry State Hospital ("Hospital Items," 1925). Thus, it seems the school closed in 1925.

The school of nursing was accredited by the Michigan Board of Registration of Nurses and placed on the list of approved schools in February 1910 (McCabe, 1930). It remained there until 1924, when this board withdrew its approval ("Newberry State Hospital History," 1971). The reason advanced for withdrawing approval to operate the school of nursing, according to an account in Fifty Years of Progress, was that only three students were enrolled in the school (Newberry State Hospital, 1946). The action was based on a rule formulated at the December 5, 1923, meeting, which stipulated "that fifteen be the number of students required in accredited training schools" (Moore, 1921-1928, p. 54).

In 1893 the State Board of Corrections and Charities was empowered to establish an asylum for the Upper Peninsula (Dunbar, Volume II, 1955). The citizens of Newberry, according to the local weekly paper, The Newberry News ("Hurrah! Newberry Gets the Asylum," 1893) were jubilant when their town was chosen as the site of the new state hospital. The hospital began to operate in 1895, when the first patients were admitted (Burr, 1930). An account in a

hospital publication called New Outlook ("Newberry State Hospital History," 1971) stated that the institution was designed to house a total of 985 patients in 20 cottages, but as cottages were built one by one, the design was implemented gradually. Therefore, from time to time, as in a report in The Newberry News of March 31, 1911, its facilities were stretched beyond capacity ("Hospital Items," March 31, 1911). According to that account, 800 patients were housed where bedroom capacity was intended for 750 people. Burr reported that the institution had grown to a 1,160-bed capacity by 1930. Until August 1911, the institution was known as the Upper Peninsula Hospital for the Insane or as the Upper Peninsula Asylum for the Insane. On August 1, 1911, along with all other insane asylums in the state, its name was changed by statute. The Newberry News of August 4, 1911, reported that the new name for the local institution was Newberry State Hospital ("Newberry State Hospital Is Now the Name," August 4, 1911).

### The Faculty

The superintendent of nurses who was responsible for guiding the school for nurses from 1908 to 1912, according to a story in The Newberry News, was Helen Sinclair ("Miss Helen Sinclair Has Resigned," March 29, 1912). She reportedly studied under the direction of Florence Nightingale. Excerpts from an issue of the Newberry State Hospital Mirror, originally published in 1957 and recounted in the New Outlook of July 29, 1971, reported that Ethel King Burns, a member of the very first class of pupil nurses at the

school, recalled that her teacher, Helen Sinclair, had been guided by Miss Nightingale in London ("Newberry State Hospital History," 1971).

Whether she trained at St. Thomas's Hospital or not, Helen Sinclair's credentials were acceptable to the Michigan Board of Registration of Nurses, for Helen Gaines Sinclair was granted license 715 in 1911, and the school she headed was approved and placed on the accredited list in 1910. When Helen Sinclair resigned, she was succeeded by a Miss Law, according to the account in The Newberry News ("Miss Helen Sinclair Has Resigned," March 29, 1912). No record of Miss Law was found. Instead, by October 28, 1913, Nellie Blanche Hall had recorded her Michigan license, numbered 198, with the Luce County Clerk (Luce County Clerk, 1910-1939). Where Nellie Hall graduated was not recorded. Nevertheless, her name appeared as "superintendent" from 1914 to 1919 on records of student nurses from Newberry State Hospital Training School when they affiliated at Illinois Training School for Nurses (Illinois Training School for Nurses, 1913-1961, 1918-1920). Nellie Hall resigned as superintendent of nurses in October 1918, according to an item in The Newberry News ("Hospital Items," October 14, 1918). During 1919 the name that appeared as Superintendent of Nurses at Newberry State Hospital on the records of student nurses who affiliated at Illinois Training School was Ellen L. Fickett. No other record of her remained. Cecelia A. Lewis became superintendent of nurses at Newberry State Hospital in 1920, according to the records of student nurses who affiliated at

Illinois Training School. Her assistant was identified in The Newberry News as Irene Hoeltzel ("Hospital Items," January 2, 1920). By 1924 Frances Kidd, an alumna of the class of 1921, had become superintendent of nurses ("Hospital Items," March 29, 1924). She stayed only a little more than a year as The Newberry News of June 5, 1925, reported that Mrs. Nellie B. Sheldon, formerly Nellie B. Hall, had resumed the position of superintendent of nurses ("Hospital Items," June 5, 1925). It was Mrs. Sheldon who presided at the school when the last class of nurses graduated on June 26, 1925 ("Hospital Items," June 26, 1925).

During a period beginning in 1916 and ending late in 1918, students at Newberry State Hospital Training School for Nurses were taught dietetics by Regina Hall, who, according to an account in The History of Luce County, had graduated from Thomas Normal Training School in Detroit (Mattson, 1981). An item published in The Newberry News of April 15, 1922, told of another dietitian's coming to Newberry State Hospital ("Hospital Items," April 15, 1922). Her name was Hedwig Hage. Although the article did not state that her role included teaching student nurses, she might well have done so, as it was the custom.

From May 1910 through April 1913, student nurses from the hospital at Newberry affiliated at Sault Ste. Marie Hospital Training School for Nurses. However, there was no indication of who taught these affiliating students. All that remained was a schedule of their clinical experiences. The records at the University of

Illinois, likewise, did not reveal who was charged with teaching the various subjects studied by student nurses while they affiliated at Illinois Training School for Nurses. In the booklet Fifty Years of Progress, it was reported that student nurses also affiliated at the hospital of the University of Michigan, at Children's Hospital in Detroit, and at Sault Ste. Marie, Ontario (Newberry State Hospital, 1946). No records of these affiliations were available, so it was not possible to learn who taught students during these experiences. Nevertheless, in the absence of evidence to the contrary, it is likely that at Newberry, as at other Upper Peninsula hospital schools of nursing, teaching student nurses was a responsibility met collaboratively by the superintendent of nurses, staff nurses, physicians, and various hospital personnel, such as dietitians and laboratory technologists.

### Students

Although no "Record of Students" or alumnae list remained at Newberry State Hospital, references to students or graduates appeared in The Newberry News. Student nurses scheduled for clinical experiences at Sault Ste. Marie Hospital Training School for Nurses were sometimes identified on the schedule at Sault Ste. Marie Hospital as "returning to Upper Peninsula Hospital" (Sault Ste. Marie Hospital Training School for Nurses, 1919-1912). Others were scheduled for periods of three to six months at the hospital in Sault Ste. Marie and did not serve the traditional one month's probationary time. Their names later appeared in The Newberry News



as graduates of the school of nursing at Newberry State Hospital. Some names also were listed as graduates of Newberry State Hospital Training School for Nurses in the Record of Registered Nurses, kept in the office of the Secretary of the Michigan State Board of Registration of Nurses (Michigan State Board of Registration of Nurses, 1914-1921; Michigan Board of Registration of Nurses and Trained Attendants, 1921-1925). In the records of affiliating student nurses at the Special Collections Department of the Library of the University of Illinois at Chicago, students from Newberry were easily identified. Age and, in some cases, previous education were mentioned in those records. From such fragments an image of student nurses at Newberry State Hospital emerged.

The students were women who were at least 18 years old at the time they entered the program. The records compiled during the affiliation at Illinois Training School for Nurses showed that their ages ranged from 21 to 28 years. Because many of these women were licensed by the Michigan State Board of Registration of Nurses within a month or two of leaving Illinois Training School, this affiliation must have occurred during their senior year. Hence, even the youngest students, who were 21 during this affiliation, had to have been 18 years old at the time they entered the three-year program at Newberry. Records from the affiliation at Illinois Training School showed that the preparatory education of student nurses from Newberry ranged from completion of eighth grade to high school graduation. Of the ten students for whom this information was available, two were high school graduates. One student had

attended high school for three years, and another had completed two and one-half years. Four had finished two years of high school. One had attended high school for one year, and one student had completed only eight grades.

### Curriculum

The only available records concerning curriculum were those from the affiliating agencies at Sault Ste. Marie and Chicago. At Sault Ste. Marie the record was confined to a schedule of clinical experience. This schedule began with May 1, 1910, and concluded on April 26, 1913 (Sault Ste. Marie Hospital Training School for Nurses, 1903-1916). The affiliations before February 1912 were three months long. In the interval from May 1, 1910, to January 31, 1912, 12 students from Newberry affiliated at Sault Ste. Marie. All received experience with gynecologic nursing. Ten had night duty experience, ranging from 18 nights to 36 nights during this three-month experience. Eight experienced care of surgical patients. This practice in Surgical Nursing ranged from 10 to 55 days. Care of patients sick with medical conditions was experienced by seven of these affiliating students. The range of experience in Medical Nursing among these students extended from 13 to 25 days. Six students received some experience in preparing and serving special diets, and four were given experience with private duty patients.

The three students who affiliated at Sault Ste. Marie after February 1, 1912, remained at that hospital for six months. Again, all were given experiences with gynecologic patients. These three

experienced night duty ranging from 35 to 69 nights. Each of these three pupil nurses had practice in care of patients with medical conditions. This experience ranged from 30 to 70 days. All were given some experience in caring for surgical patients, too. The experience in Surgical Nursing ranged from 28 days to 82 days. Two pupils received experience in special diets, but only one cared for private duty patients during this six-month affiliation. It is likely the affiliation was chosen to provide experience in caring for patients suffering gynecological, surgical, and medical conditions, which would be difficult to provide at Newberry.

The affiliation at Illinois Training School was arranged to be six months long when it began in 1913. This arrangement was discontinued in May 1916, and when the affiliation was resumed in 1918, it had been lengthened to nine months. One or two students at a time were sent to these affiliations.

During the first affiliation, all 14 students received experience in care of adults sick with medical conditions, and 13 received experience in caring for women during childbirth (Illinois Training School for Nurses, 1913-1916). Twelve students received experience in caring for adults after surgery, and 12 of this group, likewise, received operating-room experience. Only five of the affiliating students had an opportunity to care for sick children. Four students from Newberry cared for people sick with communicable diseases, and three cared for people on the eye, ear, nose and throat wards. Thus, the six-month affiliation primarily provided

experience in caring for adults with medical and surgical problems, as well as women during childbirth, and some operating-room experiences.

Five students' records listed classroom instruction during this earlier affiliation; nine did not. In each case in which classroom instruction was recorded, instruction in Communicable Disease was listed. The amount of instruction in Communicable Disease ranged from two to six hours. One student's instruction reportedly was limited to two hours in Communicable Disease. Another student received six hours' instruction in Communicable Disease and three hours' instruction in Pediatrics. The third of these five students received two hours of instruction in Communicable Disease, nine hours' instruction in Pediatrics, and four hours in Ethics. The fourth student, who was at Illinois Training School at the same time as the fifth student, reportedly had 17 hours of classroom instruction as follows: Communicable Disease, four hours; Nursing Techniques, five hours; Bandaging, four hours; and Hospital Administration, four hours. Her classmate, the fifth student on whose record classroom instruction was reported, received a total of 20 hours of instruction portioned as Communicable Disease, five hours; Nursing Techniques, five hours; Bandaging, five hours; and Hospital Administration, five hours. Only in Nursing Techniques did these two classmates receive the same amount of instruction. Their clinical experiences also were dissimilar. Although both had experiences in caring for adults who had medical and surgical conditions, one had experiences on the obstetric ward and in the

operating rooms, and the other had experiences with sick children and on contagious-disease wards, as well as on wards with people who had eye, ear, nose and throat conditions (Illinois Training School for Nurses, 1913-1916). These two students' learning experiences were different, despite their having been on the same affiliation at the same time.

Eleven student nurses affiliated at Illinois Training School from February 1918 to June 1920, when the affiliation was nine months long. One left after two months, so only ten students experienced the entire affiliation. All ten students were given experiences with adult medical and surgical patients, obstetrical patients, sick children, and people suffering communicable diseases. Of the ten students, nine received experience in the operating rooms. Five spent some time on the eye, ear, nose and throat wards. Two students received experience on a ward where men with nervous ailments were treated, and two others had an experience on a gynecology ward (Illinois Training School for Nurses, 1918-1920).

Clearly, not all students had similar experiences. Even in those areas of nursing that all students experienced, the amount of clinical experience time varied. The range of time spent in caring for adults with surgical conditions varied from 28 days to 66.5 days. Clinical experience time among patients with medical conditions ranged from 21 to 44.5 days. On the obstetric ward, the minimum clinical experience was 35.5 days; the maximum was 60 days. The minimum practice in the operating rooms was 31 days; the maximum

experience amounted to 55 days. On the pediatric wards the range of clinical experience time varied from 20 to 60 days. The least amount of clinical experience in communicable disease conditions during this affiliation was 11 days, while the maximum was 72 days.

The records of seven of these ten students contained a summary of classroom instruction. These summaries showed considerable variation in the subjects taught and in the instructional time, as can be seen in Table 13. All seven students were taught Nursing Techniques. Of the seven students, two received 20 hours of instruction, three received 19.5 hours, one received 19 hours, and one received 13 hours. All students had classroom instruction in Obstetrics and Obstetric Nursing, but the amount of instruction varied from four hours in the case of one student to 20 hours received by two students. Six students were taught about Surgical Therapy and Surgical Nursing. The amount of instruction varied from three to eight hours. The same six students received instruction in Medical Conditions and Medical Nursing. Of these six students, four received seven hours of instruction in this course, while one received four hours and the last received five hours of teaching about Medical Conditions and Medical Nursing.

Six students were instructed in Pediatrics. The instruction ranged from 4 to 11 hours. Likewise, Communicable Diseases was taught to six students, with a similar range of instructional hours. Eye, Ear, Nose and Throat Conditions were taught to five students. Three of them got five hours of instruction and two got six hours. Four students were taught Urinalysis; three had five hours of

Table 13.--Hours of classroom instruction received by seven students from Newberry State Hospital on nine-month affiliations at Illinois Training School for Nurses, 1918 to 1920.

Subject	Hours of Instruction Received by Each of Seven Students						
	Student 1	Student 2	Student 3	Student 4	Student 5	Student 6	Student 7
Nursing Techniques	20	20	19	19.5	13	19.5	19.5
Obstetrical Nursing	9	10	8	20	20	4	5
Medical Nursing	7	5	7	7		4	7
Surgical Nursing	5	5	8	7		3	5
Pediatric Nursing	5	9	6	5	11	4	
Communicable Disease	6	3	9	11		4	4
Eye, Ear, Nose & Throat Conditions	6	5	6			5	5
Ethics	7	6		6	8	5	
Nursing in Clinics		5				5	1
Urinalysis	6	5		5		5	
Materia Medica					20	5	11
Pathology			1	8		1	
Administration in Nursing			5				
Social Services				4			
Diseases of the Special Senses						3	
Nervous Diseases					2	1	
Anatomy/Physiology					3		
History of Nursing							
Total	71	73	69	92.5	77	63.5	57.5

instruction and one had six hours. Three students received classroom instruction about nursing in clinics. Five hours of instruction in this subject were given to two students, while one student got one hour. Five of the students received from five to eight hours' instruction in Ethics during this affiliation. Two students received one hour's instruction in Pathology, but one student had eight hours' instruction in that subject. Materia Medica was taught to two students. One had 20 hours of instruction in Materia Medica; the other received only 11 hours. One student was credited with two hours in Anatomy and Physiology and three hours of History of Nursing. These lessons were not shared by any other student from Newberry State Hospital Training School for Nurses. Another student was instructed for one hour in Nervous Diseases and three hours in Diseases of the Special Senses. Still another student was lectured for five hours in Administration in Nursing, and a fourth had four hours of lecture in Social Services, which was received by no other student from Newberry State Hospital (Illinois Training School for Nurses, 1918-1920). Lack of standardization in classroom teaching was evident during this affiliation at Illinois Training School.

The school of nursing at Newberry State Hospital was a small school. An accounting of graduates mentioned in The History of Luce County showed that 49 nurses had graduated in the 16 years starting with 1910 and concluding with 1925 (Mattson, 1981). The largest graduating classes had seven members. Those classes had graduated in 1912 and 1918. Subsequent classes were smaller. In the pamphlet



Fifty Years of Progress it was reported that only three students were enrolled in the program in 1924 (Newberry State Hospital, 1946). The Michigan Board of Registration of Nurses and Trained Attendants had ruled on December 5, 1923, that no school with fewer than 15 students could be accredited (Moore, 1921-1928). The school was informed in 1924 that unless it could attract more students, it would be removed from the accredited list. Evidently, authorities decided to close the school. However, the class then in training was permitted to complete its course. The three women in that last class graduated on June 26, 1925 (Newberry State Hospital, 1946).

Houghton County Training School for Nurses,  
Laurium, 1908 to 1932

Houghton County Training School for Nurses, the second hospital school of nursing to open in Houghton County, was operated "in connection with," as the corporate articles phrased it, Calumet Public Hospital at Laurium, Michigan (Articles of Association of the Houghton County Training School for Nurses, Article II, 1908). The trustees of the school declared they had banded together to establish a school where "those desirous of acquiring knowledge and experience in the nursing and care of sick persons may receive such instructions and experience; and to grant certificates or diplomas evidencing the proficiency of those attending such school" (Articles of Association of the Houghton County Training School for Nurses, Article II, 1908). At the time of incorporation the school and the hospital, in which it was housed, were located at the corner of

Third and Florida Streets in Laurium in a large former family dwelling that had a capacity of 25 beds (Polk's Medical Directory, 1910). According to a local historian, a 20-bed brick hospital structure was built in 1920 and 1921 at 205 Osceola Street (Monette, 1978). This structure was occupied in 1922. There the school operated until it closed in 1932.

Marie Belle McCabe (1930) listed this school among those accredited in the first aggregation of schools accredited by the Michigan State Board of Registration of Nurses. The Michigan State Board of Registration of Nurses and Trained Attendants at its January 5, 1920, meeting revoked this accreditation because an instructor and other teaching facilities were lacking (Moore, 1920-1921). Then, on April 24, 1922, the Michigan Board of Registration of Nurses and Trained Attendants restored accreditation because affiliation for experiences in Medical Nursing had been initiated and the school planned to hire an instructor and a graduate nurse as night supervisor (Moore, 1921-1928).

Calumet Public Hospital was founded by Dr. Albert I. Lawbaugh and 14 other men who wished to:

endow a public hospital within the township of Calumet, Houghton County, Michigan, for the care or relief of indigent or other sick infirm persons, and to receive from those charitably inclined, gifts or grants of money, or real or personal property for the better equipment, maintenance and support of said hospital. (Articles of Association of the Calumet Public Hospital, Article II, 1908)

This hospital had only 25 beds and was housed in a wooden structure. Nevertheless, it had an operating room and an ambulance service (Polk's Medical Directory, 1910). By 1920 this frame building and

its equipment were outdated. A brick building was, therefore, constructed. The new building, on Osceola Street, had operating rooms, a delivery room, a laboratory, X-ray facilities, and classroom space in addition to accommodating 21 patients (Monette, 1978).

Nettie Lester Bennett, who had been issued license number 50 as Registered Nurse in Michigan on February 9, 1910, according to records in the office of the Houghton County Clerk, was listed in the Houghton County Directory for 1909 as matron at Calumet Public Hospital (Houghton County Clerk, 1910-1958; Polk's Houghton County Directory, 1909). She was a 1909 graduate of Houghton County Training School for Nurses (Michigan State Board of Registration of Nurses, 1910-1914). By 1910 Nettie Lester Bennett was listed in Polk's Medical Directory as superintendent. Seven other women occupied the position of superintendent of the hospital during the time the school of nursing operated, according to records found in the Medical Library of Calumet Public Hospital. Each functioned simultaneously as superintendent of the hospital, superintendent of nurses, and principal of the school of nursing.

### Faculty

McCabe (1930), in the account about Houghton County Training School for Nurses, related that the superintendent of nurses and the medical staff taught student nurses. Mary Bobbio Johnson, a nurse who graduated in 1923, confirmed this in an interview conducted at her home on August 10, 1984. She recalled that physicians and head

nurses had taught her and her classmates. Superintendents of nurses, during the time Mary Bobbio Johnson was in school, were Minnie Paynter, Catherine Mairle, and Agnes K. Paulson. According to accounts in Record of Registered Nurses, Minnie Paynter had graduated in 1901 from Lake Superior School for Nurses, and Agnes K. Paulson had graduated in 1918 from Calumet and Hecla Hospital Training School for Nurses (Michigan State Board of Registration of Nurses, 1910-1914, 1914-1920). No record of Miss Mairle's education was found.

In 1920 the Michigan State Board of Registration of Nurses removed this school from the list of accredited schools because it was "still without an instructor and other teaching facilities" (Moore, 1920-1921, p. 3). When the school's accredited status was reinstated, two conditions that were met dealt with hiring two graduate nurses to assist with teaching. Who filled these roles from 1922 to 1924 was not recorded. However, among those who later occupied these positions were Manila Noetzel Gipp and Laone Therrien LaBonte.

Manila Noetzel Gipp related, during an interview on August 11, 1984, that she had been hired in 1924 to teach probationers by Florence Feldhammer, who was superintendent of nurses. Subsequently, Mrs. Gipp was made surgery supervisor. In this role she continued to teach. Then, when Miss Feldhammer resigned in 1926, Mrs. Gipp, who was then Miss Noetzel, became superintendent of nurses (McCabe, 1930). Miss Noetzel, a 1924 graduate of Marian

Louise Withey School of Nursing at Blodgett Hospital, remained as superintendent of nurses until 1934. Laone Therrien LaBonte, another graduate of Marian Louise Withey School of Nursing, reported during an interview on February 14, 1984, that she became assistant superintendent in 1927. She remained until some time after the school closed in 1932.

Names of nurses who occupied the role of night supervisor from 1922 until 1930 were not recorded. Because the school remained accredited throughout that period, a night nurse must have been employed. Emeline Holt was night supervisor in 1930 (Houghton County Training School for Nurses, 1930). In 1932, when the school closed, Mamie Siira, an alumna of 1930, supervised students' practice on night duty (Pullen, 1962).

### Students

McCabe (1930) reported that five women were admitted in the first class in 1908. Three of these women had nursed before, so they were allowed to graduate after only one year's training. According to Records of Registered Nurses, they were Gertrude L. Goode, Nettie Laye Lester (later Mrs. Bennett), and Clara Louise Pellstring (Michigan State Board of Registration of Nurses, 1910-1914). The remaining two, who graduated after a three-year program, were Katherine M. Sterbenz and Lucile Ann Schuler (Houghton County Training School for Nurses, 1908-1932). The Training School Record at this school accounted for a total of 76 graduates during the

school's operation (Houghton County Training School for Nurses, 1908-1932).

The ages of the student nurses at the time of their admission ranged from 18 years to 32 years. None was known to be married when admitted to the school, but in the case of one student, who was dismissed, a notation indicated that she had been married for the last three months (Houghton County Training School for Nurses, 1908-1932). Students, it was reported by McCabe (1930), were paid a stipend of \$4 each month during the first year in school and \$7 a month for the next two years. This changed in 1930, according to the report to the Michigan Board of Registration of Nurses and Trained Attendants, so that senior students received an allowance of \$9 each month (Houghton County Training School for Nurses, 1930). In addition, student nurses were provided with laundry, board, and room (McCabe, 1930). Until 1924, nurses lived in quarters in the hospital. Afterward, Manila Noetzel Gipp reported, they lived in a home that had been bequeathed to the hospital by Dr. Lawbaugh, one of the founders of the hospital and the school of nursing (M. N. Gipp, personal communication, August 11, 1984). At the nurses' home the activities of student nurses were supervised by the housemother, Miss Emma Petermann. Mrs. Gipp recalled that student nurses were allowed one late leave until midnight each week. Otherwise, they were expected to be in by 10:30 p.m.

Until 1921 an eighth-grade education was all that was required for entry. Of the 16 students admitted from 1918 through 1921, five were high school graduates. Four had only an eighth-grade

education. Two had one year of high school. Two other students had two years of high school, and one had completed three years of high school. The amount of schooling of the two remaining students was not reported (Houghton County Training School for Nurses, 1908-1932). One of the high school graduates had attended two summer sessions at a normal school, according to the Training School Record (Houghton County Training School for Nurses, 1908-1932). After 1921 this disparity in preparatory education diminished because at least two years of high school was required for admission by Act 255 of Michigan Public Acts of 1921 (Doland, 1921). In her account about the school, McCabe (1930) indicated that in 1930 minimum preliminary preparation for admission to this school became high school graduation. Thus, the disparity was further reduced.

