

# FRONTIER NURSING SERVICE QUARTERLY BULLETIN

VOLUME 53

AUTUMN, 1977

NUMBER 2





THE MARY BRECKINRIDGE BANNERS

---

FRONTIER NURSING SERVICE QUARTERLY BULLETIN  
Published at the end of each quarter by the Frontier Nursing Service, Inc.  
Wendover, Kentucky 41775  
Subscription Price \$2.00 a Year  
Editor's Office, Wendover, Kentucky 41775

---

VOLUME 53

AUTUMN, 1977

NUMBER 2

Second-class postage paid at Wendover, Ky. 41775 and at additional mailing offices  
Send Form 3579 to Frontier Nursing Service, Wendover, Ky. 41775

Copyright 1978, Frontier Nursing Service, Inc.

## CONTENTS

ARTICLE	AUTHOR	PAGE
Beyond The Mountains		46
Calling All Couriers		29
Field Notes		52
For Those Who Minister And Heal	<i>Music By Richard Dirksen, 1977</i> <i>Words by John Oxenham, 1914</i>	36
In Memoriam		30
Old Courier News		37
Old Staff News		43
Once Over Lightly	<i>W.B.R. Beasley, M.D.</i>	3
The Dedication of the Mary Breckinridge Banners (Illus.)	<i>Betty Lester</i>	33
The Frontier Nursing Service Home Health Agency (Illus.)	<i>Gabrielle Beasley</i> <i>Peggy G. Elmore</i> <i>Marianna M. Fuchs</i> <i>James Johnson</i> <i>Verna M. Potter</i> <i>Karen Slabaugh</i> <i>Kathy Smith</i> <i>Anne A. Wasson, M.D.</i> <i>Excerpts from The</i> <i>Call Of The Nurse</i>	
Urgent Needs		32
Why Joseph?	<i>Mary Alice Murray</i>	2

## BRIEF BITS

A Patient Suffering . . .	<i>Modern Maturity</i>	51
Radio Spots	<i>Jim Fulmer</i>	39
White Elephant		45

## WHY JOSEPH?

Why would God choose a carpenter  
to raise God's only Son?  
A man in David's line?  
Surely there were others in that line . . .  
With power and influence?  
Surely some more able to provide advantages . . .  
education . . . travel . . . culture . . .  
A man of wisdom?  
Surely some more learned in scriptures . . .  
greater teachers . . .  
Why a carpenter, in Nazareth?

Joseph,  
carefully rounding sharp corners,  
patiently sanding to smoothness rough edges,  
lovingly rubbing dull surfaces of wood till they glowed,  
Joseph, master craftsman,  
shaper of wood,  
builder of lovely things,  
creator of beauty,  
was chosen.  
Joseph would possess the skill  
and patience and love  
to shape  
and round  
and smooth  
and polish  
the life of a young child.

So Jesus,  
growing up with such a man,  
in such a place,  
seeing beauty brought forth from rough hewn timber,  
could see beneath the rough and unpolished life  
of Peter,  
of Matthew,  
or James, or John,  
or you or me,  
and He would know,  
and call forth the beauty within  
until the full worth of that life  
became visible,  
the work of a Master Craftsman,  
and a glory to God.

—Mary Alice Murray  
Wooton, Kentucky  
Christmas, 1976

### ONCE OVER LIGHTLY

The Home Health Agency embodies much of what FNS has always represented; it epitomizes bedside nursing care in the home. This Bulletin is both a description of and a tribute to that group of Frontier Nurses who are providing this type of personal service twenty-four hours a day, seven days a week. The administrative procedures involved have been described by Verna Potter who coordinated the unification of these services over a year ago. The medical support is described and specific factual examples have been presented by the nurses themselves, an aide and other staff.

The gift and dedication of a pair of splendid banners to the National Cathedral in Washington in honor of Mrs. Breckinridge is well recorded through the eyes of Betty Lester, together with the official photograph from the Cathedral and the reproduction of music especially written for the occasion.

Passage of the Rural Health Clinics bill by Congress and its signing into law by President Carter on December 8, is a true landmark to which most of you as Trustees and City Committee members contributed when you wrote your Congressmen early in the year urging support of this legislation. This long-awaited law will authorize payment to nurse practitioners, certified nurse-midwives and physician assistants for the services they render to Medicare and Medicaid patients; our nurses will be reimbursed for their professional services. In order for this to begin in April, much work is being done on the regulations, both in Washington and in Frankfort.

Needed support for modification of the Nurse Practice Act in Kentucky is being developed; to this end FNS family nurse-midwife Chris Schenk led a group from the Kentucky Nurses Association in a presentation to the Kentucky Medical Association Board of Trustees.

Merry Christmas and Happy New Year  
Rogers Brasley



**PROFESSIONAL ADVISORY COMMITTEE TO THE HOME HEALTH AGENCY**

l. to r.: Mrs. Willa Hood, Betty Huff, R.N., Mrs. Verna Potter, Mr. Bill Pollard, Anne A. Wasson, M.D. Members not present when the photograph was taken: Mrs. Lottie Roberts, Mrs. Lois Valentine, Mr. James Mosley, Mr. Howard Napier, Karl Gorwoda, R.N.



Home Health Nurse Janice Noren discusses foot care with a Home Health patient.

## THE FRONTIER NURSING SERVICE HOME HEALTH AGENCY

### THE QUEEN VICTORIA'S JUBILEE INSTITUTE FOR NURSES

By H.R.H. The Princess Louise, Duchess of Argyll  
President of the Scottish Branch

I have been asked to write a few words for this little book<sup>1</sup>, and perhaps it would be of most interest if I recall the origin of the Queen Victoria's Jubilee Institute for Nurses from its beginning.

In 1887, Jubilee year, a Committee was formed by Her Majesty's desire. The Queen nominated the then Duke of Westminster, Sir James Paget and Sir Rutherford Alcock to consider, and report to her, on the best means of carrying out a project which she had much at heart—namely, the best means of promoting home nursing for the benefit of the sick who were unable to obtain this advantage for themselves.

The Queen wished to devote to this purpose £70,000 of the fund which had been collected by the women of Great Britain and Ireland, as a Women's Jubilee offering to her.

The Committee reported that this object could best be achieved by the foundation of an Institute for promoting the education and maintenance of nurses, rendering them thoroughly efficient in every way, to enable them to attend the sick poor in their own homes—the chief centre to be in London, with similar centres in Edinburgh and Dublin. This proposal meeting with the Queen's approval, she desired that a Provisional Committee should be at once formed, and the Duke of Westminster, Sir James Paget and Sir Rutherford Alcock were appointed as Trustees, and a system for district nursing, capable of expansion over the whole of the kingdom, was outlined.

