15. diploma 1962 - started ADN program a STCC

You have to realize that back in 1950, in the '50s early '60, there were very few higher education nurses in this geographic region. Most of the people who were teaching were diploma school people.

I studied Mildred Montag' doctoral thesis in my master's program. The. Kellogg foundation funded the New England Board of Higher Education for a two week workshop at Westbrook Maine; Westbrook Junior College to train teachers for community college education. So I applied and was given one of the grants. That faculty studied under Montag. And we had the program and I enjoyed it so when I came back I was all gung-ho on the community college as the wave of the future.

Geographically we had to look at the fact that we had diploma schools in Pittsfield, Holyoke, Springfield for western New England. And at that point there was getting to be a pinch in the economy for nursing education. And that was the only thing that was really focused and assisted the development of the community college programs because the hospitals were feeling the financial brunt of the schools.

In this area, Springfield Technical Institute made a transition and became Springfield Technical Community College from Springfield Technical Institute. I was offered the job. I had been working with the Dean of Faculty at Springfield Technical for years between the practical nursing and health programs so I said I was interested and they jumped on it and gave me a good offer to go to the college to start to associate degree program. I started the college in January of '67. We opened and admitted the first class... it had to be based on the academic year, so we opened in September of '69 and admitted the first class so we would have graduated the first class in '71. And I planned and implemented the whole curricula, recruited faculty...

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I never thought I would ever be a nurse. I had sort of a spotty, not very successful college education and at about the age of 22 was sort of floating around, waitressing and I wound up with a kind of severe medical issue and was in the hospital. And a nurse took care of me and even stayed over her shift because I was distraught. And I remember when it was all over saying Wow! How awesome it would be to have a job where you could really make a difference in
Happened to look at the paper -- they were starting a nursing program at STCC. And this was May; they already had their first class full. Don't know what I said to the dean at the time my cumulative from Cape Cod Community College was not stellar by any stretch of the imagination and I got a call about a week later and he said there was an opening; did I want it? My parents said you've got one semester to prove yourself. And that was the beginning of my journey -- never regretted it.

I think the program at STCC was phenomenal. The director of the program and she was a very strong willed, very directed woman. She expected a lot of us and she also always instilled in us be -- we had talked about nursing as a profession -- the professional aspect of it. We were expected to get out and join the American Nurses Association and spend time on our profession not just the work we were doing. And I really, in later years, came to appreciate that because it instilled in me that... she instilled is us that this was the beginning of your education, not the end of it.

She gave me a real solid foundation because of the associate degree program, you knew that you would need further seasoning so to speak when you got out but it was a great foundation. And the faculty, you know, looking back on it a lot of them came from diploma programs because that was still very popular at the time. So you had a wonderful faculty that had come from closed diploma programs and I'm not sure where else, but we had a great faculty.

For somebody like myself, the associate degree program was perfect because I already had some education; I wasn't eighteen anymore; I couldn't financially afford a four year program. Three year programs were beginning to wane at that time so I didn't want to invest in that because I knew if I went on I'd have to get more education. You can build on the associate degree where with the diploma program as you know you'd frequently have to start over again. So it was perfect. It was two years; I could afford to do that, and work and go on for my degree.

Well, we had a pretty good variety of clinical experience but it never felt like enough. I think it was something we all felt. But I'm not sure, unless you came from a diploma program where you spent lots of time on the floor and some of that, frankly as you said before, was free labor for the hospital. We had class time and we had modules, you know, the pediatrics, the maternity... I thought it was very comprehensive. We had some placements. I did my psych up at Northampton State. I feel bad for some of the nursing... We're talking 1969, 1970 here. So we had some great
placements and I feel bad for some students today because of the high pressure of productivity that you see in health care today, a lot of places can't take students the way they used to. We had one very interesting one, historically speaking. Mercy was phasing out their program at the same time STCC was ramping their program up. And one of my placements, maternity and med surg, was at Mercy. And it was sort of that resentment some of the Mercy grads that were working there seeing their program, you know their students being replaced by associate degree students, so there was a little bit of animosity. I think I actually did my maternity with the last class of Mercy and we were the first class at STCC. So understandably, some animosity there.

I think the whole two years was really pretty special because we were the first class and so we got to design the cap and the pins and I think the faculty was trying to... I probably shouldn't be speaking for them... but I think because it was the first class, they were settling in and figuring out what they needed to do and there was a lot of pressure on them to produce a class that succeeded, but there was a lot of pressure on us; this is the first class and we were going to pass our boards and are they giving us and you know are we learning everything we need to learn? So I think we were pretty close to the faculty, those two years. And we had a very close class. I think we dispersed afterwards but that was a long time ago.