### Curriculum

McCabe (1930) reported that no records remained from the early years to reveal what courses had been taught. She pointed out that until 1924, students were accepted whenever such an action suited both the student and the school. Only in 1924 were classes organized and class schedules followed (McCabe, 1930). Nevertheless, the summary record of a student who entered the school on October 10, 1915, and completed her schooling on October 2, 1918, did demonstrate what courses were studied. This record, however, did not list hours of instruction. The courses recorded as having been studied in the first year were Theory of Nursing, Hygiene, Anatomy, Physiology, Dietetics, Bandaging, Urinalysis, and

Massage. In the second year this student studied Theory of Nursing, Hygiene, Anatomy, Physiology, Dietetics, Cooking, Bandaging, Surgery, Gynecology, Materia Medica, Emergencies, and Massage. In the third year she studied Theory of Nursing, Surgery, Gynecology, Contagious Disease, Obstetrics, and Administration in Nursing. Her record showed that she spent three months at Women's Hospital and three months at Herman Keifer Hospital during her last year (Houghton County Training School for Nurses, 1908-1932). These affiliations had been arranged after the Michigan Board of Registration of Nurses had notified the superintendent of nurses at Calumet Public Hospital in a letter written on February 8, 1917, that affiliation for experience in Obstetrical Nursing and either Pediatric Nursing or care of patients with contagious diseases must be contracted (Foy, 1917).

McCabe (1930) displayed the curriculum for 1929. In the first two years at the home school, 447 hours of instruction occurred. The senior year was filled with affiliations, but the amount of instruction during those affiliations was not mentioned. In the first year, 285 hours of instruction were offered in the following courses: Anatomy and Physiology, 45 hours; Materia Medica, 30 hours; Ethics, 15 hours; Dietetics, 30 hours; Practical Demonstrations, 95 hours; Bandaging, 10 hours; History of Nursing, 15 hours; Bacteriology, 30 hours; and Urinalysis and Pathology, 15 hours. The second year contained 162 hours of instruction: Medical Nursing, 20 hours; Surgical Nursing, 20 hours; Emergency Nursing and



First Aid, 10 hours; Operating Room Technique, 10 hours; Psychology, 15 hours; Hygiene and Sanitation, 15 hours; Eye, Ear, Nose and Throat, 10 hours; Skin and Venereal Diseases, 10 hours; Obstetrics, 30 hours; Orthopedics, 12 hours; and Gynecology, 10 hours. During the third year students affiliated at Herman Keifer Hospital for Tuberculosis and Communicable Disease, at Children's Hospital for Pediatrics and Infant Feeding, and at Grace Hospital for Practical Dietetics and Medical Nursing. No amount of instruction for these courses was listed.

In 1930 the superintendent of the school for nurses at Calumet Public Hospital reported to the Michigan Board of Registration of Nurses and Trained Attendants that the curriculum contained 477 hours in the first two years. The last year was taken up in affiliations. The first term had 225 hours of instruction proportioned as: Anatomy, 45 hours; Materia Medica, 30 hours; Ethics, 15 hours; Dietetics, 30 hours; Practical Demonstrations, 95 hours; and Bandaging, 10 hours. In the second term 90 hours of instruction was given. It was apportioned as follows: Anatomy continued; History of Nursing, 15 hours; Dietetics, 30 hours; Bacteriology, 30 hours; and Urinalysis and Pathology, 15 hours. During the third term 90 hours of instruction was, likewise, provided. It consisted of: Medical Nursing, 20 hours; Surgical Nursing, 20 hours; Emergency and First Aid, 10 hours; Operating Room Technique, 10 hours; Psychology, 15 hours; and Hygiene and Sanitation, 15 hours. In the fourth term 72 hours of instruction occurred as: Eye, Ear, Nose and Throat, 10 hours; Skin and Venereal

Diseases, 10 hours; Obstetrics, 30 hours; Orthopedics, 12 hours; and Gynecology, 10 hours. During the senior year, students affiliated at Herman Keifer Hospital for Tuberculosis and Contagious Diseases, at Children's Hospital for Pediatrics and Infant Feeding, and at Grace Hospital for Practical Dietetics and Medical Nursing (Houghton County Training School for Nurses, 1930).

The students' practical experience in 1930 was reported to the Michigan Board of Registration of Nurses and Trained Attendants as: 95 days of Elementary Nursing during the first year, 210 days of Medical Nursing during three years, 237 days of Surgical Nursing during three years, 31 days of Obstetrical Nursing in the second year, 30 days of Maternity Nursing in the second year, 30 days of Nursery during the second year, 90 days of Children's Nursing in the third year, 90 days of Contagious Nursing during the third year, and 90 days of Operating Room during the second and third years. Students also experienced 90 nights of duty and 60 days in the diet kitchen during the three years. Each student received 14 days of vacation each year. A shift of duty, whether day or night, was ten hours long, and a week of duty contained 60 hours (Houghton County Training School for Nurses, 1930).

Bertha Pullen, the consultant to the Michigan Board of Registration of Nurses, in her letter of December 20, 1962, wrote that at the time this school closed in 1932, the first and second years of the curriculum contained 557 hours of instruction. The last year was taken up in affiliations, as before. The consultant

reported that the course offerings for the first year were as follows: Anatomy, 90 hours; Materia Medica, 45 hours; History of Nursing, 15 hours; Bacteriology, 30 hours; and Pathology, 15 hours. During the second year the courses were Medical Nursing, 20 hours; Surgical Nursing, 20 hours; Emergency Nursing, 10 hours; Operating Room Technique, 15 hours; Psychology, 15 hours; Hygiene and Sanitation, 15 hours; Eye, Ear, Nose and Throat, 10 hours; Skin and Venereal Diseases, 10 hours; Obstetrics, 30 hours; Orthopedics, 12 hours; and Gynecology, 10 hours. In the senior year the affiliations at Children's Hospital, Grace Hospital, and Herman Keifer Hospital occurred. A facsimile of the letter listing this curriculum may be seen in Appendix A.

The accumulated clinical experience of graduating seniors in 1932 was reported as: 120 days in the pre-clinical course during the first year; 210 days in Medical Nursing; 237 days of Surgical Nursing experience; 90 days of Obstetric Nursing experience, including time in caring for newborns; 90 days' experience with Communicable Diseases; 90 days in caring for sick children; 90 days in diet kitchen; and 60 days in the operating rooms. Each of the four seniors had experienced 90 nights of duty during the three years, and each had received one month of vacation each year (Pullen, 1962).

On May 18, 1932, according to the minutes of the Michigan Board of Registration of Nurses and Trained Attendants, that board was notified of the intent of Calumet Public Hospital to close its school of nursing (Stahlnecker, 1928-1934). The reason, alluded to

in a letter from the Secretary of the Michigan Board of Registration of Nurses and Trained Attendants written on December 4, 1931, was "financial problems." Manila Noetzel Gipp, who was superintendent of nurses at Calumet Public Hospital when its school for nurses closed in 1932, stated that the depression had seriously affected the hospital budget. Expenses had been trimmed and salaries had been cut back, but the financial drain continued because revenues were reduced. Therefore, Mrs. Gipp said, the board of trustees elected to close the school of nursing rather than persist in keeping it open in the presence of the rising cost of maintaining an accredited program while hospital revenues were reduced (M. N. Gipp, personal communication, August 11, 1984).

The superintendent of the hospital had been notified in a letter written by the Visiting Representative of the Michigan Board of Registration of Nurses and Trained Attendants on September 18, 1931, that chemistry must be added to the curriculum because it would be among the subjects tested on the licensure examinations beginning in the spring of 1933 (Smith, 1931). Furthermore, the superintendent had been informed by the Secretary of the Michigan Board of Registration of Nurses and Trained Attendants, in a letter written on July 13, 1931, that the board recommended employing another graduate to assist in supervising students (Stahlnecker, 1931). Confronted by these pressures, the hospital trustees explored the cost of operating a hospital without a school of nursing. They decided, after studying the issue, that closing the

nurses' home, selling it, and operating the hospital with a staff of graduate nurses was the reasonable and financially responsible course, Mrs. Gipp explained in the interview of August 11, 1984.

Letters in the files of the Medical Library at Calumet Public Hospital disclosed the arrangements that were made to enable students enrolled in the program to continue their studies at other hospital schools of nursing in the state. The two first-year students were accepted by Farrand Training School for Nurses at Harper Hospital in Detroit (Robinson, 1932). The three second-year students were transferred to Hackley Hospital School of Nursing at Muskegon (Beers, 1932). The three third-year students were sent to Marian Louise Withey School of Nursing at Blodgett Memorial Hospital in Grand Rapids (Rehm, 1932).

Calumet & Hecla Hospital Training School for Nurses,  
Calumet, 1913 to 1921

Uncertainty exists about when the school of nursing at Calumet & Hecla Hospital opened. A letter written by Bertha Pullen as consultant for the Michigan Board of Nursing disclosed that the school was approved by the Michigan State Board of Registration of Nurses in 1913 (Pullen, 1962). The hospital was incorporated in that year. The corporate articles of the hospital declared that one of the purposes of the hospital was to maintain a training school for nurses (Articles of Association of the Calumet & Hecla Hospital, Article II, 1913). The earliest date found on a record of student experiences was May 1, 1913 (Illinois Training School for Nurses, 1913-1921). However, at least one woman, who claimed to have

graduated from Calumet & Hecla Hospital Training School for Nurses, was issued a license to practice as Registered Nurse in Michigan, according to an account in Record of Registered Nurses, before 1913. The woman declared she had graduated from Calumet & Hecla Hospital Training School for Nurses on May 31, 1904 (Michigan State Board of Registration of Nurses, 1910-1914). She was granted license number 181.

There is no doubt about when the school closed. Minutes of the meeting held on May 24, 1921, by the Michigan Board of Registration of Nurses and Trained Attendants contained the information that Calumet & Hecla Hospital had notified the board that the school of nursing had been discontinued (Moore, 1920-21).

West (1930) claimed that Calumet & Hecla Hospital opened in 1870. According to Polk's Medical Directory (1910), the hospital had a capacity of 25 beds. Pullen (1962), however, indicated that the hospital had a capacity of 30 adult beds during the time the school of nursing operated. The hospital was equipped with an operating room, delivery rooms, laboratory, X-ray facilities, medical library, dispensary, minor surgery or emergency room, and several offices for the use of physicians.

This hospital was set up by the Calumet & Hecla Mining Company to meet the hospitalization needs of its employees and their families. All employees were assessed monthly fees to help defray the costs of the hospital. For example, in 1913 Calumet and Hecla Mining Company Report for the year ending December 31, 1913,

President Quincy A. Shaw noted that married men paid \$1 per month, while single men paid \$.50, for the hospitalization benefit (Shaw, 1914). When the hospital was incorporated in 1913, 500 shares were let. Three individuals held the stock. James MacNaughton, the general manager of Calumet and Hecla, as trustee of the hospital, held 497 shares. James MacNaughton, Dr. A. B. Simonson, and Harry Northy each held one share of the remaining three shares (Articles of Association of the Calumet & Hecla Hospital, 1913, Article VII). Clearly, the hospital was a unit of the Calumet and Hecla Mining Company. Therefore, administrative decisions were made by central administration. However, the medical staff was organized, and there was a superintendent of nurses who reported to the chief of the medical staff. He, in turn, reported to the general manager of the company (Smith, 1930).

### Faculty

The superintendent of nurses at Calumet & Hecla Hospital Training School for Nurses when the school was initially approved by the Michigan State Board of Registration of Nurses was Millicent B. Northway. Miss Northway, according to Record of Registered Nurses, was a graduate of Colorado Training School for Nurses in Denver (Michigan State Board of Registration of Nurses, 1910-1914). No other information about her preparation or experience, however, was available.

Miss Northway, according to Pullen (1962), taught a great many courses. She guided probationers through the primary nursing

techniques. With Dr. Penney she taught Anatomy to junior class members, as students who had successfully completed the probationary period were known. To the intermediate students, i.e., third-level students, Miss Northway taught Dietetics and Practical Dietetics, Materia Medica, and Ethics. With Dr. Davis she taught Obstetrics and Care of Infants. Katherine Spehar, another nurse, taught Nursing to students who had concluded the probationary period. A third nurse, Jennie Leveoux, taught Massage. No records were available to tell where any of these nurses were educated. Physicians, as elsewhere, participated in teaching student nurses. Dr. Todd taught Bacteriology, Dr. Simlan taught Pediatrics, Dr. McKinna taught about venereal disease, and Dr. Edwards taught about eye, ear, nose, and throat conditions. Dr. Gordon lectured on medical diseases, and Dr. Rees lectured on surgical conditions. Pullen (1962) stated that nurses were in charge of the wards and the operating room at this hospital. Doubtless, they assisted in teaching students when students had clinical experience in those services.

Records from the affiliation at Illinois Training School showed that after Miss Northway left in 1915, six other nurses occupied the position of superintendent of nurses before the school closed in 1921 (Illinois Training School for Nurses, 1913-1921). These nurses, as was the custom elsewhere, directed both nursing service and nursing education. No record remained to tell where they were educated. Only their names were found on records of students who had affiliated at Illinois Training School for Nurses. They were



Sydney Hope Dorman, Irene Wright, Elza M. Cameron, Anna C. McCarthy, Frances I. Caldwell, and Katherine Holehouse. These same records, however, did not contain any information about who taught students during their affiliation at Illinois Training School for Nurses.

### Students

No record was available that tallied the number of students who enrolled in or graduated from the program after it was accredited by the Michigan State Board of Registration of Nurses. However, if, as Pullen (1962) wrote, all students affiliated during their senior year at Illinois Training School, then the number of students who processed through this affiliation reflected the enrollment in the school. Forty students from Calumet & Hecla Hospital Training School for Nurses affiliated at Illinois Training School according to records maintained at the Special Collections Department of the Library at the University of Illinois at Chicago (Illinois Training School for Nurses, 1913-1921). The year when the greatest number of seniors from Calumet & Hecla Hospital Training School for Nurses were at Illinois Training School was 1918. That year seven seniors affiliated in Chicago. In 1917 six seniors affiliated at Illinois Training School. In the years 1915, 1919, and 1920 five seniors from the Calumet school were at the Chicago school. Four seniors affiliated in 1921. Three seniors were at the Chicago school in 1914 and 1916. In 1913 only one senior had clinical experience at Illinois Training School (Illinois Training School for Nurses, 1913-1921).

Student nurses in this program were women who were at least 18 years of age at the time of admission. At least one year of high school was required for admission to the program (Pullen, 1962). High school graduation was preferred at this school. As a result, many students had more than one year of high school as preparation. Of the 40 students from this school who affiliated at Illinois Training School for Nurses, 12 were high school graduates. Three others had at least three years of high school. Two had two years of high school. One student had a year and a half of high school preparatory education. Two were recorded as having only one year of high school. For 20 students, educational preparation was not recorded on the file cards that summarized the students' course work and experiences while they were at Illinois Training School (Illinois Training School for Nurses, 1913-1921).

At Calumet & Hecla Hospital Training School for Nurses, first-year students received \$22 as a monthly allowance (Pullen, 1962). Second-year students were paid \$27 each month, and third-year students had a stipend of \$33 each month. Students lived in a nurses' home a short walk from the hospital, according to Alice Stillman O'Neil, a member of the class of 1921, who told of her experiences as a student nurse during an interview at her home on August 11, 1984. Mrs. O'Neil said that a housemother managed the home and that graduate nurses also lived in this dwelling from time to time. She also recalled that if students' homes were nearby, they could live with their families (A. S. O'Neil, personal

communication, August 11, 1984). Each student was given two half-days off each week and two weeks of vacation each year. A day shift comprised eight hours. A night shift had 11 hours, according to Pullen (1962).

### Curriculum

No records of the school of nursing at Calumet & Hecla Hospital were available, but information about the curriculum was contained in the December 1962 letter written by the consultant to the Michigan Board of Nursing. This was supplemented by material gathered during the interview on August 11, 1984, with Alice Stillman O'Neil and by records that summarized the learning experiences of students during their affiliation at Illinois Training School for Nurses. Records of this affiliation were available at the Special Collections Department of the library of the University of Illinois at Chicago.

According to Pullen (1962), the program began with a two-month-long preliminary course, during which probationers received six hours of instruction in primary nursing techniques. The textbook used to teach nursing techniques was Isabel McIsaac's Primary Techniques. Students who successfully passed the probationary period became juniors. As juniors the student nurses were taught 18 hours of Nursing and 35 hours of Anatomy. The textbooks reportedly used with these two courses were Isabel Hampton Robb's Nursing, Its Principles and Practice and Diana Kimber's Anatomy. During the intermediate year the curriculum contained Dietetics, 8 hours;

Practical Dietetics, 20 hours; Materia Medica, 14 hours; Ethics, 4 hours; Bacteriology, 6 hours; Pediatrics, 4 hours; Venereal Diseases, 3 hours; Eye, Ear, Nose and Throat, hours not reported; Bandaging and Minor Surgery, hours not reported; Massage, 7 hours; Medical Diseases, 5 hours; Surgical Conditions, 10 hours; and Obstetrics and Care of Infants, 12 hours. In addition, the students affiliated for six months during the senior year at Illinois Training School (Pullen, 1962).

The records in the Special Collections Department of the library of the University of Illinois at Chicago showed that one to four students were sent on affiliation at the same time (Illinois Training School for Nurses, 1913-1921). Thirty-four students spent six months on this affiliation. Three others spent seven and one-half months, rather than the customary six months, on this affiliation. Hence, a total of 37 students from Calumet & Hecla Hospital Training School for Nurses affiliated at Illinois Training School for Nurses. Three students left without completing the affiliation, and the record of one student, the first to affiliate, did not contain information about clinical experience. That record merely provided the dates of the affiliation. The records for the remaining 33 students showed that all had clinical experiences on obstetric, pediatric, and medical wards.

The amount of clinical experience on the obstetric ward ranged from a minimum of 29 days to a maximum of 103 days. On the pediatric wards the minimum clinical experience time was 26 days and the maximum was 64.5 days. The time allotted to clinical experience

on medical wards ranged from 30 to 92 days. Twenty-five students, those who came after 1916, spent one to three days in orientation. Of the 33 students whose records showed clinical experiences of six months' duration, seven whose affiliations occurred before 1916 had clinical experience time allocated as follows: Maternity Ward, two months; Medical Wards, two months; Operating Rooms, one month; and Pediatric Wards, one month.

Seventeen of the 26 students who spent six months on this affiliation from 1916 onward had experiences in other areas in addition to the pediatrics, maternity, and medical wards. Operating-room experience was not provided for all students after 1915. However, eight of the students who came during the last six years of this affiliation spent from 28 to 55 days of clinical experience in the operating rooms. Six students who came after 1915 had from 23.5 to 50 days of clinical experience on contagious-disease units. Six students during the last six years also had experience with patients who suffered with eye, ear, nose, or throat conditions. These experiences ranged from 2 to 34 days. Five students who were at Chicago after 1915 accumulated from 3 to 14 days of experience on men's surgical wards. Three of the students who came after 1915 had experience on a men's neurologic ward. This clinical experience ranged from 20.5 to 30 days. Two of the students who were in Chicago during 1919 cared for patients on an influenza ward. One student spent 14 days there; the other spent four days. A student who affiliated in 1921 accumulated 11 days'

experience with patients in the receiving ward. Clearly, the clinical experiences of those students who affiliated from 1916 through 1921 were less uniform than were the clinical experiences of students who affiliated from 1914 to 1916 (Illinois Training School for Nurses, 1913-1921).

Classroom instruction was not recorded for all students during the affiliation at Illinois Training School. The amount of instruction reported for the 27 students on whose records classroom teaching was recorded varied from 3 to 66 hours. Those students who affiliated from September 1918 through April 1920 received the greatest amount of classroom teaching. No student during that time received fewer than 51.5 hours of instruction. The peak of 66 hours of classroom instruction was reached during this period (Illinois Training School for Nurses, 1913-1921).

Twenty-six students were taught Nursing Techniques. Instructional time for Nursing Techniques varied from 6 to 46 hours. Sixteen of the 27 students received instruction in Children's Diseases. The classroom time in Children's Diseases varied from 3 to 12 hours. Twelve students received instruction in Ethics and Administration, and 12 students, not necessarily the same 12 who received instruction in Ethics and Administration, had lectures in Obstetrics. The hours of class in Ethics and Administration ranged from one to eight. Class time in Obstetrics ranged from 3 to 20 hours. Eleven students had lessons in Orthopedics. Time allocated to Orthopedics classes ranged from one to five hours. Nine students received instruction in Eye, Ear, Nose, and Throat. Class time

ranged from three to nine hours. Eight students were instructed in Skin and Venereal Diseases, Gynecology, and Communicable Diseases. Instructional time in Skin and Venereal Diseases ranged from one hour to six hours, while the classes in Gynecology accounted for a minimum of one hour up to a maximum of ten hours. Instruction in Communicable Diseases ranged from one hour to eight hours. Social Service and Public Health was taught to seven of the affiliating students. The amount of instruction in this field ranged from two to ten hours. Eight students received from one to five hours of instruction in Public Sanitation. Another group of eight students received from 1 to 11 hours of instruction in Nursing in Clinics. Two students received lessons in Materia Medica. One had eight hours of instruction; the other had 11 hours. Two students each received a one-hour lesson in Pathology. Two different students were taught about Surgical Diseases. One was taught for 11 hours and the other for 12 hours. One student received nine hours of instruction in Diet Therapy. Another student, one of the earliest to affiliate, received six hours of instruction in Bandaging (Illinois Training School for Nurses, 1913-1921).

No two students, even in the same group of affiliates, received equal amounts of instruction. Only two students who affiliated at the same time received classroom instruction in the same fields. However, one received a total of 62.5 hours of instruction. The other received 59.5 hours. Table 14 shows the amount of instruction

each of these two students received in their courses during their affiliation at Illinois Training School.

Table 14.--Comparison of amount of classroom instruction received by two students from Calumet & Hecla Hospital who affiliated at Illinois Training School, March 12, 1919, to September 11, 1919.

Course	Hours of Instruction	
	Student 1	Student 2
Nursing Techniques	19	19
Surgical Diseases	11	12
Gynecology	10	6
Obstetrics	9	8
Pediatrics	7.5	8.5
Eye, Ear, Nose, and Throat	3	3
Orthopedics	1	1
Public Sanitation	1	1
Skin and Venereal Diseases	1	1
Total	62.5	59.5

The school closed in 1921. Minutes of the May 24, 1921, meeting of the Michigan Board of Registration of Nurses and Trained Attendants revealed that a communication from Calumet & Hecla Hospital stated that the training school for nurses had been discontinued (Moore, 1921-1928). Alice Stillman O'Neil remembered that the hospital had many empty beds when she graduated because, as she put it, "The mines were down" (A. S. O'Neil, personal communication, August 11, 1984). Mrs. O'Neil did not remember if there were underclassmen who had to be transferred to other schools,



and records were not available. In 1921 Calumet and Hecla Mining Company report for the year ending December 31, 1921, President

R. L. Agassiz wrote:

At the beginning of 1921 conditions in copper mining were most unsatisfactory; wages were high and the prices of coal, powder, and all other mining supplies were prohibitive when compared with the market price for copper; the high rate for rock and copper transportation, established by the railroads when under Government control, had not been reduced; the production of copper very much exceeded the demand, the surplus of copper in the hands of the mining companies was being increased monthly, and the market price for the metal was below the cost at which most mines could produce it. As these adverse conditions continued and might continue for an indefinite period, it seemed useless to continue producing copper with so large a surplus on hand and with so little prospect of disposing of it at an adequate price, consequently all operations were suspended on April 1st and remained suspended during the balance of the year. (pp. 8-9)

Although the school closed, the hospital remained open with a graduate nurse staff. The company felt that was more cost effective.

St. Joseph Hospital Training School for Nurses,  
Menominee, 1918 to 1924

St. Joseph Hospital Training School for Nurses opened during the celebration of St. Joseph Hospital's twenty-fifth anniversary in Menominee. The hospital had been purchased by the Sisters of the Third Order of St. Francis in 1893. They had operated its predecessor for four years without owning it, according to a golden jubilee pamphlet issued by the order in 1928 (Sisters of St. Francis, 1928).

The first class of 12 women would enter the school of nursing on September 16, 1918, an account in the local newspaper, the

Herald-Leader of September 14, 1918, announced ("Nurses Training School Will Open," 1918). Minutes of the January 11, 1921, meeting of the Michigan State Board of Registration of Nurses revealed that at that day's meeting the school of nursing at St. Joseph Hospital in Menominee was accredited retroactively, to September 1919 (Moore, 1920-1921). The school closed in April 1924, according to minutes of the April 15, 1924, meeting of the Michigan Board of Registration of Nurses and Trained Attendants (Moore, 1921-1928). How many students graduated from the school is not known, but according to a tally based on the Record of Registered Nurses, 13 nurses who became licensed from 1921 through 1923 graduated from St. Joseph Hospital Training School for Nurses in Menominee (Michigan Board of Registration of Nurses and Trained Attendants, 1921-1925).

During the time the school of nursing was open, the hospital had a capacity of 75 beds. According to the centennial history of Menominee entitled The Past with Remembrance . . . The Future With Longing, the three-story brick structure of 1918 contained operating rooms, a maternity department, an X-ray department, a laboratory, a chapel, and a laundry (City of Menominee Centennial Corporation, 1983).