### THE PROVISION OF NURSES<sup>2</sup>

By Sir Leslie MacKenzie, M.A., M.D., LL.D.<sup>3</sup>,  
Member of the Scottish Board of Health

The Queen's Nurses.—The largest organisation for the provision of trained nurses is the Queen Victoria's Jubilee Institute for

<sup>1</sup>THE CALL OF THE NURSE, Edinburgh, June 1926

<sup>2</sup>Ibid.

<sup>3</sup>Sir Leslie and Lady MacKenzie came to Kentucky in 1928 for the dedication of Frontier Nursing Service's Hyden Hospital and Health Center.

Nurses (Scottish Branch). The Institute has sent trained nurses to every locality of Scotland. It is difficult to over-estimate the value of those nursing associations to the localities and of the Institute as the central organising agency. The Institute has not only succeeded in placing large numbers of trained nurses; it has had indirect effects that are quite as important. It has stimulated the whole social interest in nursing and led to the creating of nursing associations everywhere, although not all have fallen in with the formality of affiliation. Like the Red Cross in the military world, the Q.V.J. Institute must be regarded as an organisation of the highest beneficence in the civil world. A generation of active work has prepared the way for further adjustments between the medical profession and the nursing profession. A statutory lead has been given in the Act constituting the Highlands and Islands Medical Service Board. In this Act medical service expressly includes nursing. Under the new powers of the Local Authorities for the framing of child welfare schemes the same principle appears. This alone is a very important step in the integration of health services.

---

### A NOBLE SERVICE<sup>4</sup>

By The Rev. Lauchlan Maclean Watt, D. D.,  
Glasgow Cathedral

The local nurse, with the training and prestige of Queen Victoria's name upon her, is an unspeakable comfort to a district in city or country, and invaluable aid to an overworked physician.

When I think of the districts I have known—the long winding roads across the hills, the steep tracks over the moors, the mountain streams with stepping-stones in the uncertain dark, or the wave-beaten headlands, and far-seeking arms of the sea lapping the gloomy cliffs—which the grey-haired doctor had to face, it makes me wonder at human fidelities. When the sudden summons came, it mattered not what weather was in the night—wind, rain, snow or frost. With never a qualm or hesitation, he would go . . .

Think what a difference the trained woman has made there, both for doctor and for people. No longer the anguish of the

---

<sup>4</sup>THE CALL OF THE NURSE



unknown; no longer the terrible waiting while the messenger covers the night-hid trail and returns with the strength and hope of the doctor's presence; but the ready, swift comforting of skilled hands, from the first, and the strengthening, rallying sympathy of a woman's heart.

So, also, in the sickness and sorrows of cities and towns . . .

Is it wonder that the sick poor thank God for these blessed women, whose sympathetic advent to their hour of suffering is as the coming of a new day of hope, and whose skilled help is to the physician as the gift of another hand? Their work should never be allowed to falter for need of the little money that they cost; and all who love their fellows must see to it for the sake of kindly humanity, dedicated to a nobler service.

---

### FOREWORD

In 1860, Florence Nightingale used the money given her by the grateful British people following the Crimean War to found a training school for nurses at St. Thomas' Hospital in London, thus creating modern nursing.

"It was one of 'Miss Nightingale's Young Ladies' (as nurses were then called), Miss Rosalind Paget, later Dame Rosalind, who took up and followed through Miss Nightingale's schemes for the modern education of midwives. Like Miss Nightingale, she was a handsome girl of ample private means when she decided on nursing as a career and received in 1879 a certificate from the London Hospital. She was not long in learning that a Nightingale nurse needed to be a midwife as well. In cooperation with other gentlewomen of like interest, Miss Paget founded the Midwives Institute in 1881—the year in which I was born. In 1882, she took a course at the British Lying-In Hospital in order to get such training in midwifery as was possible then. Although ladies of birth and fashion did not often become nurses it was permissible to do so following Miss Nightingale's example, but that ladies could become midwives was not acceptable in English-speaking countries. One of Miss Paget's friends said to her, 'My dear, I wish there were another word for you, it would be so awkward if we used it just when the footman came in to put on coals.'"<sup>5</sup>

---

<sup>5</sup>*Wide Neighborhoods* by Mary Breckinridge, Harper & Row, Publishers, 1952.

When the Queen Victoria's Jubilee Institute for Nurses in England and Wales was founded in 1887, Miss Paget was selected as the first Queen's Nurse. Although the Institute had been founded to give nursing care to the sick poor in their homes, midwifery was soon included in the preparation of the Queen's Nurses and, with the advent of preventive medicine, the Institute added the training of public health nurses, the "health visitors" of the British system. Care became available to all segments of the British population, not just "the poor".

After Mrs. Mary Breckinridge had completed her midwifery training at the British Hospital for Mothers and Babies in 1924, she spent some months in Scotland, under the auspices of Sir Leslie MacKenzie, to study the work of the Highlands and Islands Medical and Nursing Service. (By this time nurses were officially recognized as colleagues of the physicians in the organization which became the model for Frontier Nursing Service.) After her Scottish tour, Mrs. Breckinridge returned to England for a post certificate course in midwifery and to renew her acquaintance with the leaders of nursing in England, among them Miss Paget and Miss Peterkin who was then Superintendent of the Queen's Institute of District Nursing, the successor to the Queen Victoria's Jubilee Institute for Nurses. Miss Peterkin arranged for Mrs. Breckinridge to observe the work of the Queen's Nurses both in London and in the county of Hertfordshire—an invaluable experience for her when the time came to begin the Frontier Nursing Service in 1925. For years, many of the British nurse-midwives who joined the staff of Frontier Nursing Service were also "Queen's Nurses", including Molly Lee who is still with FNS. The Queen's Institute survived the advent of the National Health Service in 1949 but succumbed to further reorganization of health services in Great Britain in the latter half of the 20th Century.