I think the difference between say the diploma and even some of the four year programs were you're in college with these people all the time, I think a lot of the associate programs draw people from different walks of life. There are some older people; some men. We actually had two men in our class, which was unusual back then. But we were at all different stages in our life: some were married, some had kids. So that I think you don't have that sort of close fellowship that you get with say a diploma program where you live together for three years and work together. And with the four year programs where you're in college and you're developing friendships in college. I think we all went to school and then scattered and went back to our lives. I stayed in touch with a couple people from my class but... I actually found my class picture a few years ago and I went back and I couldn't remember half their names! I guess that happens.

Comments on first job and reaction the ADN graduates 1971:

My first job... I think so much of nursing and nursing education is sort of the ebb and flow of how money is in health care. And I've been through... I graduated in 1971 and I've been through so many nursing... first you have the nursing glut, then you have the nursing shortage,
and you know. I've sort of ridden that roller coaster. And when I went into the program, I believe there was a nursing shortage because I got a stipend for going to school at the time. When I graduated we started with a nursing glut. So my first job was at <community hospital> and it quickly turned around and then there was a shortage again. The majority of the nurses there were I'd have to say diploma nurses at the time. So there was kind of that sort of looking down their noses at me, you know. "Who are you? We worked on the floors for days and hours and weeks on end and you went in and did a clinical for a couple of months so who do you think you are?"

There was a little bit of that at first. I don't think you see that today because I think a good percentage of the nurses coming are associate degree, so I don't think you have that.

I felt pretty confident. I remember the first time I had to catheterize somebody. I had done it once and I remember the nurse that was orienting me said, I assume you've done this a whole bunch of times. And I just said yes. But I do remember one of my instructors saying to me, "you don't need to repeat things a million times to do them. If you've paid attention and you understand the theory behind it, and you know some anatomy and physiology, go with it." And that stood me in good stead. So... Would I have liked more clinical? Probably, but it would have been more than two years.

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I was the product of Catholic High School back in the late 60’s and at that time there were not many options for women. We could be a secretary, we could be a mother, we could be a teacher or we could be a nurse. Anything else was discouraged. I actually was planning on going to the Providence Hospital School of Nursing, had gone through the entire process and was accepted. In late Spring of 1969 we received, a handful of us from the high school, received a letter in the mail that the Bishop had decided at that point not to reopen the Providence Hospital School of Nursing, so that didn’t leave us very many options and we were scrambling around a little bit. So in the front office of Holyoke Catholic High School was Dr. Mary O’Leary’s mother. She was the secretary and the glue that held the high school together, so she said to my friend Maryellen and I, you need to go see my daughter, Mary. So off we went and we came to see her daughter Mary who was at STCC for one year of prepping to open the first Associate’s Degree program in the area and Mary, her daughter, had also been an educator and a faculty at the Providence Hospital School of Nursing. So here Mary found herself to Springfield…um…we had to do one year of what I now call a pre-nursing program because this program wasn’t ready until the Fall of ’70 and we were needing something in the Fall of ’69, so we came onboard and we took many of the courses that we needed to support nursing. We took English and the social sciences. We took our anatomy and physiology. We took microbiology. We really cleared away everything that we could possibly clear away other than nursing. Mary actually hired the two of us. She call us her two Mary’s…she hired the two of us as work study students and she had us on our hands and knees with mops and pails over in the original building, which was quarters five and six at the far, far, far corner of the campus which no longer is being used. Half of the building was for nursing and the other half was for another society on campus. So in that building which was an old commander’s home…it was almost a duplex, it was a double building so one side had a full house, the other side had a full house, but we had the unit to the left, quarters five, and in there we had faculty offices, we had the classrooms, we had the nursing lab, we had everything that we needed at the time to do nursing. Any other courses needless to say were held out of quarters five. So there we stayed for our two years and we spent two years in quarters five. Needless to say, the program was much smaller. I believe…if I count back, we graduated in the low 40’s, 41, 42. We were pinned in the cafeteria on a plywood platform. It was

1 Dr. O’Leary was the first Dean at STCC – name used with permission.
2 Springfield Technical Community College campus was originally 35 acres of the Springfield Armory National Historic Site. The college campus buildings were former officers’ quarters.
Quite...we were a very good bonded group. We all did well. We had...most of us that I even remember had excellent career starts and that's how we began our education here.

It was a very cohesive group 'cause we were there in that...we were like prisoners. We were confined to the same quarters for everything that we did. All of our lectures were there, all of the faculty was always there. The students really weren't supposed to be in the kitchen with the faculty when the faculty was eating but needless to say, the students were whittling in and out of the kitchen when the faculty was in there eating.