### Faculty

A news item in the Herald-Leader of August 13, 1918, named Mother Bernarda as superior of St. Joseph Hospital, but the superintendent of nurses mentioned in an account in the September 14, 1918, issue of the Herald-Leader was Ethlyn B. Patterson

("Nurses Training School Will Open," 1918). Sister M. Thaddea Goedde (n.d.), in The Charity of Christ Urges Us, wrote that this first superintendent stayed less than a year. Sister Rufina was sent from Peoria to become the second superintendent of nurses at the school of nursing. She remained until the school closed. No records were available to tell of the educational preparation or experience of any one of these women.

### Students

The names of 12 women who entered the first class of the school of nursing at St. Joseph Hospital in Menominee appeared in the Herald-Leader of September 14, 1918 ("Nurses Training School Will Open," 1918). Three years later a story in the September 6, 1921, issue of the Herald-Leader told of three enrollees for that fall's class. It also told of the graduation of Elizabeth Novek of Menominee and Rega Brazeau of Marinette, two of the 12 women who entered in September 1918 ("New Fall Term at Local Nurses' School," 1921). They were the first graduates of this school. The names of these two women and 11 others who became licensed as Registered Nurse were listed in Record of Registered Nurses, Volume II, as graduates of St. Joseph Hospital Training School for Nurses in Menominee (Michigan Board of Registration of Nurses and Trained Attendants, 1921-1925). To write the examination for licensure, these 13 women must have been at least 21 years old and must have possessed, minimally, an eighth-grade education, as Public Act 319 of 1909 required. The likelihood is great, therefore, that all

entrants into this three-year program were at least 18 years old and had at least a grammar-school education.

### Curriculum

No records remained to tell what these students studied. A notation in the minutes of the January 11, 1921, meeting of the Michigan State Board of Registration of Nurses suggested that St. Joseph Hospital request an affiliation with St. Francis Hospital in Peoria (Moore, 1920-1921). Whether this subsequently occurred was not reported. Regardless, the curriculum offered to students at St. Joseph Hospital in Menominee met with the approval of the Michigan State Board of Registration of Nurses, and the school became accredited and its graduates were permitted to write the licensure examination.

No reason other than the ill health of Sister Rufina was given for closing the school. This reason was advanced in both The Past with Remembrance . . . The Future with Longing (City of Menominee Centennial Corporation, 1983) and in The Charity of Christ Urges Us (Goedde, n.d.). While her failing health prevented her aggressively seeking students and maintaining the program at Menominee, it is likely her order did not feel compelled to send another nurse educator to fill her position because another Catholic hospital, in Hancock, had opened a school of nursing. Perhaps the Franciscan Order felt the other school would provide the religious influence in education of nurses in the Upper Peninsula.

St. Joseph's Hospital School of Nursing,  
Hancock, 1920 to 1974

The account in McCabe (1930) dated the opening of St. Joseph's Hospital School of Nursing as 1920. A notation that this school of nursing could be placed on the list of accredited schools "from September 1st, 1921," was entered in the minutes of the April 24, 1922, meeting of the Michigan Board of Registration of Nurses and Trained Attendants (Moore, 1921-1928, p. 37). That accreditation permitted the graduates of St. Joseph's Hospital School of Nursing to take the examination for licensure as Registered Nurse. Other accreditations followed. Sister Rose Helene, who was director of the school in 1954, stated in information she provided the Michigan Nurses' Association that word was received from the National Nursing Accrediting Service on October 7, 1952, that the school had been granted temporary national accreditation (St. Joseph's Hospital School of Nursing, 1969). This accreditation indicated that the school met educational standards set by the National League for Nursing.

When the school opened in 1920, its program was three years long. In 1969 the curriculum was reduced so graduation would occur after two academic years and one summer session. Including those nurses who graduated on May 18, 1974, 692 nurses graduated from this school (St. Joseph's Hospital School of Nursing, 1974).

Sister Mary Lucinda Savage (1923) in the history of her order, entitled The Congregation of St. Joseph of Carondelet, reported that St. Joseph's Hospital was established in Hancock in 1899 at the

request of the administrator of the Marquette Diocese. The first hospital building, one located on Hancock Street, was purchased by the Sisters of the Congregation of St. Joseph of Carondelet from the Sisters of St. Francis, who had operated a hospital at that site for three years. Five years after this purchase, in 1904, a five-story brick and sandstone structure on Water Street had been built and was occupied (Savage, 1923). This building had operating rooms, a maternity ward with nursery and delivery rooms, laboratory and X-ray department, quarters for nuns and students, and a chapel in addition to space for 50 adult patients (Polk's Medical Directory, 1910). By 1949 these facilities were no longer adequate, so, with the assistance of funds provided by the Hill Burton Act, a larger structure on Water Street was built. Monette (1982) in Hancock, Michigan Remembered, Volume I, wrote that the new hospital, which was occupied late in August 1951, contained operating rooms, a large pharmacy section, physiotherapy and outpatient departments, a maternity unit with full-term and premature nurseries and labor and delivery rooms, a laboratory section and a large X-ray department, a pleasant cafeteria, a delightful coffee shop, and a beautiful lobby. This hospital had space for 75 adult beds and 20 cribs and bassinets.

The first hospital administrator was Sister Liguori McNamara. She had served as a nurse in the Spanish-American War in Kentucky, Georgia, and Matanzas, Cuba. Earlier, she had been administrator of St. Joseph's Hospital in Kansas City, Missouri (Savage, 1923). Where Sister Liguori was educated is not known. Although she had

wished to establish a school of nursing at the very beginning, the school opened during the stewardship of her successor, Sister Georgia Walsh. Information in the files of the medical library at Poartage View Hospital, the institution that succeeded St. Joseph's Hospital, disclosed that in addition to Sister Georgia Walsh nine other nuns served as hospital administrator during the 24 years the school of nursing operated.

It was during the tenure of Sister Jean Francis Haug, two years before the school of nursing closed, that the hospital shifted from a private religious institution to a community hospital. A press release of March 28, 1972, found in the files of the Medical Library at Portage View Hospital, indicated that the change in corporate structure resulted in a change in the board of trustees. Members of the religious community comprised a minority of the new board (St. Joseph's Community Hospital of Hancock, Michigan, 1972). The name of the hospital was changed to reflect the change in control. It became St. Joseph's Community Hospital. It was by that name that the hospital was known when the school closed in 1974.

Throughout the time the school of nursing operated, the positions of superintendent of the hospital and superintendent of nurses were filled by two different people. Until 1960 the head of the school of nursing also headed nursing service. After 1960, however, the director of the school of nursing had no nursing service responsibilities.

### Faculty

1920s. When the school opened in 1920, responsibility for teaching student nurses was assumed primarily by Sister Mary Irmina Dougherty. She was assisted by nursing staff and other hospital personnel. Physicians helped teach students, and Pediatric Nursing and Diet Therapy were taught on a three-month affiliation at St. Mary's Hospital in Minneapolis. Two students, graduates of 1927 and 1928, recalled during interviews in 1982 that they had been taught Anatomy and Physiology, Materia Medica, Nursing History, and Medical Nursing by Sister Irmina, but that Sister Claran Collins, who was the operating-room supervisor, taught them Surgical Nursing and Surgical Anatomy (A. L. Burbank and C. W. Verrier, personal communications, August 17, 1982). Sister Gervaise Dougherty, a nurse who was also a laboratory technologist, taught them Hygiene and Clinical Laboratory Methods. The supervisor of the obstetric unit, Anna Cummins, taught Obstetric Nursing; a public-health nurse taught about Nursing in Communicable Disease. Dr. Fischer taught Chemistry of Medicine, and Dr. Buckland taught Orthopedics.

Where Sister Irmina Dougherty was educated was not recorded, but it satisfied the Michigan Board of Registration of Nurses because she was granted licensure by reciprocity at the March 4, 1921, meeting of that board (Moore, 1921-1928). She was one of the members of the Congregation of Saint Joseph of Carondelet who had served in the Spanish-American War (Savage, 1923). Neither the education nor the experience of the other three nurses was reported.



1930s. In 1927 the Michigan Board of Registration of Nurses and Trained Attendants had recommended, among other things, that "a younger, full-time, qualified" instructor be employed at St. Joseph's Hospital School of Nursing (Moore, 1921-1928, p. 93). In 1930 Sister Mary Helena Lupton was sent to Hancock as superintendent of nurses and director of the school of nursing. Sister Helena had been a school teacher who became a nurse. She was a graduate of St. Teresa's College in Kansas City. Three students, who were enrolled in the school from 1930 to 1933, remembered that Sister Helena taught all the courses at St. Joseph's Hospital (E. H. Coppo, M. Ross, and D. A. Drouin, personal communications, August 17, 1982). McCabe (1930), however, reported that Sister Mary Helena and six graduate nurse supervisors, with help from the medical staff, taught and demonstrated nursing procedures. Regardless, students were supervised in carrying out patient care by Sister Claran Collins in the operating room, Sister Mechtilda Roessler on the men's floor, Sister Marita Allgaier on the women's floor of the hospital, Helen Hornick on the obstetric unit, and Sister Gervaise Dougherty in the hospital laboratory and X-ray units when students were assigned to those units to help carry out procedures. At night Sara Lane guided student nurses in their practice on the hospital wards (St. Joseph's Hospital School of Nursing, 1930).

Students affiliated during the last six months of their schooling at Providence Hospital in Detroit, where affiliations had been shifted for Obstetrics, Dietetics, and Pediatrics (Report to

Michigan Board of Registration of Nurses and Trained Attendants from St. Joseph's Hospital School of Nursing, 1930). No records about the teachers at Providence Hospital were available. Nor were records available to tell of the education or experience of Sister Mechtilda Roessler or of Sara Lane. Helen Hornick had graduated from St. Joseph's Hospital School of Nursing in 1927. Sister Marita, who later earned a bachelor's degree at Marquette University, had, at this point, a diploma in nursing.

Sister Mary Helena continued to bear much of the responsibility for educating student nurses through 1942, according to reports to the Michigan Board of Registration of Nurses and Trained Attendants (St. Joseph's Hospital School of Nursing, 1935, 1936, 1941, 1942). In 1925 Sister Mary Annella Moppin, who had nine years' experience as a nurse and some postgraduate work, came to Hancock as director of the school (St. Joseph's Hospital School of Nursing, 1935). For that year Sister Helena was the instructor and was able to devote all her energies to teaching. She continued to be assisted by physicians and six nursing supervisors. However, some changes had occurred among the graduate nurse supervisors. Clara Wickley had replaced Helen Hornick as supervisor of the obstetric unit, and Sister Mechtilda Roessler had become night supervisor. Sister Dympna Morgan had taken over the men's floor, and Sister Ildafonse Kelly was in charge of the women's floor. Nothing about the education of the members of the religious community was reported.

The alumnae files, however, showed that Clara Wickley was a 1928 graduate of St. Joseph's Hospital School of Nursing.

In 1936 Sister Helena resumed the directorship of the school. Sister Mary Laurentia Scaletty became the instructor. Sister Laurentia had a Bachelor of Science in Nursing Education from St. Teresa's College in St. Louis, according to the 1941 report to the Michigan Board of Registration of Nurses and Trained Attendants. Both women remained in these positions through 1941 (St. Joseph's Hospital School of Nursing, 1936, 1941).

During this time Sister Mary Helena taught Anatomy, Introduction to Medical Science, Materia Medica, Psychology, Social Problems, Personal and Community Hygiene, History of Nursing, Advanced Nursing, Professional Adjustments I and II, and Psychiatry. She and the hospital chaplain taught Religion. Sister Mary Laurentia taught Nursing Arts, Chemistry, Microbiology, Drugs and Solutions, Surgical Nursing, and, assisted by Dr. Pleune, she taught Contagious and Skin Diseases. Sister Claran taught Operating Room Technique. Miss Manderfield, who was a 1939 graduate of St. Joseph's Hospital School of Nursing and the current obstetric ward supervisor, and Dr. Cooper taught Obstetrics. Public Health was taught by Miss Horn, the public health nurse. Dr. Steward taught Urology. Medical Nursing and Diet Therapy were taught during affiliation for three months at Mercy Hospital in Chicago. Pediatrics was taught on a three-month affiliation at St. Luke's Hospital in Marquette (St. Joseph's Hospital School of Nursing, 1941). This affiliation had been arranged in 1939 (St. Luke's

Hospital, 1939). Miss Hodge, who supervised the pediatric ward and the pediatric outpatient clinic, and Dr. Cooperstock taught the students at Marquette. No record remained of teachers who taught the student nurses during their affiliation in Chicago. According to the 1941 Report to the Michigan Board of Registration of Nurses and Trained Attendants, Miss Manderfield had postgraduate work in obstetric nursing. The report was silent about the education or experience of Miss Horn, the public health nurse.

1940s. For 1942 Sister Helena and Sister Laurentia shifted positions. Sister Laurentia became director of the school and Sister Helena became instructor. Either one or the other taught all but four of the courses offered at Hancock. Dr. Janis taught the third year's Anatomy lectures. Sister Mary Claran continued to teach Operating Room Technique. The hospital chaplain taught Religion, and Miss Horn taught Public Health. Sister Laurentia taught Obstetrical Nursing with assistance from Dr. Cooper and Miss Winter, a 1941 alumna who supervised the obstetrical unit in 1942, according to the report to the Michigan Board of Registration of Nurses and Trained Attendants for that year. Sister Helena taught Contagious Diseases with help from Dr. Pleune. Medical Nursing, which included Introduction to Medical Science, was taught at Mercy Hospital in Chicago, as was Dietetics. Pediatrics continued to be taught at St. Luke's Hospital in Marquette by personnel there.

Sister Mary Fabian Hutti, who had a Bachelor of Science in Nursing Education from Marquette University, had arrived in 1942. She became instructor after Sister Helena left. She remained in that position through 1945. Sister Laurentia, during that time, was director of the school (St. Joseph's Hospital School of Nursing, 1944, 1945). It was Sister Laurentia who, in 1944, organized and convened a school advisory committee, a move strongly recommended by the Michigan Board of Registration of Nurses and Trained Attendants (St. Joseph's Hospital School of Nursing, 1942, 1944, 1945).

Sister Laurentia's teaching load, as director, was less than it had been in 1942, when she had taught 12 courses and Sister Helena had taught eight. In 1955 Sister Laurentia taught Anatomy, Psychiatry, Psychology, Professional Adjustments I, and Social Problems in Health Service. Sister Fabian taught Nursing Arts, Nursing History, Professional Adjustments II, and, with Sister Francis Xavier, she taught Religion. Other nuns, including some who had recently come to Hancock, assumed responsibility for classroom teaching in addition to their hospital duties. Sister Daniel Joseph, the hospital pharmacist and a Creighton University graduate, taught Drugs and Solutions and Materia Medica. Sister James Marie Jackovich, who had a Bachelor of Science in Nursing from St. Louis University, taught Communicable Diseases and Surgical Nursing. She was also the supervisor on the women's floor, where she supervised the practice of student nurses. Sister Naomi Trembl, who had a degree from Avila College and was the night supervisor, taught Hygiene. Sister Grace Marie Gilbertson, who possessed a Bachelor of

Science in Nursing Education from Marquette University, taught Operating Room Technique and supervised the operating rooms. Sister Anselma Matte, who supervised the men's floor, taught Medical Science. Miss Nipert, a 1942 alumna and the obstetric ward supervisor, taught Obstetric Nursing. Miss Wickley, a Red Cross nurse at this point, taught Red Cross First Aid. A physician, Dr. Cooper, taught Anatomy and Urology; another physician, Dr. Janis, lectured in Gynecology (St. Joseph's Hospital School of Nursing, 1944).

Affiliation at Mercy Hospital in Chicago continued for Dietetics and Medical Nursing. In 1943 Pediatric Nursing was added to the affiliation at Chicago. In this year, also, a contractual relationship with Michigan College of Mining and Technology was initiated. It arranged for some courses to be taught at the college by the college faculty. Therefore, Dr. A. B. Kendall taught Bacteriology and Chemistry and Mrs. Price taught Introductory Psychology and Sociology and Social Problems (St. Joseph's Hospital School of Nursing, 1944).

In 1945 there were only a few changes. First Aid was no longer taught, and Mrs. Neal taught Nursing Arts. Mrs. Coon taught Social Problems in Health and Public Health, and Sister Fabian added the teaching of Professional Adjustments I to her load. Nothing was reported about the education or experience of either Mrs. Coon or Mrs. Neal (St. Joseph's Hospital School of Nursing, 1945).

In 1946 Sister Fabian became director of the school; Mrs. Ralph, a hospital school graduate, and Margaret O'Connell, a nurse with a Master of Science degree, were hired to teach. Mrs. Ralph taught Nursing Arts and Communicable Diseases. Miss O'Connell taught Anatomy. Sister Annetta Clare Morin, who was the supervisor on the obstetric ward, taught Obstetrics. No other changes in faculty were reported to the Michigan Board of Registration of Nurses and Trained Attendants in 1946.

By 1947 more changes had occurred. Margaret O'Connell became Margaret Bordeleau, and the association with Michigan College of Mining and College was discontinued. Therefore, Mrs. Bordeleau taught Anatomy, Chemistry, Bacteriology, and Psychiatry; Father Schick, the hospital chaplain, taught Psychology and Sociology as well as Religion. The pharmacist and the hospital supervisors continued to teach. Mrs. Ralph taught Nursing History in addition to the two courses she had taught previously. This reduced Sister Fabian's teaching load to the two courses in Professional Adjustments and Ethics. Sister James Marie and Sister Naomi had switched positions. Sister James Marie became night supervisor, and Sister Naomi had charge of the women's floor (St. Joseph's Hospital School of Nursing, 1947).

Sister Margaret Eileen McLarney, who had a Bachelor of Science in Nursing Education from Catholic University, came to Hancock in 1948 as director of nurses. Father Schick added Ethics to his teaching load, and Mrs. Ralph added Professional Adjustments II. These actions reduced the teaching load of the director, Sister

Margaret Eileen, to one course, Professional Adjustments I. Mrs. Ralph also began to teach Health Service in the Family. Sister Francis Xavier, who was a medical technologist and had earned a Bachelor of Arts degree, taught Nursing History. Mrs. Ralph continued to teach Professional Adjustments II. Sister Daniel Joseph, the pharmacist, continued to teach Drugs and Solutions and Materia Medica, which was now called Pharmacology and Therapeutics. Sister Grace Marie continued to teach Operating Room Technique. Sister James Marie taught Surgical Nursing and Sister Annetta Clare taught Obstetric Nursing, as she had since 1946 (St. Joseph's Hospital School of Nursing, 1948).

In 1949 Sister Anselma left and so did Mrs. Bordeleau. Mrs. Margaret LaBine Hannum, a medical technologist, who had graduated from the College of St. Catherine in St. Paul, was hired to teach Anatomy and Physiology, Chemistry, and Microbiology. Mrs. Kathleen Hawley, a nurse who came from Hartford, Connecticut, according to an item in the local paper, The Daily Mining Gazette ("Nurses' Notes," 1949), taught Introduction to Medical Science, in Sister Anselma's place. Father Schick continued to teach Psychology and Ethics, but Sister Margaret Eileen taught Sociology. She also carried on with teaching Professional Adjustments I. Therefore, her teaching load increased to two courses. Dr. Sloan, rather than Dr. Janis, lectured in Gynecology. Moreover, Dr. Sloan concentrated solely in Gynecology, giving no lessons in Urology as Dr. Janis had done. No



other changes among the teaching staff or their loads were reported (St. Joseph's Hospital School of Nursing, 1949).

In 1949 a two-week affiliation for Psychiatry at Newberry State Hospital was begun. This innovation was reported in an addendum to the report for 1949 that was prepared for submission to the National Committee for the Improvement of Nursing Services. Marie Elsner, who had graduated from Michael Reese Hospital School for Nurses and Columbia University and had taught at St. Luke's Hospital School for Nurses in Marquette, was employed at Newberry State Hospital in 1949. She taught the course in Psychiatry to the affiliating students. The older affiliation at Mercy Hospital in Chicago for Diet Therapy, Medical Nursing, and Pediatrics continued.

It was during this year that Sister Margaret Eileen and the faculty learned about the school's poor ranking in the national classification of nursing schools. Their reaction to the rating was not recorded, nor was the cause of the poor ranking specified, although a letter seeking clarification was written (St. Joseph's Hospital School of Nursing, 1949).

1950s. Sister Rose Helene Vaughn, a nurse who had a Bachelor of Science from St. Louis University and a Master of Arts from Catholic University, arrived in Hancock to direct the school of nursing in 1950, according to the history she wrote for the fiftieth anniversary of the Michigan Nurses' Association (Vaughn, 1954). This and many other changes in faculty were reflected in the report to the Michigan Board of Registration of Nurses and Trained Attendants for 1951. Anita Bahti, a graduate of Henry Ford Hospital

School of Nursing, taught Nursing Arts and, with Sister Edmunda Mulligan, she taught Orthopedics. Sister Edmunda, who had a Bachelor of Science in Nursing Education from St. Teresa's College, taught Surgical Nursing and Gynecologic Nursing as well as supervising the medical and surgical nursing care of women at the hospital. Sister Laurentia had returned. She replaced Sister Anetta Clare in teaching Obstetric Nursing and supervising nursing care on the obstetric ward. Sister Mary Augustine Honkala, an alumna of 1931 and a graduate of St. Teresa's College in Kansas City, taught History of Nursing and Psychology. With Agnes Sorenson, a nurse who was an assistant instructor, Sister Augustine taught Communicable Disease Nursing. She also supervised nursing care on the men's floor. Sister Rose Helene, the director, carried the classes in four courses. They were Nutrition, Ethics, Professional Adjustments I, and Professional Adjustments II. Mrs. Hannum's load had increased. She now taught Sociology and Introduction to Medical Science in addition to Anatomy and Physiology, Chemistry, and Microbiology. Dr. Lepisto and Dr. Englehart shared lectures in Diseases of Eye, Ear, Nose and Throat. Evelyn Larson, a nurse employed by the Michigan Department of Health as a specialist in Tuberculosis Nursing, lectured in Public Health Nursing. Sister Daniel Joseph continued to teach Drugs and Solutions and Pharmacology, and Sister Grace Marie taught Operating Room Technique, as she had since 1944. Sister Naomi taught Hygiene and had resumed her role as night supervisor, guiding students as

she supervised patient care at night (St. Joseph's Hospital School of Nursing, 1950).

A new affiliation, of three months' length, had been started in Psychiatric Nursing at Winnebago State Hospital in Winnebago, Wisconsin. Ruth Hopper was in charge of students' learning experiences there. The affiliations in Diet Therapy, Medical Nursing, and Pediatrics had been shifted to the college of St. Catherine in St. Paul. The report to the Michigan Board of Registration of Nurses and Trained Attendants named Helen Riley as teaching Dietetics and Sister Marie DePaul as the instructor in Medical Nursing, but the name of the teacher in Pediatrics was omitted. No other information about the experience or education of these four women was reported (St. Joseph's Hospital School of Nursing, 1951).

By 1954 Kathleen Scott, a nurse with a Bachelor of Science in Nursing Education from Marquette University, taught Anatomy and Physiology; Microbiology; Chemistry; Eye, Ear, Nose and Throat Nursing; and Introduction to Medical Science. Sister Mary Aquina Barclay, a dietitian who had graduated from Fontbonne College in St. Louis, taught Nutrition, Foods, and Cooking and Diet Therapy. Students no longer affiliated for Diet Therapy. Sociology and Social Problems, History of Nursing, Professional Adjustments II, and Trends in Nursing were taught by Margaret Mary Ries, a nurse who had a Master of Science degree. Where this degree had been earned was not recorded. Miss Ries also filled the position of Associate Director of the School of Nursing. Sister Annetta Clare had earned

a Bachelor of Science in Nursing and had returned to Hancock where she taught Nursing Arts and Dermatologic Nursing. Sister Mary Edwardine Gibbons had become the hospital pharmacist, so she taught the two pharmacology courses. Sister Augustine taught Medical Nursing as the affiliation for this course had been discontinued. She continued to teach Psychology and carried the responsibility of being Associate Director of Nursing Service. Sister Michael Helen Purfield, a graduate of St. Louis University, taught Gynecologic and Obstetric Nursing. In addition, she was supervisor of the obstetric unit. Sister Anselma had earned a Bachelor of Science in Public Health from Marquette University. She had returned to Hancock, and in 1954 she taught Social Problems in Nursing Service, Nursing and Health Service in the Family, Communicable Disease Nursing, and Introduction to Community Nursing. In addition, Sister Anselma supervised the Outpatient Department and Emergency Room. Operating Room Technique was taught by Sister Grace Marie, who was still operating-room supervisor. She also taught Orthopedic Nursing. Sister Rose Helene, the director of the school and of nursing service, taught Philosophy, Professional Adjustments I, and Ethics. Mother Georgiana Evans, the hospital administrator, taught Religion. Dr. LaBine taught Urology. Sister Naomi supervised students' practice at night. Ruth Hopper continued to guide students' experiences during the Psychiatric Nursing affiliation, and Genevieve Schweitzer, at St. Mary's Hospital in Minneapolis,

directed students' learning in Pediatric Nursing (St. Joseph's Hospital School of Nursing, 1954).