The model which was adapted for use by the Frontier Nursing Service has also changed over the years but the principles remain—care of the sick in the home has not only been of help to the patient and his family but has also provided the district nurse with an entree into the home, into the totality of family-centered health care, and has reduced the cost of health care in general by keeping the patient out of the expensive hospital care situation. For forty years bedside care in the home was provided by the district nurses and nurse-midwives of the FNS. In 1966 the advent

of the third party reimbursement for home care through Titles XVIII and XIX of the Social Security Act—Medicare and Medicaid—and the certification of Frontier Nursing Service as a “Home Health Agency”, began to muddy the waters of district nursing. These two payment systems for the care of the elderly and the indigent provided reimbursement only for the eligible patient who was “homebound”—the patient who was confined to his home and needed skilled care from a registered nurse or the care of a nurse’s aide under professional nursing supervision. Such patients were eligible only if so certified by a physician and the care given by the nurse had to be under specific orders of the physician—under a physician’s “plan of care”. There was no provision for reimbursement for health education or preventive care, no reimbursement for care of the elderly patient (for example) who might be physically able, in the narrow sense, to go to the doctor’s office but who lived ten miles up a hollow with no transportation.

For the next ten years FNS struggled to combine care of the official Home Health patients with the generalized family care provided by the district nursing staff. And a struggle it was, too, because neither our system of family care or our system of record keeping with “family folders” was ever understood or entirely accepted by Medicare and Medicaid. We might have been able to live with the confusion had it not been for the financial aspect of an awkward situation. As long as the Home Health Agency was operated within the confines of the district nursing system, there was no way FNS could demonstrate the actual cost of home health, and the reimbursement we were receiving was prohibitively low. Therefore, in the summer of 1976, the Home Health Agency was completely separated from the district nursing care system, with its own staff of registered nurses, aides, office personnel, its own office space and vehicles. It continued to receive medical back-up from FNS physicians and shared the services of the social worker, the pharmacist, the physical therapist, with other segments of Frontier Nursing Service. In this way the actual cost of home care could be demonstrated satisfactorily and our reimbursement rate was increased accordingly. There are some frustrations. In a sense, care is fragmented because the home health nurse can only care for the patient in the family who has the doctor’s “plan of care”, and has to refer other members of the

family to other health professionals. The district nurses, on the other hand, miss the warm personal relations they had developed with many of the elderly patients. Nevertheless, the separation of Home Health from the FNS district program has meant financial survival of a home care program in the Frontier Nursing Service.

—Peggy G. Elmore

---

### THE ORGANIZATION OF THE HOME HEALTH AGENCY

Early in 1976, Administration decided to take Home Health Agency services out of the District Centers and create a centralized service, not only for fiscal reasons but also to meet the requirements of the "Conditions of Participation" in the Social Security Act.

The Social Security Act sets the criteria for admission to Home Health Agency care. The patient must be essentially homebound, require the skilled services of a registered nurse, physical therapist, and/or speech therapist. A plan of treatment must be written by a physician, and his/her advice sought for any change in care. Use of the FNS Medical Directives or protocols, therefore, is not permitted.

If the patient meets the criteria, he/she is then eligible for the services of a home health aide, if appropriate. The patient can be supplied with medical supplies and rent or purchase durable medical equipment. Care, supplies, and/or medical equipment must be recertified by the physician every two months. The secretary, Claudette Grubb, is responsible for the proper preparation for review and approval by the physician.

Home Health is staffed by a nurse-coordinator, five registered nurses, four home health aides, a transcriptionist, and a medical secretary. An agreement with Mary Breckinridge Hospital provides a part-time physical therapist, a part-time social worker, and laboratory, X-ray, dental, emergency room and pharmacy services. Dr. Anne Wasson serves as medical consultant to the Agency, and all billing is done in the Mary Breckinridge Hospital business office.

"Conditions of Participation" require quarterly meetings with a Professional Advisory Committee. It must have some members not directly connected with FNS and is a consultant committee of the FNS Advisory Committee. Dr. Anne Wasson is the appointed Chairperson along with Verna Potter, Vice-Chairperson, and Karl Gorwoda, Secretary, who were elected by the Committee itself. Reports of activities during the preceding quarter are made at each meeting and advice in problem areas is sought from committee members. The Policies of the Agency must be reviewed and revised annually.

The purpose of the Home Health Agency is quality health care for the people in Leslie and part of Clay counties, so *Documentation* is the name of the game in the office. "Conditions of Participation" require that an effective Utilization Review Committee meet quarterly to review and assess at least 10% of the case load records. Each record is examined from cover to cover for proper utilization of service, reimbursement source judgements, plans of care and recertifications by physicians, adequate documentation of progress notes by nurses and aides, attention to verbal medical orders given to the nurse by the physician and carried out by the registered nurse and/or the physical therapist. Surveys following the same criteria are carried out by teams from the intermediary for Medicare (Blue Cross and Blue Shield of Kentucky), by the Division for Licensing and Regulation of the State of Kentucky, and by the Joint Commission for Accreditation of Hospitals.

Nurses, aides, the physical therapist, and social worker are required to have encounter forms and progress notes entered in patients' charts within twenty-four hours of visits. The nurses dictate reports on tape (Panasonic tape recorders donated a few months ago by member of the FNS staff). Other personnel write their reports and attach them to the charts. All these visits are transcribed in chronological order by the transcriptionist, Brenda Gross.

Members of each discipline fill out the FNS encounter form (PRIMEX) for each patient contact. The statistics and charges are key-punched by Juanita Gray and sent to computers for the information required by government agencies, the administration, the Board of Governors, and professional organizations such

as the National League for Nursing and the National Association of Home Health Agencies.

Frontier Nursing Service Home Health Agency is approved by Medicare, Medicaid, the Joint Commission for Accreditation of Hospitals, and is licensed to operate in the State of Kentucky. The last two surveys by the licensing agency showed no deficiencies and a few minor recommendations.

—Verna M. Potter

---

It would be interesting, I thought, to talk with someone who had had experience with both Home Health and district nurses, so I went to see a friend who had grown up in an area which had been served by the more traditional FNS district nurses but whose mother, later, had been a Home Health patient.

“Mama was never cared for under the district system but I have always liked the idea of district nurses. The district nurse took care of the entire family and her word was gospel. She always knew all that was happening in the family, and in the area. And everyone in the district knew, and still remembers, the district nurse’s name, even if she was only there for a year. You can still hear people say ‘Miss So-and-So was our district nurse’. The FNS district nurse was always there and did whatever had to be done for the family. She used her head, and did things—there was none of this having to call the doctor all the time.”

This last sentence is grounds for a fight with any Home Health nurse, and, therefore, needs some clarification! This lady grew up with the district system and shows her great admiration for the nurses who staffed the districts. Her mother was cared for by the Home Health Agency in her final illness and she admits that she could never have kept her mother at home without the Home Health nurses. But the obvious frustration which arises from the Home Health nurse always having to act under the doctor’s plan of care is apparent, and I think understandable. My friend had nothing but praise for the care the Home Health nurses gave her mother but felt that more could have been done for the whole family if the Home Health nurse had not had her hands tied with government rules and regulations for home care.