We supported each other and we did everything humanly possible to get us through to the end. One day we found the building vandalized and we came in and we still to this day...I think I know what happened but I won't put it on tape...um...all of our equipment, our sphygmomanometers and our stethoscopes...everything was out on the campus green when we came in the morning. So that was quickly rectified and that did not happen again but that again put a little, you know, strength into our group. The other thing that we needed to do was...of course back at the time, people were so interested in the nursing cap but needless to say, it was a new school so we did not have a nursing cap. So a group of us, and one of them was S. L., she was an older woman in the class. Unfortunately she died not too many years after she graduated, but she spearheaded this group of us that wanted to design a cap and, of course, we were back and forth to Mary O’Leary about the cap and she looked at us one day and she said, listen to me, it’s not what is on the head, it’s what in the head. If you want to get a cap, then go ahead and do it. Well we did design this cupcake like cap. It was sheer, it was...in fact there is one up there, it’s a little bit different design, this cupcake like cap, and we wore it as students with great pride...t had a gold ribbon on it and then, of course, when we graduated we had black. The uniforms we had were quite interesting. They were your straight A-line dress with a big burgundy bib in the front and we didn’t really love the burgundy bib, but one thing we did get to do was take that bib off to graduate, so we all had that as a graduation uniform. There are still schools out there that I see in catalogs that wear similar attire but that was...great pride in what we did.

A lot of people in my class went far and beyond, but it’s really pleasing to me that I graduated from the first class and now I’m only the third Dean of this nursing program in 38 years, so...

Psych Rotation - State Hospital: . But we had one of our patient assignments this day and I remember her as being a young girl, very wiry and she was probably in her early 20’s and she had lost all of her teeth and I remember that about it, and she was always laughing about the fact she didn’t have any teeth and she bolted on the two of us. She is running through the greens and the hills of Northampton State Hospital and the two of us were chasing her and she had us by a mile with her length and her wiriness and finally we got her to come back. We were never so
scared in our entire life, thinking we lost a patient but we found our patient and we brought our patient back and she giggled all the way. I didn’t enjoy it. I thought there were some intimidating situations when I was up there. I was positively petrified and I was very glad when that rotation ended. Although to this day, I know the building still exists in part, I would love to go into that building but we also had the opportunity to go to all of the other wards and it’s a different time, it’s a different type of nursing, it’s a different type of healthcare and I’m glad that it’s gone. I’m glad that it’s gone. People should not… but we didn’t know any better but that’s how we put people that were a threat. But, of course, now we have got medications, we have got better ways to treat people, better ways for people to be out there and live healthy lives in the community other than what was happening back prior to the 70’s.

. . . The old Mercy and I remember being in the Memorial House which was the old Mercy now and not all the rooms had running water, so if you needed water for hygienic care, what you needed to do was you need to go cart it from some utility room that had hot running water. So complicating that was the fact that you also didn’t have disposal of water if you were in an isolation room, so what people don’t realize today is you can be locked in that isolation room for hours and what you would have to do is take your dirty water and pour it at the doorway into a clean bucket that somebody else was holding, so they could walk back down the hall to get rid of your dirty water and then come back and give you some clean water so you can continue to do what you were doing. I’m sitting here and I’m realizing I’m really not that old, but that’s how archaic some of these things were.

*Interviewer*: *But you have a perspective on the Associate Degree Program and what you experienced as the first students in this program and what you have at this point. What I would like to hear is your opinion as far as the changes that you have seen, how the Associate Degree Program has changed to meet the needs.*

Well we were never really accepted in the beginning because I clearly remember the anxiety of the staff that I was going to work with saying, we have never had somebody with a degree like yours, we don’t know what to do with you. And I will tell you I was put under the microscope by that first head nurse and I do thank that first head nurse, . . . I will get back to that evolution in a minute, but she was absolutely instrumental in my success rate but I will tell you she (Head nurse) did not let me do one thing without breathing down my neck and watching that I knew
how to do it. She would watch everything that you did and when she was satisfied that you knew
what you were doing, she let you fly but I think what they all found out that year…because there
were about six of us that went to (Community)Hospital for our first job…I think they found out
that the Associate Degree nurse really was a capable, sound nurse when they graduated but, of
course, with the faculty that we had at the helm, it wouldn’t have been otherwise because they
would not have graduated us unless we knew what we were doing and we were the group that
proved ourselves. So as time went on and the diploma schools were going, going, gone, Mercy
was closed within two years of Providence closing, Worcester was closed within a few years of
that, and Holyoke Hospital closed. Baystate Medical Center was one of the last ones to hold on,
but they didn’t hold on very tightly because they started collaborating with colleges for a lot of
the sciences so they knew that this was the way it was going to be and there were very few
Bachelor programs around. So in order to have nurses, they were hiring at an Associate Degree.
History is still repeating itself on a daily basis, what are we doing to do with the Associate
Degree nurse? We know that we have to have as much education as we can.