By 1959 Sister Anselma Matte had become Director of the School of Nursing and of Nursing Service. Sister James Marie Jackovich was Assistant Director of the School of Nursing. Both had bachelor's degrees and, by this time, had graduate study at Catholic University (St. Joseph's Hospital School of Nursing, 1959). Sister Anselina reported, at this time, that the school of nursing had a budget that was prepared in conjunction with the hospital accountant.

Many changes in personnel had occurred. Linnea Siirtola, a nurse who had a Bachelor of Science in Nursing Education from Wayne State University, taught Nursing Arts. Sister Marie Felicite Hanraty, who had a Master of Arts in Sociology from St. Louis University, taught Sociology. Sister Mary St. Paul Lorenz, a medical technologist, taught Anatomy and Physiology, Chemistry, Microbiology, Introduction to Medical Science, and Psychology. Sister Mary Florina Dillon, a former school teacher who had a Bachelor of Arts, taught History of Nursing. Sister Anselma and Sister James Marie, together, taught Professional Adjustments I and II. The pharmacist, Sister Jean Frances Haug, taught Drugs and Solutions, Pharmacology I, and Pharmacology II. Sister Marie Omer had replaced Sister Aquina as dietitian, so she taught the Nutrition and Diet Therapy courses. Sister Catherine Agnes Wagner, who had a Bachelor of Science in Nursing from St. Teresa's College, taught an integrated Medical-Surgical Nursing course and followed students on

the various clinical units to guide and supervise their performance. Verla Hill, who had a Bachelor of Science in Nursing, along with Sister Charles Cecilia Turner, who was a graduate of St. Louis University, taught Gynecologic and Obstetric Nursing. Mrs. Hill also instructed students during their clinical experiences on the hospital wards. Sister Ann Ambrose Butkovich, who had a Bachelor of Science in Nursing Education, and Barbara Laurie, an alumna of the school of nursing, together, taught Principles of Operating Room Technique. They also supervised and guided students' performance in the operating rooms. Sister James Marie Jackovich taught a course in Communication Skills, and Sister Grace Marie Gilbertson, who had relinquished supervision of the operating rooms and assumed charge of the Outpatient and Pediatric Departments, taught a course in Emergency Room Nursing. Father Conrad Dishaw handled the courses in Ethics and Religion (St. Joseph's Hospital School of Nursing, 1959).

During evening experiences student nurses were assisted and supervised by Elaine Harkins, the evening nursing supervisor. On nights this duty fell to Sue Coon, an alumna of the school, who was night supervisor and clinical teacher. Other supervisors at the home school bore little responsibility for clinical teaching from this time onward. Instead, the teachers of clinical nursing or special clinical instructors taught students on the wards. Mildred Gorton, who had a Bachelor of Science degree, taught students during their affiliation for Tuberculosis Nursing at Saginaw County Hospital, and Patricia Kiefer, who had a Master of Science degree,

guided the students' learning in Psychiatric Nursing at Pontiac State Hospital. The name of the nurse at Children's Hospital who taught the affiliating students was not reported (St. Joseph's Hospital School of Nursing, 1959).

1960s. In 1963 Sister John Kenneth Scott (formerly Kathleen Scott) was Director of the School of Nursing. She taught Trends in Nursing, Managerial Skills, and Medical-Surgical Nursing Seminar. Sister John Kenneth had earned a Master of Science in Nursing Education Administration from Catholic University. Hazel Moss Kinville, a nurse who had a Master of Arts in Education Administration from Roosevelt University and who had joined the faculty in 1961, taught Community Health Nursing, Nursing in Long Term Care, Psychology, Sociology, Marriage and the Family, History of Nursing, Professional Adjustments, and Communication Skills. Sister Mary St. Paul now taught a basic science course in which Anatomy, Physiology, Microbiology, Chemistry, and Introduction to Medical Science were integrated. Lorraine Sweers, who had a diploma in nursing, taught Basic Nursing I and II, as the expanded course in fundamental skills of nursing was called at that time. Sister Catherine Agnes taught Medical-Surgical Nursing, a course in which Operating Room Technique, Diet Therapy, and Pharmacology had been included. Ruth Miller, a nurse who had a Bachelor of Arts degree from Bates College in Lewiston, Maine, assisted Sister Catherine Agnes in teaching students during the clinical experiences that occurred in conjunction with this course. Sister Mary Edwardine, the pharmacist, and Sister Francis Eugene, the dietitian, taught

appropriate segments of this integrated course. They also served as resource people in other nursing courses. Father Wisneski, the hospital chaplain, taught Religion I and II to Catholic students and Morality and Ethics to the non-Catholic students. Lulu Hettula, an alumna of 1954, taught Obstetric Nursing. The faculty teaching at the affiliating institutions at Pontiac State Hospital, Children's Hospital, and Saginaw County Hospital remained unchanged (St. Joseph's Hospital School of Nursing, 1963).

By 1969 all affiliations had ceased and the curriculum changed. That year a two-year curriculum began. The sciences and other supportive courses were taught at Michigan Technological University. Only nursing courses were taught at St. Joseph's Hospital. The composition of the faculty reflected these changes. Sister John Kenneth Scott continued as director of the school of nursing. In 1969 she taught Leadership Skills in Nursing, a senior course, to students in the three-year program. Ruth Miller had earned a Master of Public Health at the University of Michigan and, on her return, became lecturer and consultant in mental health (St. Joseph's Hospital School of Nursing, 1969). She taught Mental Health Nursing to seniors in the three-year program. Helen Lord, who had a Bachelor of Science in Nursing from the University of Michigan, taught both Maternity Nursing and Pediatric Nursing to these same senior students. In addition, she lectured in N102, a course that dealt with caring for people who were in the process of being ill or who had self-care limitations because of a developmental state.



Assisting her by guiding students in their practice on the hospital wards was Joan B. Dietzel, who was an alumna of St. Joseph's Hospital School of Nursing. Karla Lawton, a graduate of Indiana University School of Nursing, lectured on Medical-Surgical Nursing to second-year students in the three-year program and taught a course labeled N103, in which students in the two-year program learned means of implementing nursing care when people suffered temporary limitations in their ability to care for themselves (St. Joseph's Hospital School of Nursing, 1969). Constance M. Fitzpatrick, a graduate of Lawrence Memorial Hospital School of Nursing in Medford, Massachusetts, and Sally L. Heiss, a graduate in nursing from Michigan State University, guided the students on the hospital units in both courses. Joan McFall, another nurse who graduated from Michigan State University, taught N101, a course in which students were introduced to the philosophy and practice of nursing. Ann E. Graham, a nurse who had graduated from Niagara University at Niagara Falls, New York, assisted in teaching the clinical nursing skills in this course (St. Joseph's Hospital School of Nursing, 1969).

1970s. There were no changes in faculty in 1970. Mrs. Miller's load increased. In addition to teaching Mental Health Nursing to the last seniors in the three-year program, she taught N202, a course in which students in the two-year program learned how to provide nursing care for people with impaired mental health. Mrs. Lord's and Mrs. Dietzel's loads continued unchanged. Mrs. Lawton's, Constance Fitzpatrick's, and Sally Heiss's loads shifted

somewhat. They no longer taught Medical-Surgical Nursing because it was no longer needed, but they continued to teach N103 and added N200 and N201. These last two courses were taught to second-level students in the two-year program. Sister John Kenneth taught Leadership Skills in Nursing for the last time to students in the old three-year program and N203, its equivalent in the new curriculum, to second-level students in the two-year program. Mrs. McFall and Anne E. Graham continued to teach N101 (St. Joseph's Hospital School of Nursing, 1969; telephone interview with Sister John Kenneth, May 7, 1987).

In 1971 there was almost a complete turnover in faculty. Only Sister John Kenneth and Mrs. Miller remained. Rosemarie El Rite, a graduate of 1973, recalled that Sister Barbara Kopp, a graduate of St. Louis University, taught N101, N103, and N202 with help from Virginia Maki, a 1969 graduate of St. Joseph's Hospital School of Nursing (R. El Rite, personal communication, August 17, 1982). Diane Rossmiller, a graduate of the University of Colorado at Boulder, taught N102, N104 (formerly N200), and N201. She was assisted in teaching these courses by Angela Marie Palac, a graduate of St. Francis Hospital School of Nursing in Evanston, Illinois. Mrs. Miller continued to teach N202. Sister John Kenneth and Dorothy Jean Mann taught N203. Mrs. Mann had earned both her bachelor's and master's degrees in nursing at the University of Alabama (St. Joseph's Hospital School of Nursing, 1971).

Mrs. Mann, in a telephone interview on May 8, 1987, stated that by 1974 Sister Barbara Kopp and Diane Rossmiller had left and Mrs. Mann had transferred to Michigan Technological University, where she directed the first year of the university's associate degree program in nursing. Wanda Kolb, an alumna of St. Joseph's Hospital School of Nursing, taught N102 and N201. Clinical teaching in those courses was done by Marsha Petaja and Kathy Vohling, Mrs. Mann recalled. No records of the experience or education of either of these two nurses were available. Mrs. Kolb also taught N203 with Sister John Kenneth, while Mrs. Miller continued to teach N202, Mrs. Mann remembered (D. J. Mann, personal communication, May 8, 1987).

Records were not available for each year of the school's existence. Furthermore, faculty experience and preparation were not uniformly and consistently reported in the records that were available. Nevertheless, a review of available records revealed that no fewer than 37 nurses, who had no nursing service responsibilities, taught student nurses at St. Joseph's Hospital School of Nursing, and at least 30 other nurses, who had responsibilities in nursing service, also taught students during the years the school was open. Of this total of 67 nurses, 25 were members of the religious order. Only two of the nurses, who were nuns, were continuously assigned solely to faculty positions. The others had, at some time, nursing service responsibilities as well as faculty responsibilities. Of the 25 nuns, 18 always had dual responsibilities. Five of the members of the Congregation of St. Joseph of Carondelet had dual responsibilities during some of the

times they were assigned to Hancock, while on other occasions they were assigned solely as faculty.

The only lay nurses who taught at the school until 1945 were those who supervised the obstetric department. It was not until 1946 that a nun, Sister Annetta Claire, supervised that department and taught Obstetric Nursing (St. Joseph's Hospital School of Nursing, 1946). In 1945, for the first time, a lay nurse was hired solely as a faculty member. She taught Nursing Arts. Her name was recorded as Mrs. H. Neal in the 1945 report to the Michigan Board of Registration of Nurses and Trained Attendants. However, no other information about her was recorded. Gradually, more lay nurses became members of the faculty. By the 1960s, lay nurses on the faculty outnumbered the nurses who were members of the religious community.

All members of the religious community who were assigned, from 1930 onward, solely to faculty positions had, at minimum, bachelor's degrees in addition to their diplomas in nursing. Thus, the two nurses who devoted all their time to teaching in the 1930s had bachelor's degrees, as indicated in Table 15. In the 1940s, seven nurses were identified as being responsible only for teaching students. Of that number, three (43%), who were not members of the religious community, had only diploma preparation. Of the seven nurse faculty, one member, also not a member of the religious community, possessed a master's degree. The remaining three nurse

faculty (43%), members of the religious community, had bachelor's degrees.

Table 15.--Preparation of nurses identified as faculty at St. Joseph's Hospital School of Nursing, by decade, 1930 through 1974.

Decade	Number (and Percent) of Nurses			
	Total Number	With Master's Degrees	With Bachelor's Degrees	With Diploma
1930s	2	0	2 (100%)	0
1940s	7	1 (14%)	3 (43%)	3 (43%)
1950s	11	1 (9%)	7 (64%)	3 (27%)
1960s	13	3 (23%)	6 (46%)	4 (31%)
1970s	17	3 (18%)	7 (41%)	7 (41%)

During the 1950s, 11 nurses were recognized as occupying positions solely in the school. Of that number, seven (64%) had bachelor's degrees. Three of these seven were members of the religious community; four were not. Diplomas in nursing were the highest level of education possessed by three faculty (27%). They were not members of the religious community, nor was the one nurse faculty who had the master's degree. In the 1960s a greater proportion of the nurse faculty had master's degrees. There were three, and they accounted for 23% of the faculty. Of these nurses, one was a member of the religious community; two were not. Bachelor's degrees were possessed by six of the nurse faculty. Only one of these was a member of the religious community. None of the

four nurses who had only a diploma in nursing was a member of the religious community. In the 1970s, 17 nurse faculty, whose only function was to teach student nurses, were identified. Bachelor's degrees were possessed by seven (41%) of this group. Only one of these seven was a member of the religious community. Two of the three nurse faculty with master's degrees were not members of the religious community. One of the faculty prepared at this level was a nun. None of the nurses prepared only with a diploma was a member of the religious order. In the beginning, all the full-time nurse faculty were members of the congregation of St. Joseph of Carondelet. When the school closed, only one member of the nurse faculty was a member of the order.

### Students

During the 54 years of operation, 692 nurses graduated from St. Joseph's Hospital School of Nursing, according to an account in the local newspaper ("Fifty-Four Years of Nursing Education," 1974). The average number of nurses graduated annually during that period was a fraction over 13 (13.31), as indicated in Table 16. The smallest classes occurred in 1925 and 1926. Only two nurses graduated in each of those years. The largest classes occurred in 1956 and 1973. In each of those years 25 nurses graduated. With the exception of the 1960s, the average class size increased in each successive decade.

Table 16.--Number of graduates of St. Joseph's Hospital School of Nursing, by year and decade, 1923 to 1974.

Decade	Year of Graduation	No. of Graduates	Decade	Year of Graduation	No. of Graduates
1920s	1923	4	1950s	1950	6
	1924	6		1951	19
	1925	2		1952	23
	1926	2		1953	17
	1927	12		1954	22
	1928	3		1955	19
	1929	4		1956	25
	Total	33		1956	25
AVERAGE CLASS SIZE		4.71		1957	17
1930s	1930	11		1958	21
	1931	3		1959	14
	1932	11		Total	183
	1933	13	AVERAGE CLASS SIZE		18.3
	1934	8	1960s	1960	12
	1935	4		1961	18
	1936	10		1962	16
	1937	6		1963	12
	1938	8		1964	14
	1939	12		1965	15
	Total	86		1966	14
AVERAGE CLASS SIZE		8.6		1967	18
1940s	1940	5		1968	13
	1941	13		1969	19
	1942	12		Total	151
	1943	12	AVERAGE CLASS SIZE		15.1
	1944	12	1970s	1970	18
	1945	16		1971	14
	1946	13		1972	21
	1947	17		1973	25
	1948	6		1974	21
	1949	17		Total	116
AVERAGE CLASS SIZE		12.3	AVERAGE CLASS SIZE		28

ALL GRADUATES 52 YEARS: 692  
52-YEAR AVERAGE CLASS SIZE: 13.31

In the section about St. Joseph's Hospital School of Nursing in Nursing in Michigan, A History, McCabe (1930) stated that 14 students were accepted into the school in 1920. All were at least 18 years of age and had finished at least two years of high school. Three years later, four nurses graduated. In the history of the school that Sister Rose Helene Vaughn (1954) prepared for the Michigan Nurses' Association, they were identified as Arabell Campbell, later Mrs. Uttley; Eugenia Gunville, later Mrs. Driscoll; Matilda Long, later Mrs. Pontello; and Lillian Lowe, later Mrs. Gunville.

All students in the first decades of the school's operation were at least 18 years of age. In the 1942 report to the Michigan Board of Registration of Nurses and Trained Attendants, age limits for entry to the school were given as 18 to 35 years. By 1944 the lower limit was reduced to 17-1/2 to fit more closely the age limits set by the Bolton Act of 1943, which had created the United States Cadet Nurse Corps (St. Joseph's Hospital School of Nursing, 1944; U.S. Public Health Service, 1950).

In 1930 high school graduation became a requirement for entrance into the school (St. Joseph's Hospital School of Nursing, 1930). The requirement was increased in 1935 to graduation in the upper third of the class (St. Joseph's Hospital School of Nursing, 1935). In 1951 this standard was reduced. Graduation in the upper half of the class was made sufficient for entrance into the school (St. Joseph's Hospital School of Nursing, 1951).



Clara Wickley Verrier, a member of the class of 1928, reported that from 1920 onward, student nurses received a stipend of \$10 a month for laundering and maintaining their uniforms (C. W. Verrier, personal communication, August 17, 1982). This practice continued until after World War II, when the last students from the Cadet Corps graduated. The allowance was not offered during the probationary period, nor was it paid while students were on affiliation. In 1935 the laundry allowance was reduced to \$7.50 a month (St. Joseph's Hospital School of Nursing, 1935). In 1944 the allowance was further reduced to \$5 a month for students who were not members of the U.S. Cadet Nurse Corps (St. Joseph's Hospital School of Nursing, 1944). It was raised to \$7 a month in 1946 and then discontinued the following year (St. Joseph's Hospital School of Nursing, 1946, 1947). The stipends received by the 56 students at St. Joseph's Hospital School of Nursing who were members of the U.S. Cadet Nurse Corps were larger (Vaughn, 1954). The federal government paid them \$15 a month during the first nine months of schooling and \$20 a month for the next 21 months. During the last six months of their three-year schooling, Senior Cadets, as they were called, received \$30 a month for work in civilian hospitals (The United States Cadet Nurse Corps, 1950). On the other hand, Senior Cadets who opted to work in a federal hospital doubled their pay. They received \$60 a month.

There was no tuition in 1935, but students paid \$35 for uniforms and \$25 for books on the day they entered school (St. Joseph's Hospital School of Nursing, 1935). By 1941 tuition of \$25

was charged (St. Joseph's Hospital School of Nursing, 1941). The Report to the Michigan Board of Registration of Nurses and Trained Attendants for 1945 showed that tuition had increased to \$50. Books cost \$50 and uniforms \$465 that year (St. Joseph's Hospital School of Nursing, 1945). By 1954 tuition for three years was \$90. Other costs were estimated as follows: textbooks \$475, uniforms \$70, recreation fees \$430, health care \$30, transportation \$40, and library fees \$15. The projected cost of three years of schooling in 1954 thus was \$4,350, according to that year's report to the Michigan Board of Registration of Nurses and Trained Attendants (St. Joseph's Hospital School of Nursing, 1954). The cost of education continued to rise. The school bulletin for 1969 estimated tuition and fees for seven quarters to be \$933. Books, uniforms, and incidental graduation expenses added \$231. Room and board costs were reckoned at \$250 a quarter in Ryan Hall, the nurses' home at St. Joseph's Hospital School of Nursing (St. Joseph's Hospital School of Nursing, 1969). By 1971 tuition and fees for seven quarters totaled \$1,319. The cost of textbooks was judged to amount to \$200. Uniforms cost \$44. Field trips cost about \$20, and graduation expenses were estimated at \$25. Hence, expenses for seven quarters of schooling, excluding room and board, were reckoned to cost \$1,608 in 1971 (St. Joseph's Hospital School of Nursing, 1971).

From 1920 to 1929, student nurses lived in the dormitories on the fifth floor of the hospital, Clara Wickley Verrier remembered

(C. W. Verrier, personal communication, August 17, 1982). A separate nurses' residence was completed in 1929, according to Clarence J. Monette (1982). Student nurses lived in that structure until 1952. The opening of a new hospital in 1951 prompted the renovation of the unused older hospital into a spacious nurses' residence. The converted structure was named Ryan Hall in honor of the benefactor who funded the construction of the original nurses' home in 1929. Student nurses lived in Ryan Hall until St. Joseph's Hospital School of Nursing closed in 1974. Despite the spaciousness of Ryan Hall, a notation in the school bulletin of 1969 indicated that rooms were limited, so some local students were expected to live at home (St. Joseph's Hospital School of Nursing, 1969). The capacity of Ryan Hall was suddenly strained because affiliations had been discontinued, and all students were at the home school for the first time in 46 years.

In 1936, the policy about accepting married women into the school was simply and directly expressed. Married or divorced women were not accepted (St. Joseph's Hospital School of Nursing, 1936). The policy in 1944 was enigmatic. The school would accept married students, but those students would have to live in the nurses' residence and comply with all the regulations of the school, e.g., be in by 9:30 each evening, attend study hour, and have one overnight pass each week. If a student married while in school, she would not be retained, according to the 1944 report to the Michigan Board of Registration of Nurses and Trained Attendants (St. Joseph's Hospital School of Nursing, 1944). In the 1949 report the question

was not answered. In 1942 a widow with two young sons graduated from the program. Her mother had cared for her sons during the three years she was in school. Throughout the 1950s, the rules about marriage were enforced.

Neither the student handbook nor the school bulletin for 1963 discussed marriage (St. Joseph's Hospital School of Nursing, 1963). The general tenor of the handbook suggested that the authors had never entertained the idea that a young woman might contemplate marriage while still a student nurse. Although neither the handbook nor the bulletin dealt with the issue, student nurses understood that marriage and being a student nurse were considered to be incompatible. Nevertheless, in the spring of 1966, a student who had dropped out and married was readmitted. She recalled, in a telephone interview on May 18, 1987, that she petitioned to re-enter on the basis that she lacked only the class work and field practice in nursing leadership skills, a course in which students learned about patient-care management and group dynamics by team leading (J. L. Naasko, personal communication, May 18, 1987). She was readmitted and graduated in 1966. The next year a senior student married and was permitted to continue in school while maintaining a separate domicile. By 1968 no question was raised about the two married women among the 13 graduates. They, too, had resided with their husbands and not at Ryan Hall. A new tradition had been established. The school bulletins remained silent on the subject, but an article in the Daily Mining Gazette of June 23, 1970,

announced that seven students who had been accepted for the fall class were married women with children ranging in age from two to seven years ("Fifty Years of Progress," 1970). The proscriptions on age and marriage were publicly discarded.

While no rule had ever barred men from entrance to the program, only female pronouns were used in referring to students in any publications circulated by the school. The impression in the community was that men would not be accepted. In 1972 a young man tested this perception, was accepted, and graduated in 1974, according to an account in the local newspaper ("Fifty-Four Years of Nursing Education, 1974). With this last class, all restrictions on age, gender, and marriage had been abandoned.

### Curriculum

1920s. Although the school opened in 1920, no reports to the Michigan Board of Registration of Nurses and Trained Attendants or other boards were available for that first decade. Anna Lewis Burbank and Clara Wickley Verrier, alumnae who had graduated in 1927 and 1928, respectively, recalled many of the subjects they had studied (A. L. Burbank and C. W. Verrier, personal communication, August 17, 1982). They remembered affiliating at St. Mary's Hospital in Minneapolis for Diet Therapy and Pediatric Nursing. Both remembered that Anna Cummins, the supervisor of the obstetric unit at St. Joseph's Hospital in Hancock, taught them Obstetric Nursing.

In the section on St. Joseph's Hospital School of Nursing, McCabe (1930) reported that in 1929 students affiliated at Providence Hospital in Detroit for six months. During that time, students received three months' experience in Pediatric Nursing, one month's experience in Obstetrical Nursing, and two months' experience in the diet kitchen. The curriculum shown in McCabe tallied 615 hours of instruction in three years. The first year's studies consisted of Practical Nursing, 117 hours; Anatomy and Physiology, 85 hours; Hygiene and Sanitation, 30 hours; Hospital Housekeeping, 10 hours; Bacteriology, 30 hours; Drugs and Solutions, 30 hours; Ethics, 15 hours; and Psychology, 20 hours, for a total of 337 hours. The second year of this curriculum contained 128 hours as: Communicable Diseases, 30 hours; Medical Nursing, 30 hours; Surgical Nursing, 48 hours; Gynecology, 5 hours; and First Aid, 15 hours. The 120 hours of instruction in the third year were offered as: Obstetrics, 30 hours; Materia Medica, 30 hours; Pathology, 15 hours; History of Nursing, 15 hours; and Dietetics, 60 hours.

1930s. By 1931 Sister Mary Helena reported to the Michigan Board of Registration of Nurses and Trained Attendants that students received 790 hours of classroom instruction (St. Joseph's Hospital School of Nursing, 1931). That curriculum is shown in Table 17. All courses during the second term of the second year were taught at Providence Hospital during a six-month affiliation. The first term contained 205 hours of instruction, the heaviest instructional load. The senior year, with 120 hours, on the other hand, contained the lightest instructional load. A similar pattern was employed in

Table 17.--Curriculum at St. Joseph's Hospital School of Nursing, 1931.