—Gabrielle Beasley

## BIGE AND MARY

I guess I can't tell you about all Kentucky people, but perhaps I could tell about Bige and Mary.

They live at a bend in the Middle Fork of the Kentucky River and from their front porch the view looks up mountain sides of rocks and trees, one of the prettiest spots around. To reach their home one must either drive through the river bed (when the water is low enough), or walk across a swinging bridge.

Years ago Mary used to do her laundry on the banks of the river in a big galvanized tub: she built a fire to boil the water, then the clothes, and scrubbed them on a washboard. Bige promised he would buy her a washing machine if electricity was hooked up. Some years later, Mary remembered the promise and went to Hyden and bought a wringer washer. Bige was taken aback. He never imagined electricity would actually come to his part of the world!

Bige has had lung disease for years, and "smothering", and the fear of "smothering", have restricted his activity and he now becomes quite short of breath while walking from one room to the next.

But a few years back, before he was quite so ill, Mary was down, sick with pneumonia. So Bige had to get up and do. Now, Mary claims Bige would burn water, but come to find out he could scramble eggs and make cornbread. So he did: three times a day, Mary had scrambled eggs and cornbread. Finally, about three days later, Mary looked at the plate, then at Bige, and asked if he had washed the plate. Well, now, he hadn't exactly washed it . . . Mary's recovery was instant, and Bige was banished from the kitchen. No wonder Bige still avoids cooking!

Things aren't quite the same now. Mary has cancer and a troublesome abcess; Bige smothers and has pain in his legs. But Mary still fixes the meals (and washes the dishes). They take turns tending the fire, answering the phone, unlocking the door for visitors, and napping. They will continue so until they no longer can care for each other's needs; then they plan to go live with their respective families.

A Home Health nurse visits two or three times a week, and the aide visits three times a week, cares for the abcess, delivers medicine, and checks on other health matters. Their families



Home Health Nurse Kathy Smith enjoys a game of checkers with her patient.

deliver groceries, carry in coal, do laundry and just visit with them.

But how can I help you see the quick, dry wit of Mary, as she gently teases Bige, or the naughty look in Bige's eyes when he's trying to trick me into his trap during a game of checkers?

Or the tears of desperation and helplessness over a ruthless disease that eats away at a weary body, slowly stealing its vitality?

Or the triumph of us all when, for the first time in years, Bige walked to the bridge after weeks of going a little further each day.

Or the gossip shared, about folks we all know—the right and wrong discussed and mulled—the lessons of life distilled—advice on gardening, baking, fire building, when to gather, how to preserve.

The lessons taught without words—lessons of the respect due hard work, the acceptance of illness, the humor that softens the blows of life, sharing what you have, regardless of how much or how little—lessons of caring about people.

So now maybe you see a little of Bige and Mary, how and where they live.

—Kathy Smith, R.N.



## THE HOME HEALTH AIDE

"Hello! How are you today? Is there anything special I can do for you?"

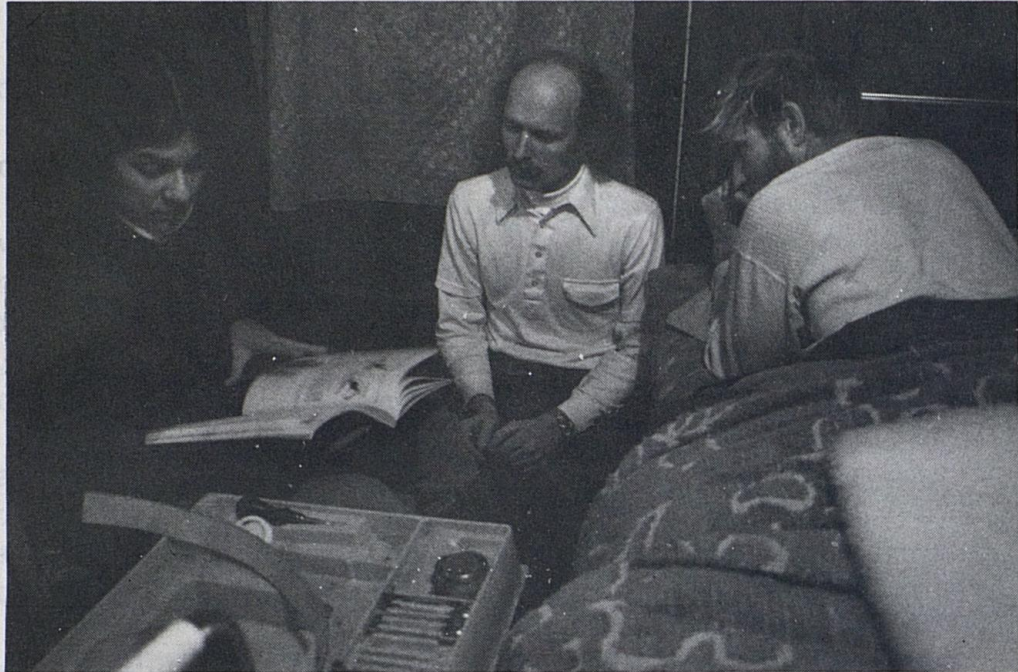
So I begin another of about one hundred home visits made each month for the FNS' Home Health Agency.

My visits are usually made at the same time each week so my patients know when to expect me. There are always one or two primary needs that a patient wants met soon after I arrive. After being in bed for three days or more, it's a great relief to take a bath, get up and exercise, or just sit up in a wheelchair or go outside on the porch in the fresh air and warm sunshine.

Bringing medical supplies or medicine when they are needed is also a welcome service. Since most of the homes I visit have no transportation, they depend on my regular visits for these necessities or maybe a special request for me to "pick up something in town" for them.

As I have worked with the patients and their families two or three days a week, friendships have developed that often make these visits go beyond just performing the personal care and medical orders required. Preparing a meal, fixing a wheelchair or taking time to interest someone in a meaningful occupation or home craft all become part of the "service" that blends into the routine.