Term	Course	Hours of Instruction	
First	Anatomy	30	
	Principles of Nursing	70	
	Drugs & Solutions	15	
	Bacteriology	45	
	Personal Hygiene	15	
	Ethics of Nursing	15	
	First Aid	15	
	Term Total	205	
Second	Anatomy	30	
	Principles of Nursing	30	
	Psychology	15	
	Materia Medica	30	
	Case Study	15	
	Term Total	120	
Third	Anatomy	30	
	Principles & Practices of Nursing	30	
	Materia Medica	30	
	Medical Nursing	30	
	Surgical Techniques	15	
	History of Nursing	15	
	Term Total	150	
Fourth	Dietetics	40	
	Obstetrics	20	
	Pediatrics	45	
	Child Psychology	15	
	Skin & Communicable Diseases	35	
	Orthopedic Surgery	10	
	Term Total	195	
Fifth	Surgical Nursing	30	
	Eye, Ear, Nose & Throat	15	
	Gynecology	7	
	Urology	8	
	Term Total	60	
Sixth	Mental Diseases	15	
	Professional Problems	30	
	Public Health Lectures	15	
	Term Total	60	
Total Hours in Curriculum		790	

the curricula of the four Upper Peninsula hospital schools of nursing operating at that time, as can be seen in Table 18. This curriculum design was based on the standards adopted by the Michigan Board of Registration of Nurses and Trained Attendants and reflected ideas advanced in Curriculum Guide for Schools of Nursing prepared by the Committee on Curriculum of the National League of Nursing Education (1927).

Sister Helena reported that during 1931 students received 30 days of experience in Elementary Nursing during the preclinical period (St. Joseph's Hospital School of Nursing, 1931). Other clinical experiences limited to the first year included 30 days in the X-ray department and 30 days in the dispensary. In the first year, students began to practice in Medical and Surgical Nursing. Sister Helena reported that during the three-year program students received 322 days of practical experience in Surgical Nursing and 161 days of experience in Medical Nursing. Allocations of time for clinical experience during the affiliation in the second year at Providence Hospital were reported as 15 days of Obstetric Nursing, 16 days in the delivery room, 60 days in the diet kitchen, and 90 days in caring for sick children. An additional 75 days during the second and third years were allocated to intrapartum, neonatal, and postpartum nursing experiences. In the second and third years, students spent 180 days in the operating room. Over the entire three years, students had 63 vacation days and experienced 135 nights of duty on the various wards of the hospital (St. Joseph's Hospital School of Nursing, 1931).



Table 18.--Hours of classroom instruction per term reported by two Upper Peninsula hospital schools of nursing in 1930 and two other Upper Peninsula hospital schools of nursing in 1931.

Term	Hours of Instruction Each Term			
	1930		1931	
	Sault Ste. Marie Hospital Training School	Houghton County Training School	St. Luke's Hospital School for Nurses	St. Joseph's Hospital School of Nursing
First	325	225	345	205
Second	183	90	160	120
Third	189	90	180	150
Fourth		72	105	195
Fifth	58	On affiliation	55	60
Sixth	2.5 year program	On affiliation	105	60

The curriculum for 1935 showed an increase in classroom instruction of 40 hours. A new course, Demonstrations in Nursing, requiring 60 hours of instruction was added. This new course was accommodated by dropping Child Psychology, which had required 15 hours of instruction, and by a series of adjustments in the time allocations of ten other courses in the curriculum (St. Joseph's Hospital School of Nursing, 1935). Students continued to have 30 days of experience in Elementary Nursing, but the time allocated to experience in Medical Nursing was increased to 186 days during three years. The experience in Surgical Nursing also increased to 351 days. Experience in Obstetrical Nursing dropped to 90 days. Time on pediatric wards remained at 90 days. Operating-room experience dropped by half to 90 days, but time spent in the diet kitchen, on affiliation, remained at 60 days. The experience in the dispensary was shifted into the senior year but remained 15 days in length. Students assisted in the hospital laboratory for a reported 153 days and spent 190 nights on duty. Vacations amounted to 21 days annually (St. Joseph's Hospital School of Nursing, 1935).

1940s. The total hours reported in the curriculum changed with almost each report to the Michigan Board of Registration of Nurses and Trained Attendants in the 1940s. The fewest hours of instruction, 988 hours, were reported in 1946 by Sister Mary Fabian (St. Joseph's Hospital School of Nursing, 1946). The greatest number of hours of instruction, 1,210 hours, was reported in 1949 by Sister Margaret Eileen (St. Joseph's Hospital School of Nursing,

1949). The reported total hours in the curriculum for each year for which information was available can be seen in Table 19. For two years, 1942 and 1944, the total hours reported in the curriculum were the same, i.e., 1,095 hours (St. Joseph's Hospital School of Nursing, 1942, 1944). The time allocated to courses within the curriculum even in those two years varied. In 1943 Sister Laurentia reported that Introduction to Medical Science was included in Medical Nursing (St. Joseph's Hospital School of Nursing, 1942). As a result, hours of instruction in Introduction to Medical Science were not differentiated for that year. Likewise, Sister Helena coupled the courses Professional Adjustments I and II and reported the sum of the hours of instruction provided in both courses (St. Joseph's Hospital School of Nursing, 1941). From 1943 through 1946, Microbiology, Chemistry, Psychology, and Sociology were taught at Michigan College of Mining and Technology at Houghton (St. Joseph's Hospital School of Nursing, 1943-1946).

An affiliation with Mercy Hospital in Chicago had been arranged for experiences in Diet Therapy and Medical Nursing (St. Joseph's Hospital School of Nursing, 1941). This affiliation began as a three-month-long event but lengthened to six months when experiences in Pediatric Nursing were added in 1943 (St. Joseph's Hospital School of Nursing, 1944). Earlier, from 1939 through 1942, experiences in Pediatric Nursing had been contracted at St. Luke's Hospital in Marquette. This affiliation, however, was discontinued

Table 19.--Hours of classroom instruction in courses at St. Joseph's Hospital School of Nursing, as reported during the 1940s.

Course	1941	1942	1944	1945	1946	1947	1948	1949
Anatomy	105	105	105	105	105	120	138	154
Urology	15	--	15	15	15	5	5	--
Microbiology	60	60	54	54	54	45	45	66
Chemistry	90	90	54	54	54	112	112	72
Communicable Diseases	30	30	30	30	30	30	30	30
Diet Therapy	45	45	60	45	45	45	30	50
Drugs & Solutions	15	15	15	15	15	15	30	--
Hygiene	45	30	15	15	15	15	15	15
Materia Medica/Pharmacology	90	120	90	90	90	90	60	90
Introd. to Medical Science	30	--	15	15	15	15	15	15
Nursing Arts	135	135	165	120	120	135	135	183
Medical Nursing	60	60	45	45	45	45	44	60
Surgical Nursing	30	30	30	30	30	30	30	60
Obstetrical Nursing	60	90	60	60	45	45	60	60
Operating Room Technique	15	15	30	30	30	15	15	30
Psychiatry	30	15	30	30	30	30	60	60
Psychology	30	30	54	45	45	15	30	30
Sociology	30	30	48	48	45	15	30	30
Nursing & Health Service in the Family	--	--	15	--	--	30	30	30
Professional Adjustments I		30	15	15	15	15	15	15
Professional Adjustments II	45	15	30	30	30	30	30	30
Pediatrics	60	60	45	45	45	45	56	40
Public Health	15	15	--	15	15	15	--	--
Ethics	--	--	--	--	15	15	15	15
Religion	45	30	15	10	10	30	15	15
Eye, Ear, Nose & Throat	15	--	--	--	--	15	15	--
Advanced Nursing	45	15	--	--	--	--	--	--
Nursing History	30	30	30	30	30	30	15	15
Gynecology Lectures	--	--	10	--	--	--	5	45
First Aid (Red Cross)	--	--	20	--	--	--	--	--
Total hours	1,170	1,095	1,095	1,006	988	1,057	1,080	1,210

when both schools enrolled Cadet Nurses (St. Joseph's Hospital School of Nursing, 1942).

The ranges of minimum to maximum nursing practice days experienced by graduating seniors during the 1940s are shown in Table 20. In those practice areas in which experience was gathered almost solely on affiliations, i.e., Pediatric Nursing, Psychiatric Nursing, and Diet Kitchen, the range of time reported tended to be narrow. In Medical Nursing the difference between the minimum and maximum number of days' experience accumulated by graduating seniors reached 100 days in 1942. From that time onward, the range narrowed. It was 25 days in 1944 and 1945 and 50 days for the remainder of the decade. A similar spread existed in Surgical Nursing. In Obstetric Nursing the maximum experience was constantly 120 days. The minimum number of days reported in the years available for study was 90 except for 1944, when the minimum and maximum were identical, i.e., 120. Experiences in many nursing practice areas were not reported because the services were not segregated. This was the case throughout the 1940s with experience in Gynecologic Nursing; Eye, Ear, Nose, and Throat; and Tuberculosis Nursing. Experiences in the Formula Laboratory, Orthopedic Nursing, Communicable Disease Nursing, Psychiatric Nursing, and the Outpatient Department were subsumed within other areas of experience for some of the years in the decade (St. Joseph's Hospital School of Nursing, 1941, 1942, 1944, 1945, 1946, 1947, 1948, 1949).

Table 20.--Range of minimum to maximum nursing practice days, by practice area, of graduating seniors during the 1940s at St. Joseph's Hospital School of Nursing.

Nursing Practice Area	Range of Minimum to Maximum Days							
	1941	1942	1944	1945	1946	1947	1948	1949
Medical Nursing	162 to 222	200 to 300	225 to 250	225 to 250	150 to 200	150 to 200	150 to 200	150 to 200
Diet Kitchen	42 to 44	62 to 64	62 to 62	45 to 62	42 to 42	42 to 42	42 to 42	42 to 42
Surgical Nursing	240 to 320	250 to 350	225 to 250	225 to 250	200 to 250	200 to 250	200 to 250	200 to 250
Operating Room	90 to 120	90 to 120	90 to 90	75 to 90	80 to 120	70 to 120	70 to 120	70 to 120
Gynecologic Nursing Services			Included in Medical, Surgical, and Obstetric Nursing Services					
Orthopedic Nursing	14 to 21	30 to 36	Included in Medical and Surgical Nursing Services					
Eye, Ear, Nose and Throat			Included in Medical and Surgical Nursing Services					
Obstetrical Nursing	90 to 94	90 to 120	120 to 120	90 to 120	90 to 120	90 to 120	90 to 120	90 to 120
Pediatric Nursing	90 to 94	90 to 120	90 to 90	90 to 90	84 to 84	84 to 84	84 to 84	84 to 84
Formula Laboratory	14 to 21	14 to 21	14 to 14	14 to 14	Included in Pediatric Services			
Communicable Disease Nursing	14 to 14	14 to 21	21 to 21	21 to 60	Included in Medical and Surgical Nursing			
Tuberculosis Nursing			Included in Medical and Nursing Services					
Psychiatric Nursing	Included in Medical Nursing Service							
Outpatient Dept.	14 to 21	14 to 21	14 to 14	14 to 14	Included in Medical and Pediatric Services			
Evening Duty	No report	No report	90 to 90	60 to 90	14 to 40	14 to 40	14 to 40	14 to 40
Night Duty	90 to 120	90 to 120	90 to 120	120 to 160	28 to 40	14 to 40	14 to 40	14 to 40

The length of a student nurse's work day and week shifted downward during the 1940s. In 1941 Sister Helena reported that a day shift was eight hours and a week of days, including classes, was 52 hours. A week of eight-hour nights, without classes included, amounted to 56 hours (St. Joseph's Hospital School of Nursing, 1941). By 1944 student nurses' hours at St. Joseph's Hospital had been reduced. A week was 48 hours and, on days, that included class time. On night duty, class time was additional (St. Joseph's Hospital School of Nursing, 1944). In 1946 Sister Laurentia reported that a night shift was seven hours and a week of nights accounted for 42 hours without class time. The seven-hour night came about because students were relieved for an hour while they ate a meal called "midnight super" (St. Joseph's Hospital School of Nursing, 1946). Sister Fabian, in 1947, continued to report a week of days as 48 hours, including class time. The day shifts were customarily composed of broken hours, i.e., 7 a.m. to 11 a.m. and 4 p.m. to 7 p.m., to accommodate classes in the afternoon. In the report for 1947, evening duty was eight hours, i.e., 3 p.m. to 11 p.m. A week of evenings, including class time, was 48 hours. There was no change in the length of the week on day or night duty. The eight-hour day and evening shifts continued throughout the 1940s, as did the 48-hour week, including class time, during weeks of days and evenings. The seven-hour night, and the 42-hour week of night duty, excluding class time, continued through 1949 (St. Joseph's Hospital School of Nursing, 1947-1949).

1950s. The reports filed with the Michigan Board of Registration of Nurses and Trained Attendants in 1951, 1954, and 1959 indicated that no major changes occurred in the curriculum. The hours of instruction, however, increased from 1,372 in 1951 to 1,501 in 1954, and by 1959 they amounted to 1,685 as seen in Table 21. Nutrition, with 45 hours of instruction, and Orthopedic Nursing, with 15 hours of instruction, appeared in the curriculum of 1951. Urology was dropped (St. Joseph's Hospital School of Nursing, 1951). Psychiatric Nursing had been expanded in 1950 to 120 hours. At that time a three-month-long affiliation was arranged to prepare students for the new test in Psychiatric Nursing that was to be added to the test battery on the licensure examination.

Sister Rose Helene, the director of the school, reported to the Michigan Board of Registration of Nurses and Trained Attendants that students who graduated in 1951 had 42 days of Diet Therapy, 90 days of Psychiatric Nursing, and 91 days of Pediatric Nursing as indicated in Table 22. These experiences in Pediatric Nursing and Diet Therapy occurred on affiliation at the College of St. Catherine in St. Paul, as did six weeks of Medical Nursing. The amount of time practiced in Medical Nursing by graduating seniors ranged from a minimum of 193 days to a maximum of 224, according to the report filed by Sister Rose Helene in 1951 (St. Joseph's Hospital School of Nursing, 1951). In Surgical Nursing these students had experienced from 186 to 216 days, and their experience in the operating room ranged from 83 to 104 days. Days of practice in Obstetric Nursing varied from 132 to 176 among the graduating seniors of 1951. They



Table 21.--Hours of classroom instruction per course at St. Joseph's Hospital School of Nursing during the 1950s.

Course	Hours of Instruction		
	1951	1954	1959
Anatomy & Physiology	120	120	120
Microbiology	60	80	60
Chemistry	60	64	60
Psychology	30	32	30
Sociology	60	32	30
Nursing Arts	180	228	375
Hygiene	15	a	a
Professional Adjustments I	30	16	
Professional Adjustments II	30	16	45
Drugs & Solutions (Pharmacology I)	30	32	15
Pharmacology II	60	48	30
Nutrition	45	48	45
Diet Therapy	60	36	22
History of Nursing	30	32	30
Introduction to Medical Science	15	32	30
Medical Nursing	80	64	232
Surgical Nursing	65	64	b
Operating Room Technique	38	16	20
Orthopedic Nursing	15	20	25 <sup>c</sup>
Gynecologic Nursing	15	16	18
Obstetrical Nursing	45	60	65
Communicable Disease Nursing	30	48	c
Eye Diseases and Nursing	7.5	16	13 <sup>c</sup>
Ear, Nose & Throat Diseases and Nursing	7.5		
Ethics	15	48	--
Psychiatry	120	119	136
Nursing & Health Science in the Family	30	32	30 <sup>c</sup>
Pediatrics	79	59	80
Religion/Philosophy	32	32	60
Introduction to Community Nursing	--	16	--
Dermatologic Nursing	--	19	--
Urologic Nursing	--	8	14 <sup>c</sup>
Pharmacology III	--	16	30
Social Problems in Nursing Service	--	16	--
Trends in Nursing	--	16	--
Tuberculosis Nursing	--	--	30
Communication Skills	--	--	15
Emergency Room	--	--	15
Total	1,372	1,501	1,685

<sup>a</sup>Included in Nursing Arts.

<sup>b</sup>Included in Medical Nursing.

<sup>c</sup>Included in Medical-Surgical Nursing.

had also experienced anywhere from 78 to 118 evenings on duty and from 77 to 104 nights (St. Joseph's Hospital School of Nursing, 1951).

Table 22.--Range of clinical experience, by clinical practice area, for seniors graduating in 1951, 1954, and 1959.

Practice Area	Minimum to Maximum Days of Experience		
	1951	1954	1959
Medical Nursing	193 to 224	138 to 192	139 to 154
Diet Kitchen	42 to 42	42 to 77	28 to 36
Surgical Nursing	186 to 216	122 to 219	139 to 154
Operating Room	83 to 104	53 to 113	56 to 63
Obstetrical Nursing	132 to 176	98 to 165	94 to 126
Pediatric Nursing	91 to 91	127 to 178	84 to 84
Psychiatric Nursing	90 to 90	91 to 92	84 to 84
Outpatient Department	--	7 to 21	--
Tuberculosis Nursing	--	--	28 to 28
Evening Duty	78 to 118	33 to 99	Not reported
Night Duty	77 to 104	90 to 179	Not reported

Sister Rose Helene, in the brief history of the school she submitted to the Michigan Nurses' Association in 1954, stated that the affiliations for Diet Therapy and Medical Nursing were discontinued in 1952. She also indicated that at that time the affiliation in Pediatric Nursing was shifted to St. Mary's Hospital in Minneapolis. The outstanding event for 1952, however, was that "word was received from the National Nursing Accreditation Service on October 7, 1952 that our school had been granted temporary national accreditation" (Vaughn, 1954, p. 3).

By 1954 six new courses had been added to the curriculum. Those courses were Introduction to Community Nursing, Dermatologic

Nursing, Urologic Nursing, Pharmacology III, Social Problems in Nursing Service, and Trends in Nursing. Collectively, they accounted for 91 hours. The time allotted to Nursing Arts had been increased by 48 hours. It occupied 228 hours. Other adjustments had been made within the curriculum to account for a total of 1,501 hours in 1954, as shown in Table 21 (St. Joseph's Hospital School of Nursing, 1954).

In 1954 graduating seniors had experienced from 138 to 192 days of Medical Nursing and 122 to 219 days of Surgical Nursing. In Obstetric Nursing these seniors had anywhere from 98 to 165 days' experience. In Pediatric Nursing the range of experience among seniors started at 127 days and peaked at 178 days. Seniors' experiences in Operating Room varied from 53 to 113 days and in Diet Kitchen from 42 to 77 days. All but one senior had experience in the Outpatient Department. This time varied from 7 to 21 days. The least variation in clinical experience time was evident in Psychiatric Nursing. There, students had spent either 91 or 92 days, as can be seen in Table 22. Evening duty assignments ranged from 33 to 99 evenings among the graduating seniors of 1954. The range of night duty shifted from a minimum of 90 nights to a maximum of 179 (St. Joseph's Hospital School of Nursing, 1954).

In 1954 a week, including class, was 40 hours long except on night duty. In that situation a week, including class time, could amount to 53 hours (St. Joseph's Hospital School of Nursing, 1954). Generally, however, the week was shorter than the 44-hour week,

including classes, that was reported for all shifts in 1951 (St. Joseph's Hospital School of Nursing, 1951).

By 1959 the hours of instruction had increased to 1,685. Three new courses had appeared. They were Tuberculosis Nursing, Communication Skills, and Emergency Room Nursing. They contributed 60 hours to the curriculum. The amount of instruction in Nursing Arts had increased by 147 hours to 375 hours. Medical, Surgical, and Communicable Disease Nursing had been combined into one course of 232 hours called Medical-Surgical Nursing. Orthopedic Nursing; Urologic Nursing; Eye, Ear, Nose, and Throat Diseases and Nursing; and Nursing and Health Service in the Family were accounted for separately but taught under the rubric of Medical-Surgical Nursing, as shown in Table 21. Nevertheless, these courses dealing with nursing in the medical specialties contributed 82 hours to the curriculum. Ethics, Introduction to Community Health Nursing, Dermatologic Nursing, Social Problems in Nursing Service, and Trends in Nursing were not taught in 1954. Professional Adjustments I and II were taught as one course (St. Joseph's Hospital School of Nursing, 1959).

Graduating seniors in 1959 practiced 84 days in Psychiatric Nursing and Pediatric Nursing. They had 28 days in Tuberculosis Nursing. In Obstetric Nursing, practice time varied from 94 to 126 days. Students had spent anywhere from 56 to 63 days in Operating Room and from 28 to 36 days in the diet kitchen. Practice time in Medical Nursing varied from 139 to 154 days. Experience in Surgical

Nursing was identical. Night and evening duty was omitted from this report (St. Joseph's Hospital School of Nursing, 1959).

Affiliations no longer occurred in Minnesota and Wisconsin. Instead, all affiliations took place in Michigan. The affiliation in Tuberculosis Nursing was arranged with Saginaw County Hospital. Children's Hospital in Detroit was the site for Pediatric Nursing, and Pontiac State Hospital was the institution at which Psychiatric Nursing was taught (St. Joseph's Hospital School of Nursing, 1959).

The last 14 years. Changes continued in the curriculum. By 1963, hours in the curriculum had been reduced to 1,651 (St. Joseph's Hospital School of Nursing, 1963). Nursing Arts had been divided into two courses called Basic Nursing I and II, as can be seen in Table 23. Together these two courses contained 225 hours. Anatomy and Physiology, Chemistry, and Microbiology had been combined into a two-semester course called Natural Science in Nursing. This course contained 240 hours of instruction. Medical-Surgical Nursing, with 256 hours, was the largest course in the curriculum. Pharmacology III, Diet Therapy, and Operating Room Nursing, totaling 90 hours, were accounted separately but taught as part of this integrated Medical-Surgical Nursing course. Pediatric Nursing was increased to 110 hours, while Psychiatric Nursing was reduced to 115 hours. Ethics was reintroduced into the curriculum and accounted for 60 hours. Community Health Nursing was restored, as well, as a 30-hour course. New courses were Marriage and the Family, Long Term Unit Nursing, Chronic Disease Nursing, Managerial Skills, and Medical-Surgical Nursing Seminar. Together, they added

**Table 23.--Curriculum at St. Joseph's Hospital School of Nursing,  
1962.**

<b>Year</b>	<b>Course</b>	<b>Hours of Instruction</b>	
<b>First</b>	Basic Nursing I and II	225	
	Natural Science in Nursing I & II	240	
	Pharmacology I & II	30	
	Communication Skills	30	
	Trends in Nursing	30	
	Psychology	30	
	Nutrition	30	
	Professional Adjustments I	15	
	Religion (Philosophy) I & II	60	
	Hours for Year	690	
<b>Second</b>	Medical-Surgical Nursing	256	
	Diet Therapy for Nursing	30	
	Pharmacology III	30	
	Operating Room Nursing	30	
	Sociology	30	
	Marriage and the Family	15	
	Professional Adjustment II	30	
	Ethics	60	
	Hours for Year	481	
<b>Third</b>	Psychiatric Nursing	115	
	Tuberculosis Nursing	30	
	Obstetric Nursing	90	
	Nursing of Children	110	
	Chronic Disease Nursing	30	
	Long Term Unit Nursing	30	
	Community Health Nursing	30	
	Medical-Surgical Nursing Seminar	15	
	Managerial Skills	30	
	Hours for Year	480	
<b>Total Hours in Curriculum</b>		<b>1,651</b>	

120 hours to the curriculum. History of Nursing was subsumed in Trends in Nursing. Emergency Nursing had been withdrawn from the curriculum. Affiliations continued at Pontiac State Hospital for Psychiatric Nursing and at Children's Hospital in Detroit for Pediatric Nursing, as well as at Saginaw County Hospital for Tuberculosis Nursing (St. Joseph's Hospital School of Nursing, 1963).

In 1969 the curriculum was shortened to two years and one summer, e.g., seven quarters. This event climaxed a series of changes that had begun in 1959 when Medical and Surgical Nursing were combined. These modifications continued with the incorporation into Medical-Surgical Nursing of courses that dealt with medical specialties. Adoption of a philosophy that acknowledged the various levels of preparation for practice of nursing catalyzed the changes (St. Joseph's Hospital School of Nursing, 1969).

In 1969 all distant affiliations were terminated and all nursing courses were taught at the home school. An arrangement was negotiated with Michigan Technological University in which student nurses purchased 11 courses, or 33 credits, from the university. These were courses in biological, physical, and behavioral sciences as well as in language arts and communication skills.

The nursing courses, as shown in Table 24, were untitled. They were merely designated by number. In N101 students were introduced to the philosophy and practice of nursing. It required 108 hours in 1969, but in the revision of 1971 the time was increased to 156

Table 24.--Curriculum, St. Joseph's Hospital School of Nursing, 1969-1971 and 1971-1973.

Quarter	Course	Hours	
		1969-1971	1971-1973
First	BL 120 Anatomy & Physiology for Nurses I <sup>a</sup>	60	60
	BL 110 Biochemistry for Nurses <sup>a</sup>	36	36
	HU 101 Freshman English I <sup>a</sup>	36	36
	N 101 Nursing	108	156
	PH 101 Religion (Catholic students only) (12)	--	--
	PR 101 Orientation	--	12
	Quarter	240	300
Second	BL 121 Anatomy & Physiology for Nurses II <sup>a</sup>	60	60
	BL 111 Microbiology for Nurses <sup>a</sup>	36	36
	HU 102 Freshman English II <sup>a</sup>	36	36
	N 102 Nursing	132	156
	PH 102 Religion (Catholic students only) (12)	--	--
	PR 102 Orientation	--	12
	Quarter	264	300
Third	HU 103 Freshman English III <sup>a</sup>	36	36
	HU 110 Fundamentals of Speech <sup>a</sup>	36	36
	N 103 Nursing	204	228
	PH 103 Religion (Catholic students only) (12)	--	--
	PR 103 Orientation	--	12
	Quarter	276	312
Fourth	N 104 Nursing	--	348
	N 200 Nursing	276	--
	Quarter	276	348
Fifth	SS 291 Sociology <sup>a</sup>	36	36
	N 201 Nursing	276	276
	PH 201 Ethics	12	--
	PR 201 Ethics	--	12
	Quarter	324	324
Sixth	SS 281 Principles of Psychology <sup>a</sup>	36	36
	N 202 Nursing	276	276
	PH 202 Ethics	12	--
	PR 202 Ethics	--	12
	Quarter	324	324
Seventh	SS 371 Anthropology <sup>a</sup>	36	36
	N 203 Nursing	276	276
	PH 203 Ethics	12	--
	PR 203 Ethics	--	12
	Quarter	324	324
Total hours		2,028	2,232
Catholic students		2,064	2,232

<sup>a</sup>Course given at Michigan Technological University.



hours (St. Joseph's Hospital School of Nursing, 1969, 1971). N102 dealt with nursing in pregnancy and with those occasions when self-care behavior was modified by the process of becoming ill. Initially, N102 was taught in 132 hours (St. Joseph's Hospital School of Nursing, 1969). Later, the time allocation was 156 hours. In N103 emphasis was placed on nursing patients in temporary self-care dependency states or nursing people with diseases likely to have short-term effects (St. Joseph's Hospital School of Nursing, 1969). This course was at first thought to require 204 hours. With the 1971 revision, N103 was apportioned 228 hours. At that time a second course, N104, with 348 hours of instruction was added to provide adequate coverage of nursing care in conditions where a person's self-care behavior was modified by injury or disease so that specific therapeutic measures were needed to restore, stabilize, or control his/her functioning (St. Joseph's Hospital School of Nursing, 1971). Emphasis was placed on nursing people with permanent self-care dependency states in the series of courses designated as N200, N201, and N202 in the 1969 curriculum (St. Joseph's Hospital School of Nursing, 1969). Together these three courses accounted for 828 hours of instruction. N203 was a course, containing 276 hours of instruction, in which student nurses learned to design, provide, and manage systems of self-care for patients in cooperation with other members of a nursing team (St. Joseph's Hospital School of Nursing, 1969, 1971). This course was not changed in the revision of 1971. However, N201 and N202 were

altered so that the emphasis in these courses was placed, as the bulletin stated, on "self-care behavior as modified by the process of recovery from and overcoming or compensating for effects of disease or injury or defects of general or developmental nature" (St. Joseph's Hospital School of Nursing, 1971, p. 22). No further changes in curriculum occurred, and no later bulletin was published by the faculty and administration of St. Joseph's Hospital School of Nursing.

The decisions to close the school and withdraw from the hospital were carefully planned. Both were prompted by financial concerns and difficulty in recruiting and maintaining staffs. In earlier periods, nuns were available to staff both the school and the hospital. In the 1960s and 1970s, however, few women entered the convent and many left. This required employing more lay nurses. Employing lay nurses with preparation appropriate for faculty positions was particularly difficult. Clearly, continued increased financial outlay was anticipated. It was a burden the religious order could not sustain. When the community agreed to share responsibility for operating the hospital in 1972, the order was relieved of part of its charge. It continued to operate the school. As a story in the local newspaper, The Daily Mining Gazette, of May 9, 1974, said, "While it was difficult to finance the school and to obtain qualified faculty, the philosophy of the order was always to meet the needs of the people" ("Fifty-Four Years of Nursing Education," 1974, p. 4). Therefore, when discussions with Michigan Technological University resulted in that institution's opening an

associate degree program in nursing, the Congregation of St. Joseph of Carondelet was freed of its obligation to people of the Copper Country.

### Summary

Nine hospital schools of nursing operated at various times during an 80-year span in the Upper Peninsula. The first opened in 1897 when the extractive economy of the region boomed. Gradually, as the need for trained nurses was experienced, more schools opened. This occurred even though production in the mines and forests leveled off. The growth of these schools climaxed as World War I drew to a close in 1918. At that time seven hospital schools of nursing functioned in the Upper Peninsula. By 1925, partially as a result of the postwar recession, that number fell to five, although one school, supported by a religious order, opened in 1920. After 1933 only two hospital schools of nursing remained. These continued into the 1970s, when neighboring state universities opened schools or departments of nursing. How these and other social/political events related to the Upper Peninsula hospital schools of nursing can be seen in Table 25.

## CHAPTER V

### PERCEPTIONS OF THE VALUE OF UPPER PENINSULA HOSPITAL SCHOOLS

#### Introduction

Various types of education for entry into the practice of nursing as Registered Nurse had evolved in the United States by the 1950s. Nurses licensed to practice as Registered Nurse could have graduated from hospital school programs, associated degree programs, or baccalaureate programs. All were nominally prepared to practice as generalists in nursing.

Nursing leaders wished to move nursing education out of hospitals and into institutions of higher education. Hospital administrators advocated retaining hospital schools. They felt that hospital school graduates were better prepared, at graduation, to practice nursing.

This chapter was fashioned in an effort to explore what was unique about the contribution of hospital schools. This task was initiated by reviewing events on a national level and relating them to the microcosm of the Upper Peninsula. Then, perceptions of the contribution of hospital schools in the Upper Peninsula were surveyed by seeking opinions from the graduates of these schools regarding the value of their hospital school educations in preparing them for practice as nurses.

### Review of Events in the Nation

Levels of education for entry into practice became a stormy issue for nursing in the early 1960s. Tied to this issue was the question of what would happen to the hospital schools of nursing. Spohn (1962) reported that the issue surfaced in 1960 when the Committee on Current and Long Term Goals of the American Nurses' Association proposed the following goal:

To insure that, within the next 20 to 30 years the education basic to the practice of nursing on a professional level for those who then enter the field shall be secured in a program that provides the intellectual, technical, and cultural components of both a professional and liberal education. Toward this end, the A.N.A. shall promote the baccalaureate program so that in due course it becomes the basic educational foundation for professional nursing. (p. 1)

This statement, known as Goal Three, was accepted by the House of Delegates of the American Nurses' Association at the biennial convention in 1962. The stand engendered immediate and intense discussion among nurses. Many hospital school graduates felt betrayed and responded to what they perceived as an act that stripped them of professional status. This feeling was expressed by one nurse, Williams (1965), in the "Opinion" section of the May 1965 issue of American Journal of Nursing, when she asserted, "I am not a technician," and wrote, "The arbiters of my professional life have decreed that almost 36 months of supervised practice and theory count for very little" (p. 130).

There was no organized opposition to Goal Three within the American Nurses' Association, and the action of its House of Delegates was implemented in December 1965 with the publication of

"American Nurses' Association's First Position on Education for Nursing" in the American Journal of Nursing. The ANA Committee on Education (1965) developed the Position Paper, as it was known, containing the following statements:

The education for all those who are licensed to practice nursing should take place in institutions of higher education . . . [that] minimum preparation for beginning professional nursing practice at the present time should be baccalaureate degree education in nursing . . . [that] minimum preparation for beginning technical nursing practice at the present time should be associate degree education in nursing . . . [and that] education for assistants in the health service occupations should be short, intensive preservice programs in vocational education institutions rather than on-the-job training programs. (pp. 107-108)

The Institution of Medicine (1983) pointed out in a study entitled Nursing and Nursing Education: Public Policies and Private Actions that although the American Nurses' Association was silent about hospital schools of nursing, it was clear no future was planned for them. Moreover, because the preponderance of preparation for professional practice had occurred at hospital schools, the phrase "at the present time" in the clause on preparation for professional nursing practice troubled many. The American Nurses' Association's Board of Directors responded in the March 1966 issue of the American Journal of Nursing to queries about that phrase with:

The board of directors believes at this point in time, the minimum preparation for beginning professional nursing practice should be baccalaureate degree education in nursing. However, the realities of the situation are, while we believe this should be existing today, it does not. We have to work for it through an orderly process of transition. Therefore, the phrase "at the present time" refers to the statement of belief about what should be today rather than what actually exists. (p. 517)

The controversy intensified. The American Hospital Association reacted. Fondiller (1983), writing in The Entry Dilemma, reported that the Board of Trustees of the American Hospital Association prepared a statement strongly supporting hospital schools of nursing. This statement, which was reaffirmed in 1968, was based on beliefs such as:

1. Hospitals conducting schools of nursing and/or other educational programs are institutions of learning indispensable for the education of health service personnel.
2. Hospital schools of nursing are truly educational in character and as such belong in the general system of education, deserving recognition by the academic world and the public as essential and integral parts of the higher education system of the nation. (p. 123)

The Conference of Catholic Schools of Nursing took an opposite stance. According to Fondiller (1983), when this group met in June 1966 they heartily endorsed the ANA Position Paper. The National League for Nursing temporized. Its statement on hospital diploma programs in nursing, adopted on February 2, 1967, according to Fondiller, said:

In the ferment and change in nursing, there is need to sustain accredited diploma programs because they are the source of supply of the majority of today's registered nurses. Therefore, these programs must continue to prepare all of the qualified nursing personnel they can unless and until other educational programs can supply the nursing needs of the nation. (p. 122)

The National League for Nursing, an organization that had consistently championed improvement in nursing education, was caught in an awkward position because it accredited practical, diploma, associate degree, and baccalaureate nursing education programs.

Further, its membership was not limited to nurses but contained a broad spectrum of health fields and the public, including hospital administrators, nursing home administrators, and physicians. The most vocal opposition to the ANA Position Paper, Fondiller (1983) said, came from these groups and from practical nurses and those thousands of registered nurses who remained loyal to the traditions of diploma education. Feelings within some segments of the membership of the National League for Nursing became so intense that withdrawal of diploma programs and their financial support was threatened. Faced with that crisis, the membership, at its biennial convention in 1967, voted to support all types of accredited nursing programs.

Hospital administrators publicly complained about the long orientation period required by nurses educated in institutions other than hospitals. On the other hand, they extolled the rapid assimilation of hospital school graduates. The Wall Street Journal of March 24, 1967, carried a front-page story in which hospital administrators reported that hospital school graduates had the edge over college-educated nurses because diploma nurses were ready to work at the bedside upon graduation, while degree nurses needed 3 to 12 months of supervision. This same story indicated that experienced nurses concurred and felt that college-graduate nurses missed out on practical training (Buel, 1967). Dr. Thomas Hale, writing "A Doctor's Opinion" in the Saturday Review of February 4, 1967, indicated that graduates of community college nursing programs



were not capable, at graduation, of giving safe bedside care. He went on to say that graduates of most four-year baccalaureate programs were little better qualified (Hale, 1967). Thus baccalaureate and associate degree graduates in nursing were viewed as requiring lengthy hospital orientations to achieve competence in bedside practice. Despite this, the number of hospital schools declined. Kalisch and Kalisch (1986) reported there had been 908 diploma programs in 1960. By 1965 the number had declined to 821, and it fell to 797 in 1966. In 1982 only 282 hospital schools remained in the nation (Kalisch & Kalisch, 1986).

The consternation that accompanied the American Nurses' Association's effort to move nursing education into institutions of higher education was unprecedented. What was the perception of the contribution of the hospital schools that such an uproar would follow the proposal that all nursing education should occur in institutions of higher education? Because the Upper Peninsula was viewed by this researcher as a microcosm of the nation and because graduates of the Upper Peninsula hospital schools of nursing had echoed the consternation of diploma school graduates across the nation by expressing disappointment at the closing of their schools, the idea that hospital schools of nursing may have made a unique contribution to society was instilled. Therefore, an attempt to explore the nature of the contribution of the Upper Peninsula hospital schools was undertaken.

### Survey of Upper Peninsula Hospital School Graduates

Graduates of Upper Peninsula hospital schools of nursing were asked the reasons they felt their education in a hospital school was valuable and fitted them for practice. Opinion surveys were mailed to 19 nurses. All 19 responded. (A copy of the survey form and the accompanying letter may be found in Appendix I.) The participants were chosen for the convenience with which they could be involved in the project. Several were known to the researcher through work experiences. Others were members of alumnae groups. Some participants were members of a club composed of retired nurses. A few had been interviewed earlier for information about their schools. Each was familiar with the nature of the study and supported its intent. Therefore, each participated willingly.

The respondents represented four hospital schools. Ten of the respondents had graduated from St. Joseph's Hospital School of Nursing in Hancock. Seven had graduated from St. Luke's Hospital School in Marquette. One had graduated from Sault Ste. Marie Hospital, and one had graduated from Calumet & Hecla Hospital Training School for Nurses. The respondents came from classes that had graduated in each of the six decades from the 1920s to the 1970s. The earliest graduate among the respondents had graduated in 1921. The last graduate had finished in 1973.

Sixteen of the 19 had worked in nursing for ten years or longer. Three had married within three years of graduation and had not worked after being married. These were nurses who had graduated in 1921, 1927, and 1933. Seven nurses' working experiences occurred

exclusively in institutional work. Four had been involved in private duty and institutional work. Two had experience in institutional and public health nursing. Two were involved in nursing education and had institutional nursing experience. Two others had experience as office nurses as well as in institutional nursing. One participant's experience was limited to private duty, while another had functioned only in a physician's office. Four of the respondents had completed bachelor's degrees in nursing, and two of these possessed advanced degrees.

The responses were read, reviewed, classified, and tallied as shown in Table 26. The most common response referred to extensive experience in various clinical settings. This factor was identified by 14 of the 19 respondents (73.68%) as having been valuable in fitting the individual for practice as a nurse. Some mentioned this simply as being proficient in bedside nursing skills. Others detailed the variety of clinical experiences and mentioned affiliations. The opportunity to experience a second rotation in each of the clinical areas and to gain skill and confidence was also pointed out.

The ability to move with ease from the student to a service role was identified by 13 (68.42%) of the respondents. This lack of gap between education and service was variously identified. Some pointed out that they had been responsible for the welfare of all patients on wards during evening and night shifts. Others mentioned that students had "practically staffed the hospital." Still others,

Table 26.--Synopsis of factors as recalled by Upper Peninsula hospital school of nursing graduates that they believed fitted them for practice as nurses.

Year of Graduation	No. of Nurses	Extensive Clinical Experiences	No Education to Service Gap	Early Socialization Into Profession	Comfortable Nurse-Doctor Interactions	Accountability to Patients	Experienced Nurse Teachers	Management Skills	Low-Cost Education
1921	1	1	1	-	1	-	-	-	-
1927	2	1	2	1	1	-	-	-	-
1928	1	1	1	1	1	-	-	-	-
1929	1	-	-	1	1	1	-	-	-
1933	3	1	2	1	-	-	-	-	-
1934	1	1	1	1	1	-	-	-	-
1935	1	1	1	-	-	-	1	-	-
1942	1	1	-	-	-	1	-	1	-
1948	1	-	-	1	1	-	1	-	-
1952	1	1	-	1	-	1	1	-	-
1956	1	1	1	-	-	-	-	-	1
1958	1	1	1	1	-	-	-	-	-
1961	1	1	1	-	-	-	-	-	1
1967	1	1	1	1	-	1	-	1	-
1969	1	1	1	1	-	-	-	-	-
1973	1	1	-	-	-	-	-	-	-
Total	19	14 (73.68%)	13 (68.42%)	10 (52.63%)	6 (31.58%)	4 (21.05%)	3 (15.79%)	2 (10.53%)	2 (10.53%)

graduates of the 1930s and 1940s, indicated they were in charge of hospital units as seniors, especially while on affiliation. Related to this, but identified as a factor useful to them in their careers by only two (10.53%) respondents, was the opportunity to learn and practice management and leadership skills. One of these nurses was a graduate of 1942, while the other had graduated in 1967. Both had functioned in management positions in institutional nursing.

The third largest category of responses fell into the category of early socialization into the profession. This item was identified by ten (52.63%) of the respondents. Some mentioned the camaraderie of living together in a nurses' home, where nursing was a common topic of discussion. Four mentioned the discipline of the hospital and learning to work with physicians and supervisors. One mentioned the ritual of capping and a sense of pride in being a nurse.

Being comfortable in nurse-physician interactions, which were learned by association during their student days, was mentioned by six respondents (31.58%). Four pointed out that they had been taught by physicians and in that process had learned how to interact with them. These nurses had graduated in 1921, 1928, 1934, and 1948. Learning to respect physicians as peers was mentioned by one nurse, and another mentioned learning to carry out physicians' orders. Having been taught accountability to patients was identified by four (21.05%) of the respondents as having fitted them for practice in nursing. Two nurses, who graduated in 1929 and

1942, mentioned that being taught to keep information about patients in confidence was valuable to them in their practice as nurses. Being taught to value commitment to health and patient care was reported by two (10.53%) of the respondents, who had graduated in 1952 and 1967, as being assets to their practice of nursing.

Learning from experienced nursing supervisors or teachers was identified by three (15.79%) of the respondents as having contributed to preparing them for practice in nursing. The advantage of small classes and the good supervision in all areas was pointed out by two nurses. These nurses had graduated in 1935, 1948, and 1952.

The low cost of their education was mentioned by two (10.53%) respondents. These two had graduated in 1956 and 1961, before the low-interest, long-term loans authorized by the Nurse Training Act of 1964 were available to students in nursing programs approved by the National League for Nursing.

Generally, these findings paralleled what was being reported nationally in 1966 about hospital school graduates. This group seemed to feel they were prepared to function as nurses when they graduated from the hospital school. Not one of them mentioned any feelings of insecurity. Instead, feeling "confident" was mentioned. No one experienced the frustration or disillusionment on entering the world of work that Kramer (1974) described in Reality Shock. Many of those who had graduated by or before 1948, in particular, mentioned being comfortable in nurse-doctor relationships. Having learned to deal with accountability to patients and to provide care

through working with others were cited as factors that had assisted some individuals to practice as nurses. Nurses who mentioned these factors had graduated from 1929 onward.

Only two (10.53%) respondents identified the low cost of the education they received as contributing to their ability to practice as nurses. Perhaps some of the others had not considered any other profession and therefore had not compared costs. Because these two nurses had graduated just before the long-term, low-interest loans became available, they may have been very conscious of costs. Many may not have felt it to be a relevant factor in their practice. Some may have come from families in which the cost of an education was not an issue. It is more likely, however, that the distance between the cost of an education and its outcome diminished the perception of the effect of the one upon the other.

## CHAPTER VI

### FINDINGS AND CONCLUSIONS

#### Introduction

The purpose of this chapter is to present the findings regarding the hospital schools of nursing in the Upper Peninsula. After the presentation of the findings, conclusions about the forces that stimulated and shaped the development of nursing education in the Upper Peninsula are drawn, and recommendations for further study are made.

#### Findings

The first question investigated and analyzed was: "How did the economy of the Upper Peninsula affect the hospital schools of nursing?" The economy of the Upper Peninsula, as cited in Chapter II, enjoyed a period of prosperity from the last decade of the nineteenth century through the second decade of the twentieth century. It was during this time that the Upper Peninsula hospital schools of nursing opened. The first school opened in Lake Linden, a community involved in activity associated with copper mining, in 1897. The second opened in 1899 at Marquette as that city began to enjoy the effects of iron mining in its vicinity. The third, at St. George's Hospital in Iron Mountain, operated only to produce two nurses, but it did so while the Menominee Iron Range was at full



production and Iron Mountain was bustling with activity. When the school of nursing opened in 1903 at Sault Ste. Marie, that city, too, enjoyed prosperity. Through its busy locks passed ships loaded with ores, timber, and grain from the North. Although Newberry's farming and lumbering provided it with a fairly stable economy, opening the state mental hospital had stimulated it and assured its continuation. It was in this environment that the school of nursing opened. Houghton County Training School for Nurses, at Laurium, and Calumet and Hecla Hospital Training School for Nurses, at Calumet, both opened at the peak of the copper-mining boom. St. Joseph Hospital School of Nursing at Menominee opened while World War I stimulated the economy of Menominee. At Hancock, St. Joseph's Hospital School of Nursing opened just before the post-World War I depression set in. Copper mines and mills, however, continued to function at high production levels near Hancock in 1920.

The schools had opened when the Upper Peninsula economy flourished. Conversely, three schools closed during depressed periods. The first of these closures occurred during the post-World War I depression. The casualty was the school at Calumet and Hecla Hospital. The mining company determined it could operate its hospital more cost effectively with a graduate nurse staff. Two other schools succumbed during the depression following the stock market crash of 1929. These were Houghton County Training School, which closed in 1932, and Chippewa County War Memorial Hospital Training School, which ceased to operate in 1933. Four other

schools had closed by 1932, but there was no evidence that they had closed because of depressions in the economy.

The two schools that continued to operate after the Great Depression had well-qualified faculties during the 1930s, as shown in Tables 4 and 15. In the case of St. Luke's Hospital School of Nursing, Miss Neal, Miss Boekelheide, and Miss Helz all had bachelor's degrees. Miss Pringle had a normal school preparation with graduate work at McGill University, and Miss Killian had a master's degree in Nursing. None of these women were local women. All came to Marquette from metropolitan areas during the 1930s. It is likely that as work became scarce in cities, these nurses migrated to rural areas where nurses with their preparation were very uncommon. As a result, St. Luke's Hospital Training School for Nurses benefited from a well-prepared faculty during the 1930s. St. Joseph's Hospital School of Nursing in Hancock, likewise, enjoyed well-prepared faculty throughout the 1930s. In that case, however, those nurses responsible solely for teaching were two nursing members of the Congregation of St. Joseph of Carondelet, and these two nuns stayed with the school into the 1940s. The order had a sufficient number of adequately prepared nurse faculty for the number of student nurses enrolled during the 1930s.

The second question to be addressed was: "How did wars affect these schools?" Only one of the Upper Peninsula hospital schools of nursing operated during the Spanish-American War. Very little information at all was available about that school. No information was available about what effect, if any, the Spanish-American War

had on its students, faculty, or operation. That school, Lake Superior Training School for Nurses, closed immediately after World War I, not as an effect of the war, but rather because the small proprietary school did not meet the increasingly more stringent standards applied by the Michigan Board of Registration of Nurses.

Five of the Upper Peninsula hospital schools of nursing opened within ten years of the end of the Spanish-American War in 1899. The schools were St. Luke's Hospital Training School for Nurses, St. George's Hospital Training School for Nurses, Sault Ste. Marie Hospital Training School for Nurses, the training school at the Upper Peninsula Hospital for the Insane, and Houghton County Training School for Nurses. Although the corporate articles of the hospitals or their schools spoke to the purpose the institutions were designed to serve, no preamble existed to tell of the stimuli that engendered the establishment of the hospitals or schools.

In Chapter II it was pointed out that the adulation bestowed on nurses for their role in the Spanish-American War enhanced the stature of nursing in the nation. It is not unreasonable to credit that same factor with prompting people in the Upper Peninsula to accept nursing as an honorable career for women and, thus, construe that the war influenced the opening of these training schools for nurses. Moreover, the second director of the training school for nurses at St. Luke's Hospital, who took over the role within weeks of the school's opening, was a nurse, as mentioned in Chapter IV, who was a member of a respected Upper Peninsula pioneer family and a

veteran of the Spanish-American War. At Hancock, as mentioned in Chapter IV, the members of the Congregation of St. Joseph of Carondelet, who established St. Joseph's Hospital, were nurses who were, likewise, veterans of the Spanish-American War. One of them, Sister Irmena, remained to become the first director of that hospital's school of nursing when it opened in 1920. This school opened within two years of the armistice following World War I, but it is unlikely that this war had as much effect on the opening of this school as the Spanish-American War had on the earlier Upper Peninsula schools. Nationally, there was no great increase in the number of schools of nursing following World War I as there had been following the Spanish-American War. Further, in the local area, as indicated in Chapter IV, by 1920 two schools of nursing had ceased to operate. A third closed in 1921. It is probable that the closure of this school increased the nuns' resolution to operate a school of nursing in Houghton County.