One of my patients is a young man who has been paralyzed from the chest down for four years. Since beginning to work with him we have tried to find something he could do, using the ability he has in his arms and hands, that would prove to be interesting and rewarding. At first we thought getting his car fixed with hand controls would give him mobility and open opportunities for employment. But after months of working to this end, and finally getting his car ready, he found the problems involved in traveling in his condition to be too many to overcome at this time. Although this was disappointing, we didn't give up. Recently I suggested he try his hand at leather crafts. I began to ask around to see if anyone had had some experience in working with leather and would like to help my patient get started. Janet Kacsmarcyk, a physical therapist at the hospital, said she would be glad to share her knowledge in leather crafts to help my patient, so we set a date to meet at his home. Everything went great, and though it is a small beginning, my patient has started enthusiastically and I



Physical Therapist Janet Kacsmarcyk and Home Health Aide James Johnson discuss leathercraft with their patient.

hope this will be the experience that will help make his days interesting and perhaps eventually help him to become self-sufficient.

Because of these and many other opportunities to help that I share with my patients and their families, this work has always been a blessing for me.

—James Johnson  
Home Health Aide

---

### SUSAN AND JOHN

For me, a record was set the first time I met Susan and John. "How old are you, Susan?" I asked. She said, "I don't rightly know; some say I'm 96 years old." And your husband? "Well, now he's 7 years older than me." "And how old were you when you got married to him?" "I was 15 years old. A bit too young, don't you think?" Smiling, she added, "But we have been together ever since." And I thought: "Eighty-one years with the same man!"

But today I wanted to find out what had happened in all those

years. What was tucked away in the mind of one so strong as to survive such a time. And when I entered the room where Susan sat, she welcomed me with out-stretched arms and an open smile. And we talked some of today but mainly of the days gone by.

John, her husband, was a coal miner and the family would move wherever there was work. They started out in the head of Cutshin but lived mostly in Perry County, close to Hazard. He stopped working some time in his sixties due to a disability, though no one knows what the disability was, and continued farming up until several years ago. They were totally self-sufficient, as were most families, with livestock for meat, tobacco to smoke, corn and vegetables. Both John and Susan still enjoy their pipes together, smoking home-grown tobacco, and they have up to a hundred pounds remaining in storage for the months ahead.

Their self-sufficiency continued up until last winter. John raised a garden for their food and Susan kept house and cooked from her wheelchair (while their children worried about their safety). Last winter was hard, though, and both developed pneumonia and were admitted to the Hazard Hospital. They never returned home. Their son opened his home to them just outside of Hyden and that is where I met them, while working in the Home Health Agency.

Susan gave birth to nine children, six of whom are grown and with families of their own. When asked if she gave birth at home, she smiled and said, "Of course, my mother was a granny and she taught me everything I knew. Old Doc Frust taught me a lot too." So Susan was a granny midwife! She went on to say that she had delivered some 400 babies, going out into the homes in all kind of weather, sometimes walking but riding a horse when she could. Susan admits to some rough times because of the way some women would act, but "you just have to be patient with them".

I told Susan that I wanted to be a midwife and she said, "You do!" and gave me a big hug. Smiling broadly, she said, "Let me tell you what to use best. To help the labor along, use black pepper tea. It will make the pain stronger—and the women too! Rattleweed tea should be taken every day to make for a stronger baby. And tea from the bark of the black gum tree is good to stop the pain if it starts too soon." Then Susan leaned over to me and whispered in my ear, "And this is the bad medicine . . . NOW don't tell anyone",

she said sternly. I was instructed on what was good and what was bad so that I would not use the bad. Susan said that women had come to her all the time asking for the bad, and would pay a high price for just a little bit of it, and I was to be prepared. She warned: "You take a woman who had bad luck at three to three and a half months and it looks just like a baby. That is killing. I'm a-telling you so that you know to do right and not give out the bad." Susan's face was very serious and she was quiet for a long time.

Finally, she smiled and said, "Another good medicine I used every time was" (and she whispered in my ear) "whiskey!" The dosage is two to three swallows and it is guaranteed "to make the pains come quicker and keep the women from a-punishing so much". Susan was also aware of a shot "they give nowadays" but warned that the "womb had to be dilated" and held up her experience midwife's hand to show 8 cm. "The shot is dangerous and it is much better just to wait for nature to take its course."

My final question to Susan was: "How can I become a good midwife" and she answered by taking hold of my shoulders and saying seriously: "Well, now, you have to trust in the Lord. That's all. That's what I did and I only had one dead birth. Just trust in the Lord and He will help you." I nodded my head, just as seriously, and in full agreement.

Susan and John have lost count of the number of grandchildren and great-grandchildren. They are living with a son and his wife who have thirteen children and a total of twenty grandchildren. If one may estimate, I'd guess the possibility of some fifty great grandchildren!

As I said farewell and went on my way, I was impressed—not because of the eighty-one years of life together, but rather because of the life style of "patient giving". It seems natural now that both await the final passage. And even more natural that I, a Home Health nurse, can help ease some pain, create some conversation, stir some memory and be a small part of that waiting. Life and living, after all, is natural to all of us.

—Karen Slabaugh, R.N.

---

## FAMILY REFLECTIONS

### Introduction

The following article is a rough transcription of a tape recorded conversation with two family members of a Home Health patient. The

idea was to tape some of their comments and write an article. After listening to the tape, it seemed more appropriate to let you imagine sitting with them and listening to the conversation. As with any discussion about experiences that were meaningful to us, there is no regard for punctuation or sentence structure. Words just flow. The transcription has been broken up into separate segments, but hopefully, it will all flow together. It begins with a description of being at home with the patient, the day she died . . .

. . . . .

**Karen**—I had an appointment at the hospital that day. Susie (the lady who stayed with Grandma during the day) said, “I don’t want you to go off and leave me now, Miss Karen,” you know, sort of proper like. When Susie did that, you knew something was wrong, because she never called me that; she always called me baby. She said, “Your Grandma is bad off—I just don’t want you to go off.” Well, I just about had to go to the hospital but I knew in my heart it was going to happen after she said that. And then another thing, right there in the hospital—I saw a baby that was about two months old and I thought that’s a real human being there. You know some people say a birth follows a death.

. . . . .

**Laura**—I came home from work and Mommy didn’t look that much worse to me. But Karen had said she was worse and going to die. I always came in and talked to her for a few minutes when I first came home. So I went in to take her something to eat, and she looked up at me, and now, thinking about it, I know from the look she was telling me something. But it still didn’t dawn on me. I thought she wanted to be turned over—I turned her over—and told Karen to call somebody, that she was dying. Karen couldn’t; she said it was too late. She walked around to the other side of the bed and talked to her until it just seemed that we could see her leaving her body and going to heaven. It was just a glow. It was easy after all that. Karen talked to her and held her hand—and she just looked—looked like she was saying everything is all right.