Six hospital schools of nursing other than St. Luke's Hospital Training School for Nurses operated during World War I. They were the new school of nursing at St. Joseph Hospital in Menominee, Lake Superior School for Nurses at Lake Linden, Houghton County Training School for Nurses at Laurium, Calumet & Hecla Hospital Training School for Nurses, and the training schools for nurses at Sault Ste. Marie and Newberry. According to the available data, World War I had no effect on the curriculum, students, or faculty at these schools. It might, however, be argued, from information presented in Chapter IV, that price controls that had been imposed during

World War I limited the amount of profit the Calumet and Hecla Mining Company could make on copper during the post-war period. This, in turn, caused management of the company to scrutinize the value of its several operations. In this fashion, it may be reasoned that indirectly World War I acted as a cause of the school's demise. However, the post-war recession clearly had a more direct effect.

Both St. Luke's Hospital Training School for Nurses, or St. Luke's Hospital School of Nursing as it became known, and St. Joseph's Hospital School of Nursing operated during World War II. At both, as pointed out in Chapter IV, the majority of enrollees were members of the Cadet Nurse Corps. The financial incentive offered by the federal government as well as the glamour of helping in the war effort induced young women to volunteer for training as Cadet Nurses. At that time both schools arranged to have classes in Psychology, Sociology, Chemistry, and Microbiology taught at nearby state colleges in order to provide education acceptable to the federal government. At Marquette this arrangement between the hospital and the college continued until the hospital school closed in 1977. The arrangement to which the college at Houghton and the school of nursing at Hancock were parties was discontinued by 1947 and only resumed in 1969, five years before the school of nursing closed.

The third question that was examined was: "How did changes in science and medicine affect the schools and influence the nursing

curricula?" The most cursory scanning of information on curricula presented in Chapter IV demonstrated that, with the passage of time, both the hours of instruction and the number of courses studied increased. The increase in the number of courses was halted in the 1960s at the two surviving schools. The hours of instruction, however, at St. Joseph's Hospital School of Nursing continued to increase until the school closed. At St. Luke's School of Nursing, hours of instruction were decreased when the curriculum was reduced to two years and a summer session in 1970, as the data in Chapter IV showed.

What was taught in the very early years is not known. The first curriculum that was available for any of the schools was the 1910 curriculum of Lake Superior Training School for Nurses, as reported by the consultant to the Michigan Board of Registration of Nurses and Trained Attendants in 1962. This early curriculum contained courses from the biologic sciences and medical therapies as well as nursing arts and nursing skills applied in various developmental and disease states. Topics in nursing administration and social services as well as topics in several medical specialties were studied by students who affiliated at Illinois Training School. As was indicated in Chapter IV, the topics in the medical specialties became part of the basic curriculum in nursing when the Michigan Board of Registration of Nurses and Trained Attendants revised the curriculum standards in 1925. From there on, student nurses studied Gynecology, Orthopedics, Urology, Pathology, and Skin and Venereal Diseases. This reflected the growth of subspecialties

in medicine. Psychology, Social Services, and Public Sanitation, likewise, were fixed into the curriculum of Upper Peninsula schools of nursing with the 1925 revision of curriculum standards. This reflected changes proposed by the Goldmark Report of 1923, which asserted, as pointed out in Chapter II, that nurses were inadequately prepared to function in Public Health Nursing. Later, in the 1930s, as shown in Chapter IV, study of the mental disorders and nervous diseases was added. This reflected advances in Psychiatry and Neurology. During the 1940s, courses were not added, but content was added to the courses, as was repeatedly demonstrated in Chapter IV. Such manifestation of the increasing knowledge base in medicine and the sciences was evident throughout Chapter IV as curricula gained in substance and complexity. The rise of nursing theories reduced reliance on medical science to provide content in nursing. The effect of this shift can be seen in Chapter IV in sections where the curricula of the late 1960s are discussed. The phenomenon was evident in the curriculum of St. Luke's Hospital School of Nursing in 1963 and became more pronounced as the decade progressed. At St. Joseph's Hospital School of Nursing the change began in 1963, when several courses were combined and nursing courses began to reflect the differences in care of patients with acute and long-term health problems. This change accelerated and continued until the program closed. These alterations were traced in Chapter IV.

The advances in science and medicine compelled the hospital schools to hire teachers competent to teach that material. When teachers could not be hired, as especially happened in the realm of the sciences, services were contracted. Such arrangements were discussed in Chapter IV with reference to the hospital schools in Marquette and Hancock and the nearby state colleges. Moreover, experiences in caring for patients being treated in the medical specialties had to be provided for students learning about these specialties. This necessitated arranging affiliations for these clinical experiences. This practice was discussed in Chapter IV in reference to all but two of the Upper Peninsula hospital schools of nursing. One of these schools operated only from 1901 to 1903 and in this short time was not affected by changes in science or medicine. The other school, Lake Superior Training School for Nurses, declined the challenge and was removed from the list of accredited schools, as told in Chapter IV.

The fourth question posed for study was: "Did the increasing opportunities for education of women have any effect on nursing education?" In Chapter II, Adelaide Nutting was cited as she lamented that opportunities in higher education would attract well-prepared women and reduce the pool of well-prepared candidates available to nursing. Miss Nutting had called attention to this prospect, not in an attempt to close off these opportunities, but to warn her colleagues and to stimulate schools of nursing to become more competitive with colleges. Whether or not this concern was borne out cannot be substantiated. Data about the number of women



in the population who were equally well prepared to enter either nursing or some field requiring a college education and who elected to enter the field requiring the college education because that educational process was more appealing cannot be had. What the information in Chapter IV showed was that in 1935, when the entrance requirements at St. Joseph's Hospital School were raised to the upper third of the high school graduating class, Sister Helena noted there were "plenty of candidates." This standard was lowered in 1951 to the upper half of the graduating class. However, candidates had to be eligible for college entrance. At St. Luke's Hospital Training School for Nurses, where high school graduation was required from 1926 onward, the criteria in 1942 demanded eligibility for college entrance. By 1930 all schools of nursing in the Upper Peninsula insisted on high school graduation before enrollment. Thus, it seems that in the Upper Peninsula the increasing educational opportunities for women may have operated to require better prepared women who could cope with an increasingly more demanding curriculum.

Another effect on nursing education in the Upper Peninsula that demonstrated increasing educational opportunities for women was better prepared teachers for schools of nursing. As discussed in Chapter IV, from the 1930s onward, baccalaureate preparation, at least, was found on the faculties of both surviving schools. Had there not been opportunities for women in higher education, the Cadet Nurses would not have been welcomed at Michigan College of

Mining and Technology or at Northern Michigan College of Education, as recorded in Chapter IV. An outgrowth of this development was that student nurses began to accrue some transferable college credit while attending diploma programs. Eventually, even student life changed and became more college-like. As told in Chapter IV, before the last two hospital schools of nursing closed, women students could live away from the nurses' home, getting married was no longer cause for dismissal, and both schools had become coeducational. The final step came when both schools closed and nursing education became one of the offerings at the two neighboring state universities.

The fifth question analyzed was: "How did the various studies of nursing and nursing education affect the Upper Peninsula hospital schools of nursing?" The first of several studies done on nursing and nursing education was conducted by the Committee for the Study of Nursing Education. Its report, which was issued in 1923, was known by the name of its secretary, Josephine Goldmark. Hence, this study has been called the Goldmark Report. This report, cited in Chapter II, was a thorough indictment of nursing education. It found:

. . . that the average hospital training school is not organized on such a basis as to conform to the standards accepted in other educational fields; that the instruction in such schools is frequently causal and uncorrelated; that the educational needs . . . of students are frequently sacrificed to practical hospital exigencies; that such shortcomings are primarily due to the lack of independent endowments for nursing education; that [most] existing educational facilities . . . inadequate for the preparation of the high grade of

nurses required for the care of serious illness, and for service in the fields of public health nursing and nursing education. (Goldmark, 1923, p. 21)

Therefore, this committee recommended, as outlined in Chapter II, establishing a four-month pre-clinical term and standardizing the length of clinical practice on each of the nursing service areas. Another recommendation was that the nursing practice curriculum should reflect the various areas of nursing practice and that clinical studies and classroom learning should correlate. One of the most important recommendations was that schools of nursing should be independently endowed and governed by a training school board. Some of the recommendations about curriculum were already incorporated in The Standard Curriculum for Schools of Nursing, a curriculum guide published in 1917 by the National League of Nursing Education (NLNE). The Goldmark Report and The Standard Curriculum for Schools of Nursing (1917) formed the basis for Standards for Accredited Schools of Nursing as promulgated in 1925 by the Michigan Board of Registration of Nurses and Trained Attendants. These standards did not press for correlation of classroom teaching and clinical experience, but clinical-experience requirements stipulated practice in a great variety of nursing service fields. No effort was yet made in Michigan to require independent budgets for schools of nursing, much less endowments and an independent board, as the Goldmark Report recommended. It was only in 1930, according to data reported in Chapter IV, that instructors at St. Luke's Hospital Training School for Nurses and at St. Joseph's Hospital School of Nursing had "additional training beyond the basic nursing course" as

the Goldmark Report recommended. No additional training was mentioned for the instructors at any of the other Upper Peninsula hospital schools.

Recommendation 6 of the Goldmark Report, which was presented in Chapter II, predicted that if only high school graduates were enrolled, the length of the hospital school program could be reduced to 28 months. But, to achieve this state of affairs, the Goldmark Report pointed out, it would be necessary for the schools to be independently financed and operated. Although the school of nursing at Sault Ste. Marie started as a two-year program, as did St. Luke's Hospital Training School, both increased the length of the training period. According to data presented in Chapter IV, the school at Marquette shifted to a three-year program in 1915, while the school at Sault Ste. Marie had lengthened its programs to 30 months by 1919. Then, in 1930, this school again lengthened its program, this time to three years. In 1969, according to data cited in Chapter IV, the program at St. Joseph's Hospital School of Nursing was reduced to two years and one summer, and the following year the curriculum at St. Luke's Hospital School of Nursing, likewise, was cut to two years and one summer. At that time these programs received some federal monies and had independent budgets, but both remained far from being independently financed or governed.

The second major study of nursing and nursing education that was cited in Chapter II was done by the Committee on the Grading of Nursing Schools. The portion of the study dealing with nursing

schools was published as Nursing Schools Today and Tomorrow in 1934. This group found that half the nation's schools were connected with hospitals having 75 or fewer patients and that more than half the schools used affiliations to provide services not available at the small home school. Ninety percent of students admitted by 1932 were high school graduates, and 77% of the schools employed a full-time nurse instructor. Only 25% had at least two full-time teachers. While those findings characterized the schools, the finding on curriculum was that less time than recommended by the NLNE was spent on communicable disease and psychiatric services. The data reported in Chapter IV showed that the Upper Peninsula hospital schools of that time, i.e., St. Luke's Hospital Training School and St. Joseph's Hospital School of Nursing, fit the dominant pattern in size and curriculum. Their students, however, all were high school graduates, and these two schools were among the 25% that had at least two full-time teachers.

The Committee on Grading Schools echoed the Goldmark Report in that it, too, recommended seeking endowments and operating under an independent board. This committee also recommended that all faculty should be college graduates with special training in their field. Moreover, they recommended that theoretical instruction should be expanded.

Only in 1941 did a Nursing School Committee appear among the data reported by an Upper Peninsula school of nursing to the Michigan Board of Registration of Nurses and Trained Attendants. As mentioned in Chapter IV, it was 1941 when the report from St. Luke's

Hospital School of Nursing listed the members of the School of Nursing Committee. St. Joseph's Hospital School of Nursing did not report having a School of Nursing Committee until 1944. These committees, unlike the boards recommended by the Goldmark Report or Nursing Schools Today and Tomorrow, were advisory. Budgets were reported for the first time by Upper Peninsula schools of nursing in 1959. Neither school was supported by endowments.

By 1934, the year Nursing Schools Today and Tomorrow was published, the only two schools of nursing remaining in the Upper Peninsula were St. Luke's Hospital Training School for Nurses and St. Joseph's Hospital School of Nursing. Both these schools had, as cited in Chapter IV, faculty who were college graduates, and both schools began gradually to increase the hours of instruction in their curricula.

The finding in Nursing Schools Today and Tomorrow (1934) that less time than recommended by the NLNE was spent in clinical practice in Psychiatry was borne out in both schools. Neither offered a clinical experience in Psychiatric Nursing until 1948, when St. Joseph's Hospital School of Nursing, as reported in Chapter IV, provided a two-week experience for its students at Newberry State Hospital. By 1950, both schools had arranged affiliations of three months' length in Psychiatric Nursing for their students. The affiliations in Psychiatric Nursing continued through 1969 at St. Luke's Hospital School of Nursing and up to 1969 at St. Joseph's Hospital School of Nursing.

St. Luke's Hospital Training School for Nurses, as reported in Chapter IV, provided its students with a three-month experience in nursing in communicable diseases at Herman Keifer Hospital in Detroit until 1935. They met the NLNE's recommendation for practice in Communicable Disease Nursing during that period. At St. Joseph's Hospital School of Nursing, no such provision was made. They were among the schools that did not meet the NLNE's recommendation. In 1939, as reported in Chapter IV, an affiliation with St. Luke's Hospital School of Nursing in Marquette was arranged. This provided two to three weeks of practice in Communicable Diseases and easily met the NLNE's 1937 curriculum recommendations.

The next major study of nursing education, one conducted by Esther Lucille Brown and reported in 1948 under the title Nursing for the Future, was discussed in Chapter IV. This study revealed that faculty in schools of nursing were inadequately prepared and that "many hundreds of schools" used students to staff their hospitals (Brown, 1948, p. 51). Brown recommended a thorough examination and evaluation of all schools, with dissemination of the evaluation of the schools to the public. She also recommended that schools be periodically reexamined and reevaluated. She favored moving nursing education into institutions of higher education using a dual approach, which would provide for professional and technical levels of practice. She urged statewide planning for nursing education and echoed the Goldmark Report on the need for endowments.

Both schools in the Upper Peninsula had some less-than-bachelor's-prepared faculty during the 1940s, as demonstrated in

Chapter IV. Faculty had been better prepared during the 1930s. While it is likely, as mentioned earlier in this chapter, that the Upper Peninsula schools benefited from the Great Depression by securing faculty unable to find work in metropolitan areas, the converse was likely the case during the 1940s, when many nurses volunteered into the armed forces or migrated to cities where pay scales were more rewarding and work was plentiful. Clearly, there was a greater proportion of less-than-bachelor's-prepared nurses teaching at Upper Peninsula schools for nursing in the 1940s than in the 1930s. Both Upper Peninsula schools of nursing, however, fared better than did the average of schools in the nation, according to Brown (1948). In her study only 23% had bachelor's degrees. At St. Luke's Hospital School of Nursing, 3 of 13 nurse faculty (25%) had bachelor's degrees at this time, while at St. Joseph's Hospital School of Nursing, 3 of 7 nurse faculty (43%) had bachelor's degrees. Both schools fared better in the matter of master's-prepared nurse faculty as well. Nationally, 4% of nurse faculty had master's preparation, according to Brown's study cited in Chapter II. In the two Upper Peninsula schools, however, one member of each faculty possessed a master's degree. This meant 14% of the nurse faculty at St. Joseph's Hospital School of Nursing and 8.33% of the nurse faculty at St. Luke's Hospital School of Nursing possessed master's degrees.

Students in the Upper Peninsula schools felt they staffed the hospitals, as reported in Chapter V. The length of students' work



week, as cited in Chapter IV, supports that contention. A student's work week at both schools in 1941 accounted for 52 hours, including class, during day shifts. A week of night shifts was reported as 56 hours, excluding class time, at St. Joseph's Hospital School of Nursing and as 57 hours, excluding class time, at St. Luke's Hospital School of Nursing in 1941. Throughout the 1940s the director at St. Joseph's Hospital School of Nursing reported a 48-hour week, including class time, on day and evening shifts. A week of night shifts was reported as 48 hours, excluding class time, in 1944. However, from 1946 onward, a week of nights was reported as 42 hours, excluding class, because of the students' being relieved to eat a midnight supper. At St. Luke's Hospital School of Nursing, a week of day shifts, including class, was reported as 44 hours in 1942, 1944, and 1949. Only in 1948 was a week of days reported as 48 hours. A week of night shifts during the 1940s was reported as 48 hours when class time was included or as 44 hours when class time was excluded. A week of evening duty, including classes, was reported as 48 hours in 1948 and 44 hours in 1949. Day shifts were reported as being "broken," i.e., 7 a.m. to 11 a.m. with a return to duty from 4 p.m. to 7 p.m. These data, cited in Chapter IV, tended to confirm the former students' views, which were cited in Chapter V; i.e., the student nurses of that time staffed both these Upper Peninsula hospitals. This finding parallels the finding in Brown's (1948) study.

As cited in Chapter II, Brown recommended state-wide planning for nursing education. At least two studies, the Bixler and the

Cunningham studies, were accomplished in Michigan, as cited in Chapter II, to assess Michigan's needs. The plan that evolved from these studies was entitled "Action Plan for the Future of Nursing Education in Michigan" and was published in the January-February 1966 issue of The Michigan Nurse. It proposed a baccalaureate program at Marquette and associate degree programs at Houghton, Sault Ste. Marie, Ironwood, and Escanaba. In 1968 a baccalaureate program opened at Marquette, and soon afterward associate degree programs were opened at the other locations.

As mentioned in Chapter II, one of the responses to Nursing for the Future was an effort to implement the recommendation to examine and evaluate the nation's schools of nursing. The two Upper Peninsula schools participated in this project, which was labeled the "School Data Analysis." The findings of this nationwide survey were published as "Interim Classification of Schools" in the American Journal of Nursing of November 1949. St. Luke's Hospital School of Nursing, as cited in Chapters II and IV, was ranked in Group II with nine other Michigan hospital schools of nursing. This meant it ranked among the middle 50% of schools in the nation. St. Joseph's Hospital School of Nursing was not ranked. It was evaluated as belonging to the lowest 25% of schools in the nation. No explanation for this poor showing was offered, but a letter intimated that, had the association with Michigan College of Mining and Technology continued, the ranking might have been different.

As cited in Chapter II, Montag (1951) and Bridgman (1953) had published works that not only distinguished between technical and professional practice but, more importantly, elucidated what the preparation for each should be. Based on all these studies, the American Nurses' Association (ANA) published its "Position Paper" in 1965. In Michigan the Bixler (1946) and Cunningham (1954) studies had laid the foundation. The final impetus came from the ANA "Position Paper." The Michigan Nurses' Association presented its "Action Plan for the Future of Nursing in Michigan" within a month. Administrators in Upper Peninsula hospitals and institutions of higher education began to implement that plan by 1968. With the close of St. Luke's School of Nursing in 1977, as cited in Chapters I and IV, all nursing education in the Upper Peninsula occurred in institutions of higher education.

The last question to be addressed was: "Did trends in nursing education in the Upper Peninsula parallel trends in nursing education in the nation?" The rapid growth of hospital schools in the nation was cited in Chapter II. There it was stated that the 16 schools in 1880 had increased over eightfold to 132 in 1890. In the Upper Peninsula the first hospital school opened in 1897. By 1908 five hospital schools operated, a fivefold increase. The rate of growth slacked off but nevertheless continued until the years 1918 to 1920, when several schools operated. The peak was reached at that point.

By 1934 only two schools remained. This growth of hospital schools in the Upper Peninsula began later, crested sooner, and

declined sooner than did hospital schools in the nation, but the pattern of growth and decline was similar. The decline was mentioned by Mrs. Mahowald, who was cited in Chapter IV, in reference to factors considered during deliberations about closing St. Luke's School of Nursing. In Chapter V, Kalisch and Kalisch (1986) were cited as reporting that in 1960 there had been 908 diploma programs. By 1966 this number had declined to 797, and by 1982 that number had shrunk to 282.

Closing of the hospital schools in the Upper Peninsula caused their alumnae to feel disappointed and disillusioned, as did alumnae of such schools throughout the nation. The consternation engendered by these actions was discussed in Chapter V. Across the nation it was believed that hospital schools' graduates were the nurses best prepared, immediately after graduation, to assume the broad scope of activity and responsibility that characterized the role and function of staff nurse. The informal survey of opinion of Upper Peninsula hospital school graduates, reported in Chapter V, demonstrated that they, too, shared this belief. They felt their schools had prepared them to practice nursing competently and confidently. They believed they had been given strong bases in the interpersonal relationships required to survive in nursing and that they had been socialized into the profession during their student period so there was no discouragement or disillusionment when they entered the workaday world.

### Conclusions

It seems evident that economic conditions affected nursing education. During the period when the cost of educating nurses was contained within the means of a hospital, without being transmitted to patients as higher charges or factored in a diminishing profit margin, as in the case of proprietary hospitals, hospital schools of nursing thrived. Their viability was threatened where costs of educating these students mounted. Thus, the desire to educate student nurses was most rapidly extinguished when the hospital that operated the school was a proprietary institution. In other hospitals the commitment to educate nurses survived a longer time. By 1969 the American Hospital Association calculated, according to a story in The Wall Street Journal (Buel, 1967), that hospital schools lost, on an average, \$1,700 per student. Such losses would inevitably be passed on to patients. When the cost of educating a nurse must be borne only by the segment of a population that is hospitalized, the cost becomes too dear. Broad-based support for nursing education seems to be a requirement in a modern society.

In nations where hospitalization costs are tax-borne, the cost of educating nurses in hospitals is broadly distributed, as are the costs of all other government services. Thus, in socialistic nations, the movement of nursing education into institutions of higher education has been much slower in developing than in the United States. Leaders in professional nursing in these nations often express chagrin at the lack of movement toward university education for nurses. They feel thwarted in their efforts to

advance the status of nursing. They point out that all too often the Ministers of Health are not nurses, but physicians with little sympathy for, or understanding of, nursing. Their major concern is care of the health needs of the nation. As long as there are sufficient trained hands and feet to accomplish the pressing tasks, the Ministers' goals have been met. The disgruntlement of nurses at their low status is not a pressing concern. It is, however, a feminist issue.

Nursing education, like education for medicine, ministry, and law, which are characterized by intense professional-client relationships and which require, on the part of the professional, responsibility for his/her acts and accountability to the client, developed from a simple approach of a "master" practitioner teaching a few disciples. In the beginning the learners used the resources of the "master," including the library and clients, to learn the profession. The system was abandoned in each of these professions when the complexity of the material to be learned overwhelmed the resources and when the "master's" span of control was exceeded, increasing the risks to the client or his/her interest. So it was with nursing.

Dissatisfaction with the system produced change. The process of learning in these professions moved into schools with greater resources. There the process of learning was nurtured. With expanded resources the complex material could be learned more expeditiously, and inquiry could be pursued in a safe environment.

Inquiry is not a hallmark of hospital school education. Doing is. Scholarly inquiry in nursing, as in the older professions, was nurtured by and pursued in universities. Thus, it seems that where a society's needs require rapidly acquired skills, hospital school training is the appropriate model. When societal needs extend beyond the need for provision of skilled services, the university model of education is superior.

Hospital schools of nursing were vocational programs designed to impart the knowledge and skills required to deal with patients' needs and the hospital milieu. Most have vanished as have the business schools and academies of the early twentieth century. In the modern era they have been replaced by vocational programs in community colleges and their equivalents at skills centers in other institutions. The growth in these institutions, designed to offer short-term programs, and the proliferation of their offerings, are remarkable. Less-than-degree and certificate-level programs are offered in many diverse fields: Programs in computer science, aircraft-engine repair, institutional food preparation and service, sanitary waste management, and forest management are among a few of the offerings. What is available varies according to the area in which the school is located. Moreover, particular programs may be encouraged and even subsidized by local industries.

All such programs are narrowly focused and vocationally oriented. They are designed to provide adults with skills for a job market. They are instruments that spring from a social need and are developed to meet that specific need. Society, however, is impinged

upon by many forces that shape and mold society's needs. Thus, society's needs change, sometimes suddenly and unpredictably. Vocational programs, designed to respond to a particular need, may not be able to accommodate to the transition and may not survive. As social instruments they make vital contributions to society. The hazard lies in not reckoning with the transience of their nature.



## **APPENDICES**

**APPENDIX A**

**FACSIMILE OF PULLEN LETTER**

STATE OF MICHIGAN  
BOARD OF NURSING  
148 Stevens T. Mason Buliding  
Lansing, Michigan

December 20, 1962

Miss Janice Hopper  
Student Nurse  
Box 75, Ryan Hall  
Hancock, Michigan

Dear Miss Hopper:

I have been out in the field and found your letter upon my desk on my return Monday A.M. December 17.

The information below has been copied as written in the files.

The Calumet - Hecla School of Nursing was approved by the Michigan Board of Nursing on September 23, 1913. The hospital was incorporated the same year.

The hospital was set up to care for the employees and families of the miners.

The bed capacity was 30 adult beds.

Four hundred and thirty five patients were admitted in 1912.

The length of the course was 3 calendar years.

Requirements for admission, were as follows:

- a. One year of high school.
- b. Preferably high school graduation.
- c. Candidates had to be 20 years of age.
- d. Two months preliminary course was given.
- e. Students had 6 hours in primary technique.

The junior class had:

- a. 18 hours of Nursing - Inst. Katherine Speehan
- b. 25 hours of Anatomy - Inst. M.B. Northway, R.N.
- c. 10 hours of Anatomy given by Dr. H. Penney

Intermediate class:

- a. Dietetics 8 hours, M.B. Northway
- b. Materia Medica, 14 hours, M.B. Northway
- c. Ethics 4 hours, M.B. Northway
- d. Bacteriology 6 hours, Dr. D.D. Todd
- e. Pediatrics 4 hours, A.B. Simlam
- f. Venereal Disease 3 hours, Dr. J.D. McKinna
- g. Bandaging & Minor Surgery \_\_\_\_ hours (not given)
- h. Eye, Ear, Nose & Throat \_\_\_\_ hours (not given) Dr. M. Edwards

- i. Three months service in the clinic.
- j. Massage 7 hours, Jennie Leveaux, R.N.
- k. Lectures

Medical 5 hours, Dr. George Gordan  
 Surgical 10 hours, Dr. G.M. Rees  
 Obstetrics 4 hours, Dr. A.A. Davis

#### Classes:

Obstetrics and care of infants 8 hours, Millicent B. Northway  
 Practical Dietetics 10 two-hour lessons.

#### Textbooks:

Primary Technique - McIsaac  
 Nursing - Isabel M. Robb  
 Anatomy - Kimber  
 Dietetics - Friederwald & Ruhroch  
 Obstetrics - DoLee  
 Hygiene & Morality - Levinia Dock

Graduate nurses were in charge of the wards and the operating room.

Hours of day duty - 8  
 Hours of night duty - 11  
 Two hours off duty daily.  
 Two half days off weekly.  
 Two weeks vacation yearly.  
 Number of pupils graduating yearly, average 2  
 To date (1913) had graduated 8 students  
 Students allowance per month were:

\$22.00 first year  
 \$27.00 second year  
 \$33.00 third year

Students receive maintenance. Had six months affiliation with Cook County Hospital for Medical, Obstetric and Pediatric Nursing.

Director of Nursing: Millicent B. Northway  
 Graduate of City & County Hospital  
 Denver, Colorado

I believe this school was closed in 1921, when the mine was closed --- at that time, Katherine Molehouse was the Director of Nursing.

\* \* \* \*

The Calumet Public Hospital at Laurum was established in 1908. The school was established the same year, and I believe was closed in August 1932, according to a letter from the hospital superintendent.

The school had a nine months affiliation in the following subjects:

- a. Medical nursing
- b. Diet Kitchen
- c. Pediatric Nursing

Medical nursing and diet kitchen were given at Grace Hospital, Detroit and Pediatrics at Children's Hospital, Detroit. Later, the affiliation also covered communicable disease at Herman Keifer Hospital.

At the time of closing the hospital had a daily average of 19 to 22 patients.

The bed capacity of the hospital was 30 adult beds, no bassinets.

Length of course - 3 calendar years.

The curriculum covered:

1st year	Anatomy-90 hours
	Materia Medica - 45 hours
	Ethics - 15 hours
	Dietetics - 60 hours
	Nursing Arts - 120 hours
	History of Nursing - 15 hours
	Bacteriology - 30 hours
	Pathology - 15 hours
2nd year	Medical Nursing - 20 hours
	Surgical Nursing - 20 hours
	Emergency Nursing - 10 hours
	O.R. Technique - 15 hours
	Psychology - 15 hours
	Hygiene & Sanitation - 15 hours
	E.E.N.T. - 10 hours
	Skin and Venereal - 10 hours
	Obstetrics - 30 hours
	Orthopedics - 12 hours
	Gynecology - 10 hours
3rd year	Affiliations

Requirements for entrance at time the school was closed, 4 years high school.

Allowance paid per month:

1st year	\$4.00
2nd year	\$7.00
3rd year	\$9.00

Hours of duty per week - 60

Hours of duty per day - 10

Hours of duty per night - 10

Director of Nursing at time the school of nursing closed - Miss Manila P. Noetzel

Night Supervisor - Miss Mae Sirra

O.R. Supervisor - Miss Laone Therrine

Clinical experience - 120 days in pre-clinical course, 1st year

Medical Nursing - 210 days

Surgical Nursing - 237 days

Obstertric Nursing including Nursery - 90 days

Communicable Disease - 90 days

Children's Nursing - 90 days

Operating Room - 60 days  
 Night duty - 90 days  
 Vacation - 1 month per year

The Lake Superior Hospital School of Nursing at Lake Linden, Michigan was approved by the Michigan Board of Nursing in 1910 and removed from the approved list in 1917. The last class graduated in 1919.

The hospital was incorporated July 30, 1902. Bed capacity was 30 beds, daily average number of patients - 8. Eighty patients were admitted in 1909, number of students in the school in 1910 - 4.

Entrance requirements:

1. Good mental, moral and physical health.
2. 21 years of age.
3. Preferably a high school graduate.

Length of curriculum - 3 years. Hours on duty 7 to 7 with one hour off.  
 One half day weekly and 4 hours on Sunday. Two weeks vacation annually.

Stipend:

\$3.00 per month 1st year  
 \$5.00 per month second and third years.

Curriculum:

SUBJECT	HOURS	TEXTBOOK
Anatomy & Physiology	72 hours	Kimber & Grey
Hygiene	12 hours	McIsaac
Bacteriology	12 hours	Doldoun
Dietetics	47 hours	Pope
Nursing Arts	70 hours	Goodnow & Sanders
Medical Diseases	24 hours	Emerson
Childrens Diseases	18 hours	Keating
Mental & Nervous Diseases	10 hours	- NOT LISTED -
Communicable Diseases	6 hours	Wilson
Obstetrics	24 hours	DeLee
Materia Medica	24 hours	Dock
Ethics	12 hours	Goodnow and Sanders
History of Nursing	1 hour	- NOT GIVEN -
E.E.N.T.	10 hours	- NOT GIVEN -
Surgical Nursing including		
Operating Room	50 hours	- NOT GIVEN -

Students did private duty in the home in the second year.

Clinical practice:

General Medical-Surgical - months not given  
 Pediatrics 1 - 4 months  
 Obstetrics 3 months  
 Night duty 5 - 8 months  
 Operating Room 4 months  
 Diet Kitchen 3 months

Clinic 1 - 4 months  
Special Duty 3 - 9 weeks  
Charge Nurse 4 months

I hope this will be helpful.

Season's Greetings,

Bertha L. Pullen, R.N.  
Consultant - Professional Nursing

BLP/rwh

**APPENDIX B**

**FACSIMILE OF WHEELER LETTER**



March 17, 1928

Miss Anna B. Northup, R.N.  
Chippewa County Memorial Hosp.  
Sault Ste. Marie, Mich.

My dear Miss Northup:

I have received your letter written March 14 carrying the names of the graduates. On my list I had had seven who graduated in 1926 but they were the same names as given practically in 1927. I have therefore transferred the names of Miss Blakslee, Miss Edgerly, Miss McRae, and Miss Traynor to 1926 graduates and the balance of them to 1927. This gives this school, according to my list, which was established in 1903, 78 graduates through 1927. The record stands as follows:

1905--1	1912--3	1919--3	1925--4
1906--3	1913--3	1920--3	1926--4
1907--1	1914--6	1921--5	1927--7
1908--2	1915--3	1922--1	<u>78</u>
1909--6	1916--7	1923--0	
1910--4	1917--3	1924--5	
1911--4	1918--0		

If you know of any corrections to be made on this will you please let me know.

Yours truly,

Mary C. Wheeler, R.N.  
General Secretary

MCW:SVH

**APPENDIX C**

**HOSPITAL SCHOOL SURVEY FORM**

B. BIRTHDATE: \_\_\_\_\_ C. OF BIRTH \_\_\_\_\_  
(city) (county) (state)

II. A. NAME OF NURSING SCHOOL \_\_\_\_\_  
B. ADDRESS OF SCHOOL \_\_\_\_\_  
C. DATES OF ATTENDANCE AT SCHOOL: FROM \_\_\_\_\_ TO: \_\_\_\_\_  
D. NAME OF DIRECTOR OF NURSING SCHOOL  
AT TIME OF ATTENDANCE: \_\_\_\_\_  
(first) (maiden) (married)  
E. SCHOOL FROM WHICH DIRECTOR GRADUATED  
(IF KNOWN): \_\_\_\_\_

III. PLEASE, LIST SUBJECTS YOU STUDIED WHILE IN NURSING SCHOOL. GIVE NAME OF TEACHER, IF REMEMBERED, AND TELL IF TEACHER WAS R.N., M.D., OR OTHER. GIVE ACADEMIC DEGREE.

1.	_____	TAUGHT BY _____
2.	_____	TAUGHT BY _____
3.	_____	TAUGHT BY _____
4.	_____	TAUGHT BY _____
5.	_____	TAUGHT BY _____
6.	_____	TAUGHT BY _____
7.	_____	TAUGHT BY _____
8.	_____	TAUGHT BY _____
9.	_____	TAUGHT BY _____
10.	_____	TAUGHT BY _____
11.	_____	TAUGHT BY _____
12.	_____	TAUGHT BY _____
13.	_____	TAUGHT BY _____
14.	_____	TAUGHT BY _____
15.	_____	TAUGHT BY _____

IV. APPROXIMATE NUMBER OF CLASSMATES AT GRADUATION \_\_\_\_\_ DID ALL ENTER  
AT THE SAME TIME? PLEASE, CHECK: YES NO

V. WHICH OF THE FOLLOWING DESCRIBES THE WAY CLASSES WERE HELD? (CHECK THOSE WHICH APPLY, PLEASE.)

CLASSES WERE HELD REGULARLY AT SCHEDULED TIMES \_\_\_\_\_

CLASSES WERE HELD WHENEVER TIME PERMITTED \_\_\_\_\_

CLASSES WERE HELD PRIMARILY IN MORNINGS OR AFTERNOONS \_\_\_\_\_

CLASSES WERE HELD MOSTLY IN THE EVENINGS \_\_\_\_\_

ONE WAS EXCUSED FROM CLASSES IF ONE HAD WORKED THE PREVIOUS NIGHT \_\_\_\_\_

ONE WAS NOT EXCUSED FROM CLASSES IF ONE HAD WORKED THE PREVIOUS NIGHT \_\_\_\_\_

VI. WHICH OF THE FOLLOWING DESCRIBES THE LENGTH OF YOUR WORK WEEK AS A STUDENT?

40 HOURS \_\_\_\_ 44 HOURS \_\_\_\_ 48 HOURS \_\_\_\_ 52 HOURS \_\_\_\_ MORE THAN 52 HOURS \_\_\_\_

PLEASE INCLUDE CLASS TIME IN CONSIDERING THESE HOURS.

VII. WHICH OF THE FOLLOWING DESCRIBES SICK AND VACATION TIMES? (CHECK THOSE WHICH APPLY)

SICK TIME WAS MADE UP \_\_\_\_\_

SICK TIME WAS NOT MADE UP \_\_\_\_\_

VACATION TIME WAS SCHEDULED IN ADVANCE \_\_\_\_\_

VACATION TIME WAS NOT SCHEDULED IN ADVANCE \_\_\_\_\_

THERE WAS NO VACATION TIME \_\_\_\_\_

VACATION WAS \_\_\_\_\_ WEEKS IN LENGTH

VIII. PLEASE, CHECK THOSE SERVICES IN WHICH EXPERIENCE WAS PROVIDED DURING YOUR TRAINING. IF THERE WAS AN AFFILIATION, PLEASE, TELL WHERE THE AFFILIATION OCCURRED.

NURSING SUBJECT	( )	AFFILIATION AT HOSPITAL AND CITY
MEDICAL NURSING	( )	
SURGICAL NURSING	( )	
OBSTETRIC NURSING	( )	
PEDIATRIC NURSING	( )	
PSYCHIATRIC NURSING	( )	
COMMUNICABLE DISEASE		
OR T.B. NURSING	( )	
ORTHOPEDIC NURSING	( )	
OPERATING ROOM	( )	
DIET THERAPY	( )	
COMMUNITY HEALTH, PUBLIC		
HEALTH, HOME, OR		
VISITING NURSING	( )	

- IX. PLEASE, CHECK WHETHER OR NOT TIME ON EACH SERVICE WAS SCHEDULED IN ADVANCE: YES \_\_\_\_\_ NO \_\_\_\_\_.
- X. PLEASE, CHECK WHICH OF THE FOLLOWING DESCRIPTIONS APPLY TO THE CORRELATION OF THEORY AND PRACTICE WHEN YOU WERE A STUDENT.
- NO ATTEMPT WAS MADE TO CORRELATE THEORY AND PRACTICE \_\_\_\_.
- PRACTICE WAS USUALLY PROVIDED AT THE TIME THEORY WAS BEING TAUGHT \_\_\_\_.
- PRACTICE USUALLY FOLLOWED AFTER THEORY HAD BEEN TAUGHT \_\_\_\_.
- PRACTICE FREQUENTLY OCCURRED BEFORE THEORY HAD BEEN TAUGHT \_\_\_\_.
- XI. DID YOU ROUTINELY HAVE TO FIRE THE FURNACE ON THE NIGHT SHIFT?  
YES \_\_\_\_\_ NO \_\_\_\_\_
- DID YOU EVER HAVE TO FIRE THE FURNACE ON THE NIGHT SHIFT?  
YES \_\_\_\_\_ NO \_\_\_\_\_
- XII. WHAT WAS YOUR UNIFORM LIKE? STRIPES? APRONS? STOCKINGS? SHOES? LONG SLEEVES? CAP? (DISTINCTION BY CLASS?)
- XIII. DO YOU REMEMBER WHERE YOU WROTE YOUR STATE BOARDS? DID EVERYONE IN YOUR CLASS WRITE THE BOARDS? WERE THE QUESTIONS ESSAY QUESTIONS?
- XIV. WHY DID YOU CHOOSE THE SCHOOL YOU ATTENDED?
- XV. HAD YOU ALWAYS WANTED TO BE A NURSE?
- XVI. WERE YOUR PARENTS SUPPORTIVE OF YOUR WANTING TO BE A NURSE?
- XVII. WERE YOU HAPPY WHILE YOU WERE A STUDENT NURSE? DID YOU EVER WISH TO LEAVE?
- XVIII. WHAT WERE YOUR HOURS ON DUTY LIKE? DAY? NIGHT? DAYS OFF? WEEKENDS? HOURS IN THE DORMS? LATE LEAVES? DID THEY SHIFT DURING THE TIME YOU WERE A STUDENT? (DID SENIORS HAVE MORE PRIVILEGES? RESPONSIBILITIES?)

## **APPENDIX D**

### **APPLICATION TO ST. LUKE'S HOSPITAL TRAINING SCHOOL**

The following questions must be answered in full and in the Candidate's own handwriting, and be sent to the Superintendent of the School for Nurses, St. Luke's Hospital, Marquette, Mich.

1. Name in full and present address: \_\_\_\_\_
2. Age last birthday, date and place of birth? \_\_\_\_\_
- Height? \_\_\_\_\_ Weight? \_\_\_\_\_
3. In what School or Schools educated? \_\_\_\_\_
- What has been your occupation since? \_\_\_\_\_
4. Are you single, married or a widow? \_\_\_\_\_
- Are you a member of any church? Is so, of what? \_\_\_\_\_
5. Have you any children? How many? \_\_\_\_\_
- Their ages? How provided for? \_\_\_\_\_
6. Are you free from domestic responsibility and not liable to be called away? \_\_\_\_\_
7. Are you strong and healthy, and have you always been so? \_\_\_\_\_
8. Have you any tendency to pulmonary disease? \_\_\_\_\_
- Have you ever had any uterine disease? \_\_\_\_\_
9. Have you any physical defect? \_\_\_\_\_
- Are your sight and hearing perfect? \_\_\_\_\_
10. Have you every been Probationer or Nurse in any Hospital or Asylum? \_\_\_\_\_
11. The names in full and addresses of two persons to be referred to. State how long each has known you. If previously employed, one of these must be the last employer.
- \_\_\_\_\_ has known me \_\_\_\_\_ years.
- \_\_\_\_\_ has known me \_\_\_\_\_ years.
12. Where, if any, was your last situation? \_\_\_\_\_
- How long were you in it? \_\_\_\_\_
13. Do you promise at all times while on duty to maintain the cleanliness and order of the ward in which you are serving and to obey implicitly the commands of your superior in charge? \_\_\_\_\_
14. Have you read and do you clearly understand the regulations? \_\_\_\_\_

I declare the above statement to be correct?

Signed: \_\_\_\_\_ Candidate, \_\_\_\_\_

Present Address, \_\_\_\_\_

Nearest Telegraph Station, \_\_\_\_\_

Date, \_\_\_\_\_

**APPENDIX E**

**CISSICK LETTER**





World Headquarters  
Ten UOP Plaza—Algonquin & Mt. Prospect Roads  
Des Plaines, Illinois 60016 • Telephone 312-391-2000  
Telex 253-285/253-174 • TWX 910-233-3501

March 20, 1984

Ms. Lulu M. Ervast, R.N., M.S.N.  
Northern Michigan University  
Marquette, MI 49885

Dear Ms. Ervast:

With respect to your inquiry of January 6, 1984, I regret to advise that upon searching our records we were unable to locate any information on the School of Nursing at Calumet & Hecla Hospital.

I do hope you are able to locate the information you require and wish you success in the completion of your dissertation topic.

Sincerely,

A handwritten signature in cursive script that reads "Pamela J. Cissik". The signature is written in dark ink and is positioned above the printed name and title.

Pamela J. Cissik  
Assistant Secretary

PJC/wpc

**APPENDIX F**

**APPLICATION TO SAULT STE. MARIE HOSPITAL**

Sault Ste. Marie Hospital Training School for Nurses  
APPLICATION BLANK

This blank must be filled out in Candidate's own handwriting, all questions being answered, even when only a Negative Statement is possible, and enclosing a Physician's Certificate of sound health, sent to Superintendent, Sault Ste. Marie, Sault Ste. Marie, Michigan.

-----

1. Candidate's full name and address  
(Avoid titles, initials and nicknames) \_\_\_\_\_
2. Condition in life - unmarried or married?  
(If divorced or otherwise separated from husband, the fact should be stated). \_\_\_\_\_
3. Present occupation or employment \_\_\_\_\_
4. Place and date of birth \_\_\_\_\_
5. Height \_\_\_\_\_
6. Weight \_\_\_\_\_
7. Where educated  
(i.e. at public or private schools, and until what age) \_\_\_\_\_
8. Are you strong and healthy, and have you always been so? \_\_\_\_\_
9. Are your sight and hearing perfect?  
(If you wear glasses, state the fact and give the reason) \_\_\_\_\_
10. Have you any tendency to pulmonary complaint or uterine trouble? \_\_\_\_\_
11. Do you suffer from weak or flat foot?  
Have you any varicose veins? \_\_\_\_\_
12. Have you any physical defects or blemishes? \_\_\_\_\_
13. Have you children? How many? How old?  
How are they provided for? \_\_\_\_\_
14. Are you otherwise free from domestic responsibilities so that you are not likely to be called away? \_\_\_\_\_
15. Where, if any, was your last situation? How long were you in it? What was it? Name and address of employer. \_\_\_\_\_
16. Are you a member of any church? If so, of what? \_\_\_\_\_
17. Names in full and addresses of two persons to be referred to. State how long each has known you. (These should not be relatives but should be those that have known you from childhood and who have not already been used on this blank). \_\_\_\_\_
18. Have you ever been connected with any Training School for Nurses? \_\_\_\_\_
19. Do you promise to obey and conform to all rules and regulations? \_\_\_\_\_

I declare the above statement to be correct.

Date \_\_\_\_\_

Signed \_\_\_\_\_

**APPENDIX G**

**APPLICATION TO CHIPPEWA COUNTY WAR MEMORIAL HOSPITAL**

SCHOOL OF NURSING  
Chippewa County Memorial Hospital  
Sault Ste. Marie, Michigan

**APPLICATION BLANK**

This blank is to be filled out in the candidates own hand writing, all questions being answered even when only a negative statement is possible and enclosing a Physician's certificate of sound health and if vaccination within last two years, a certificate from a Dentist as to good condition of teeth, letter of recommendation from a Clergyman sent to the Superintendent of Nurses Chippewa County Memorial Hospital.

1. Candidates full name and address \_\_\_\_\_  
(Avoid Titles, Initials or Nicknames)
2. Conditions in life, married or unmarried? \_\_\_\_\_  
(If divorced or otherwise separated from husband, the fact should be stated)
3. Present occupation or employment? \_\_\_\_\_
4. Place and date of birth \_\_\_\_\_
5. Height \_\_\_\_\_
6. Weight \_\_\_\_\_
7. Where educated \_\_\_\_\_  
ie. at public or private schools--enclose High School credits giving subjects, Number of periods in each, length of period and final grade
8. Are you strong and healthy? \_\_\_\_\_ Have you always been so? \_\_\_\_\_
9. Are your sight and hearing perfect? \_\_\_\_\_  
If you wear glasses, state the fact and give reason)
10. Have you any tendency to pulmonary complaint or uterine trouble? \_\_\_\_\_
11. Do you suffer from flat foot or other foot troubles? \_\_\_\_\_
12. Have you any physical defects or blemishes? \_\_\_\_\_
13. If married, have you children? How many? \_\_\_\_\_ How provided for? \_\_\_\_\_
14. Are you free from domestic responsibility  
so you are not likely to be called away? \_\_\_\_\_
15. Where, if any was your last position? \_\_\_\_\_  
How long were you in it? \_\_\_\_\_ What was it? \_\_\_\_\_  
Name and address of employer? \_\_\_\_\_
16. Are you a member of any church? What? \_\_\_\_\_
17. Names and addresses of 2 persons not related to you whom the Hospital  
may refer \_\_\_\_\_  
\_\_\_\_\_
18. Have you ever been connected with any Training School for Nurses? If  
so name and address and time spent in training \_\_\_\_\_
19. Name and address of parents \_\_\_\_\_
20. Do you promise to obey and conform to all rules and regulations? \_\_\_\_\_

I declare the above statements to be correct

Date \_\_\_\_\_ Signed \_\_\_\_\_

**APPENDIX H**

**HART LETTER**

# Michigan Board of Registration of Nurses and Trained Attendants

RICHARD M. OLIN, M. D., PRESIDENT  
LANSING  
MRS. MARY STAINES FOY, R. N., VICE-PRES  
BATTLE CREEK  
MRS. HELEN DESPELDER MOORE, R. N., SEC'Y  
LANSING  
BLANCHE M. HAINES, M. D.,  
LANSING  
MISS M. IRENE GIBBONS, R. N.,  
FLINT

Lansing, Michigan.  
Aug. 5, 1925.

MRS. ADELAIDE NORTHAM, R. N.  
VISITING REPRESENTATIVE,  
222 STATE OFFICE BLDG.,  
LANSING, MICHIGAN

Miss Marion C. Hickler, Sup't. of Nurses,  
Chippewa County Memorial Hospital,  
Sault Ste. Marie, Mich.

Dear Miss Hickler:

Your letter enclosing transcript of the credentials  
of \_\_\_\_\_ has been received. Her  
credentials are approved for full high school work.  
Enclosed is the original transcript.

Yours sincerely,

Helen deSpelder Moore, R. N.,  
Sec'y.

By *Helen deSpelder Moore* Ass't. Sec'y.

KH/H

**APPENDIX I**

**LETTER AND OPINIONNAIRE TOOL**



1130 Norwood, Apt. 7  
Marquette, MI 49855

July 7, 1986

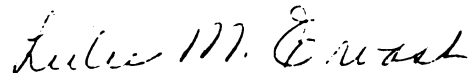
Dear Nurse:

I am a doctoral student whose dissertation topic, at Michigan State University, deals with the hospital schools of nursing in the Upper Peninsula. Although for 81 years these schools provided education in nursing, none operate any longer. The last Upper Peninsula hospital school of nursing closed in 1978. It seems important to reflect on the effect of this unique form of education for a profession. Therefore, I seek your assistance.

Please, review your experiences as a nurse and student nurse. Then, using the enclosed form, tell what was good and valuable about your education in a hospital school of nursing. Return the form to me in the envelope I have provided by July 28, 1986. If you have any questions, call me "Collect" at 227-4798.

Truly, I depend on your assistance and appreciate your help!

Thank you!

A handwritten signature in cursive script that reads "Lulu M. Ervast".

(Mrs.) Lulu M. Ervast, R.N.

LME:ss

Enclosures - form and envelope

The Year in which I graduated was \_\_\_\_\_.

The school from which I graduated was \_\_\_\_\_

This school was located at \_\_\_\_\_

The following are reasons I feel my education for nursing in a hospital school of nursing was valuable and fitted me for practice as a nurse:

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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## REFERENCES

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