You miss all that if you’re not around.

. . . . .

We couldn’t have managed without the assurance and the back-up of the Home Health Agency. There should be more set-ups

she said sternly. I was instructed on what was good and what was bad so that I would not use the bad. Susan said that women had come to her all the time asking for the bad, and would pay a high price for just a little bit of it, and I was to be prepared. She warned: "You take a woman who had bad luck at three to three and a half months and it looks just like a baby. That is killing. I'm a-telling you so that you know to do right and not give out the bad." Susan's face was very serious and she was quiet for a long time.

Finally, she smiled and said, "Another good medicine I used every time was" (and she whispered in my ear) "whiskey!" The dosage is two to three swallows and it is guaranteed "to make the pains come quicker and keep the women from a-punishing so much". Susan was also aware of a shot "they give nowadays" but warned that the "womb had to be dilated" and held up her experience midwife's hand to show 8 cm. "The shot is dangerous and it is much better just to wait for nature to take its course."

My final question to Susan was: "How can I become a good midwife" and she answered by taking hold of my shoulders and saying seriously: "Well, now, you have to trust in the Lord. That's all. That's what I did and I only had one dead birth. Just trust in the Lord and He will help you." I nodded my head, just as seriously, and in full agreement.

Susan and John have lost count of the number of grandchildren and great-grandchildren. They are living with a son and his wife who have thirteen children and a total of twenty grandchildren. If one may estimate, I'd guess the possibility of some fifty great grandchildren!

As I said farewell and went on my way, I was impressed—not because of the eighty-one years of life together, but rather because of the life style of "patient giving". It seems natural now that both await the final passage. And even more natural that I, a Home Health nurse, can help ease some pain, create some conversation, stir some memory and be a small part of that waiting. Life and living, after all, is natural to all of us.

—Karen Slabaugh, R.N.

---

## FAMILY REFLECTIONS

### Introduction

The following article is a rough transcription of a tape recorded conversation with two family members of a Home Health patient. The

idea was to tape some of their comments and write an article. After listening to the tape, it seemed more appropriate to let you imagine sitting with them and listening to the conversation. As with any discussion about experiences that were meaningful to us, there is no regard for punctuation or sentence structure. Words just flow. The transcription has been broken up into separate segments, but hopefully, it will all flow together. It begins with a description of being at home with the patient, the day she died . . .

. . . . .

**Karen**—I had an appointment at the hospital that day. Susie (the lady who stayed with Grandma during the day) said, “I don’t want you to go off and leave me now, Miss Karen,” you know, sort of proper like. When Susie did that, you knew something was wrong, because she never called me that; she always called me baby. She said, “Your Grandma is bad off—I just don’t want you to go off.” Well, I just about had to go to the hospital but I knew in my heart it was going to happen after she said that. And then another thing, right there in the hospital—I saw a baby that was about two months old and I thought that’s a real human being there. You know some people say a birth follows a death.

. . . . .

**Laura**—I came home from work and Mommy didn’t look that much worse to me. But Karen had said she was worse and going to die. I always came in and talked to her for a few minutes when I first came home. So I went in to take her something to eat, and she looked up at me, and now, thinking about it, I know from the look she was telling me something. But it still didn’t dawn on me. I thought she wanted to be turned over—I turned her over—and told Karen to call somebody, that she was dying. Karen couldn’t; she said it was too late. She walked around to the other side of the bed and talked to her until it just seemed that we could see her leaving her body and going to heaven. It was just a glow. It was easy after all that. Karen talked to her and held her hand—and she just looked—looked like she was saying everything is all right.

You miss all that if you’re not around.

. . . . .

We couldn’t have managed without the assurance and the back-up of the Home Health Agency. There should be more set-ups

like the Home Health system, instead of nursing homes. Medicare covered the cost very well for us—and if they don't for others, they should. It does depend on the team approach though, with the family, the person doing most of the care, and the whole FNS organization (not only Home Health) working together.

We had been taking care of Mommy before the Home Health Agency existed in this section of the county. Every two weeks we had to take her to the hospital for blood tests, take the blood to Harlan and wait for the lab results, come back to Hyden and wait for the doctor to read the report so he could prescribe new medicine—and finally go home.

So, to have the nurses come to the house was really a help. They came according to schedule and as you needed them.

Sometimes there were nurses who were not as conscientious, and in these cases I felt like I helped them—by being myself and showing them the importance of home care. I guess it's what you might call almost giving up your life for others—not quite to that extent, but the patient does become the center of everything.

The aide was a great help in staying with Mama while we went grocery shopping or on a little outing. When I wasn't at work, I was at home—so to have a little relief like that was great. Also, it gave the aide the *full* responsibility of caring for the patient instead of just coming to bathe her. If you have a good aide, you've just about got a good nurse. Aides can spot things a lot quicker than the nurse. They know the people and can sense changes. (By this the speaker meant that the aides generally visit more frequently than the nurses, doing vital signs, etc., and will remember fluctuations in blood pressures.) If they see these key things and report them to the nurse, a whole lot of trouble can be headed off—just by having a good aide between the patient and the nurse.

. . . . .

There is one problem with Americans today. They ignore death. Used to be everyone died at home and you laid them out at home. It was very important to have Mommy die at home—though it was very troublesome all those years wondering how we would react to her death.

. . . . .

**Karen**—I just said we'll see you in heaven, Grandma, and I said everything I could—and I think that is why it was so beautiful. I



knew that Mom had taken care of her, and I hadn't done as much as I could or should—and I thought, maybe that's what the Lord wants me to do. So I feel it was more important than taking care of her and I'm glad I did it. Maybe it was something I just had to do. I don't know why I was called upon to do it. I don't know how I did it.

. . . . .

**Laura**—If I had to do it again, there is nothing I would do differently. For me it was almost perfect. Of course, I couldn't have done it without my daughter's help. I couldn't have done it alone. There have to be people in the home that are conscientious and responsible and willing to do it as well as the Home Health Agency.

—Gabrielle Beasley

---

### A POTPOURRI OF VISITS

One forgets so easily that such houses exist and that people can survive in such an environment. It was a small, cold living room with a bare light bulb hanging from the ceiling. The aide was already there with her supplies laid out for the dressing change. The patient, a young paraplegic, mother of two, was stretched out on the couch, eager to have the medical portion of the visit over with. The young husband stands by the coal stove, which is the only source of heat for the house. We carry on a light conversation about the good fire he has going, as the wind whistles down the chimney pipe which has a crack through it. A bedroom is just off the living room and in it one can see a bed with one thin blanket thrown across it—and in the corner, a lovely Christmas tree, decorated, with a single present lying beneath it. An overwhelming sensation sweep through me. I lean down to cover my embarrassment and find myself staring at a hole in the floor. Is it safe to look up now? I stand up again, relieved that the treatment seems to be over. The aide asks the nurse to look at the woman's foot—it looks like a burn. "How did it happen? When did you notice it? Can you feel anything?" asks the nurse.

The woman laughs shyly—she is always pulling up close to the fire to get warm and people have to tell her to pull away; that her shins are blistering. "Do you have some socks or shoes you can

wear," asks the nurse. "Oh, yes," answers the patient as she pulls herself off the couch and into the wheelchair. She wheels herself close to the fire. "I sure wish you could get this wheelchair fixed. I've greased it and oiled it and it still runs rough. Sometimes it just about throws me out of the chair."

The nurse has moved to another corner of the room, next to a doorway which has a blanket hung across it. "Where is that cold air coming from?" The husband explains that last night's wind blew down part of the wall boards. "What about some socks or shoes?" the nurse asks again. "Oh, I was just in a hurry this morning," the patient replied, "and forgot. I've got a pair of shoes with fur in them. Can you find them, honey," she asks her husband. He digs around in a pile that the dogs are playing in and retrieves the shoes.

The visit seems to be coming to an end. The nurse turns to the patient and says, "I'll let you know what day we can make the Christmas cookies at my house." And I am aware that everyone must crawl into that one bed at night, under that little blanket, and go to sleep staring at the Christmas tree with one present.<sup>1</sup>

. . . . .

She is an old lady who was in a nursing home for a year. One day her family went to visit and decided the right thing to do was to bring her home with them. So they did. The daughter-in-law takes care of her. Unfortunately, the son has developed cancer and has to go daily for treatments. They haven't told the mother, but thinks she knows. They can't tell, though, because she doesn't speak due to small strokes.

The reason for today's visit is a catheter change. I help carry some of the supplies into the attractive trailer in which the family lives. A comfortable chair in the living room is offered me and I join the members of the family who are glued to the color console. Soon the nurse reappears to visit for a few moments with the family. She seems to know what everyone is doing and inquires appropriately. It all seems so natural, having the nurse drop in as a neighbor would. Why should it be different?

. . . . .

An older couple let us into their warm trailer. This patient has a wealth of physical problems but the biggest is her inability to

<sup>1</sup>Thanks to generous friends, FNS has the ability to make Christmas brighter for such families.



remember to take her medicine on a regular basis. The nurse gets down a box from the kitchen cabinet and begins to count how many pills have not been taken during the week. It is a simple box, marked off by days and hours. One has only to open the right time slot and take whatever it contains. The nurse patiently refills the container with the week's supply as she asks about recent events in this part of the county. "Are you drinking lots of orange juice?" asks the nurse. "We have orange pop over in the gas station," replies the husband. The nurse explains that it has to be pure orange juice, and gently begins to draw out information about where they get their groceries and where orange juice can be acquired. "It is so expensive," says the woman, finally.

The old man is asked jokingly how he can stand such a mean woman for a wife. "Well," he says, "I just bluff her 'til she fluffs up and gets as mad as a setting hen." We all laugh.

. . . . .

By all rights he should have died. No one in at the hospital thought he would live, but he did. He is doing very well now, living at home with his wife.

This is one of the weekly supervisory visits the Home Health

nurse must make to a patient's home while the aide is there. We arrive and are greeted warmly by the wife who escorts us into their immaculate house—the kind you could eat off the floor if you wanted to. The aide has preceded us and has already begun heating water for soaks and taking the vital signs. She walks around to the side of the bed to turn off the oxygen. “I can't figure out if I'm getting fatter or if this bed moves closer to the wall every week.” The man laughs and teasingly tells her she's getting fat. “Well, if you wouldn't make me eat those big dinners or drink all that buttermilk everytime I come, I wouldn't be this way.”

The rapport and affection between the aide and this household is most apparent. It is more like a daughter come home to help than a medical visit.

The feet are soaked, the vital signs are rechecked, the patient is weighted. Has he really gained weight or have the scales succumbed to being bounced around in the jeep? The nurse and aide discuss at what time they will meet at another patient's house, as the man makes his way slowly in the living room—a great feat, accomplished with no help, but under watchful eyes. He is at home and doing well.

. . . . .

So much laughter—ringing through the room. No one person starting it. Just a kind of contest in quick wit, tall tales and gentle teasing, interspersed with serious questions of how they are feeling. We sit in comfortable split bottom chairs in front of a cheery coal fire, the snow falling outside. Eager questions come from the couple about the state of the road and how much snow is sticking. It looks perfect for sledding. The man tells us how to make a wooden sled. His eyes light up as he talks.

“Poke that fire some.” We learn the tricks of a good coal fire. The wife chuckles, saying her husband likes to direct others. “Why, one year he rented out the garden to me, then sat on the porch and told me how to hoe!” He blushes, then joins in our laughter.

We rise to leave. “Why don't you just stay, and take the night with us?” We are sorely tempted. So much warmth and happiness in one room.

The young woman, who was once their nurse, promises to return again for a visit. “Hurry back,” they cry. Though complete-

ly homebound, they retain their independence—the epitomy of home health care.

. . . . .

The nurse and I continue down the road in the jeep, talking about home visits. “Generally, one can easily do a follow-up visit in about ten minutes but I always allow an hour so I can sit and talk. The most important part of the visit is just sitting and listening. Sometimes both the husband and wife will carry on separate conversations with me at the same time, and I have to try to listen to both of them!”

I am reminded of a great aunt, who, when asked what she wanted as a present, would always reply, “Love and affection, just love and affection”.

—Gabrielle Beasley

---

### A CHALLENGE

The Home Health Agency was not the major reason I decided to return to Kentucky. It was more out of a need to satisfy my curiosity, and to see if working as a nurse with the FNS could bring some greater satisfaction than other nursing experiences had brought. As a Courier here nearly ten years ago, I had felt that nursing here offered a challenge and a diversity that was difficult to find elsewhere. After a year and a half of obstetrical nursing in a city hospital, and with enthusiastic support from my husband, it seemed worth the effort to find out if I were right.

Since the Home Health Agency is basically in a neonatal stage, the challenge was there. The nursing staff had turned over completely within the first year of Home Health's existence, with little overlap between outgoing and incoming nurses. The idea and practice of home care of chronically ill patients was new to most of the nurses. It rapidly became apparent that there was a lot to learn and that in its infancy, the HHA was already suffering some growing pains.

The transition from district-oriented care to HHA has been difficult for all involved. For the district nurses it has meant the loss of a portion of their patients, a loss of part of their nursing practice (home visits), and a disruption in the concept and practice

of family nursing care. For the patients it has, so far, been necessary to adapt to frequent changes in nurses, and their families have had to learn that the Home Health nurse is not able, under the law, to give care to the family as a whole. To function at maximum efficiency, the HH nurse must know when it is necessary to consult a doctor before proceeding; how to track down over-worked medical staff; how to avoid pharmacy waiting lines and still keep homebound patients supplied with medications; how to keep up with never-ending paper work. More importantly, the nurse should gain an awareness of the social patterns and expectations of life in Leslie County.

There is a certain compulsion to "help people", which sometimes translates into trying to change their behavior into something *we* can better understand and deal with. This is a community in which it is frequently preferable to die at home, not in the hospital. Patients have remedies of their own ranging from placing iodine in the ears to using the sap of the slippery elm leaf for everything from diarrhea to eye salve. The people we see in home health often continue in a way of life in spite of medical contraindications simply because that is the way it has always been or because, as one told me, "Honey, you have to work to live".



. . . and sometimes, the Home Health Nurse find that the road to her patient's home has disappeared . . . Elaine Berdan, R.N. surveys a "slip" on Grassy Branch.

To work with out-patients in their homes, it is important to realize that not only is it unlikely that the patients' physical health will appreciably improve, but also that they are unlikely to modify themselves or their way of life. For the nurses who come from other parts of the country, the challenge is not to change the way of life but to learn to work with it effectively.

After a ten year absence, it appears to me that the greatest change is the scope and style of the Frontier Nursing Service rather than in the land or the people. Returning was no mistake. The challenge and independence still exists in all areas of nursing care in the FNS, but especially in the Home Health Agency as it attempts to establish itself, and in other areas where nursing care remains out in the community.

—Marianna Mayer Fuchs, R.N., B.S.N.

---

## **THOSE RULES AND REGS!**

or

### **HOW TO KEEP UP WITH THE DAY-TO-DAY STANDARDS FOR LICENSURE**

#### **A Tribute to the Home Health Workers— Registered Nurses, Aides, Physical Therapists, And Social Workers Alike**

You have made your planned rounds—busy day. You are half finished, for the paper work must be done and Standards met. Are the E-forms correct? Do they contain the identification and coding of your patient's diagnosis? Have you listed the procedures and materials you have used so carefully on your patient to help him in recovering or to prevent a relapse of his chronic condition? Have you helped with advice and education regarding medications, activities of daily living, and how a family can cope with the worries that come when a loved one is ill?

The write-up or dictation of the case needs to reflect the evaluation of all problems and the changes, regression or progression which have occurred since the last visit. A PLAN needs to be stated for dealing with these problems.

Standards require proper documentation of supervision of Home Health Aide care; nursing care plans, physical therapy plans, social service plans, home health aide care plans, are all

integral parts of the required record keeping. Signatures and dating must be carefully and accurately noted, and new orders from the attending physician must be recorded and countersigned. New plans of care must be obtained when a patient's condition changes or hospitalization takes place. Don't forget the mental status and the estimated length of service as documented by the attending M.D. Durable medical equipment forms are necessary to obtain the accouterments to make the infirm more comfortable at home. M.D.'s order required!

Initial visits reflect the assessment skills of the home health worker in regard to socio-economic levels, family ties and stresses as well as the skilled care needs of the patient referred to the Agency. A form signed by the patient or patient's representative is needed to make information available to Utilization Review committees and reimbursement sources. Day-to-day attention to details in patient care, and documentation of it, have become a basic part of your lives.

The careful work of the members of the Agency is aided and kept current by faithful secretaries following the rules of Standards and reporting corrections and deficiencies. The organization of charts and check lists has made the work of the physician reviewer easier and more exacting, offering an opportunity to communicate by simple means the details which need attention. Typed notes save space and eyesight.

It is indeed rewarding to be able to provide good quality of care to the aged, the child, the post-operative patient, It is gratifying to help the paraplegic to his optimum growth and to care for his relapses which need skilled input; to teach the diabetic and his family skills of self-care to a level of optimum wellness; to follow the patient with cancer on special therapy to a new level of activity. It is humbling to learn the patience needed to support the patient and family in his final days.

The faithful adherence to the "rules and regs" allows the home health worker to apply his skill in the care of our patients in Leslie County. The rules are necessary to comply with the Standards Review by which we are licensed.

Anne A. Wasson, M.D., A.B.F.P.  
Medical Consultant to HHA



**CALLING ALL COURIERS**  
**To The**  
**1978 COURIER CONCLAVE**  
**TO HONOR MARVIN BRECKINRIDGE PATTERSON**  
**AND AGNES LEWIS**  
**And To**  
**CELEBRATE THE FIFTIETH ANNIVERSARY**  
**Of The**  
**FRONTIER NURSING SERVICE COURIER SERVICE**  
**At WENDOVER, KENTUCKY**  
**On May 11, 12 and 13, 1978**

By the time this Bulletin comes off the press, FNS Couriers, for whom Wendover has an address, will have received an invitation from the National Chairman, Kate Ireland, and the Director, Dr. Rogers Beasley, to attend the 1978 Courier Conclave, so this Bulletin notice is only to remind you once again that we are looking forward to a great celebration next May and we want all of you to come!

In the almost fifty-three years of the FNS, nearly eight hundred Couriers have been to FNS and you are, quite literally, the backbone of this organization. You have given the FNS your time and energy and talents here in the Kentucky mountains, you have served as members of FNS city committees, as Trustees, and as members of the Board of Governors, and you have given us generous financial support. The 1978 Courier Conclave will honor not only Marvin and Agnes but will give all of us who are a part of FNS—the Board, the staff, the community—an opportunity to say “thank you” to each and every one of you, to honor the whole of the

**FNS COURIER SERVICE**

## IN MEMORIAM

Mr. Charles W. Allen, Jr. Glenview, Kentucky	Mrs. Joseph Barnett Paul Washington, D.C.
Mrs. Harry Clark Boden IV Newark, Delaware	Mrs. Otis T. Russell Boston, Massachusetts
Dr. Allan B. Crunden, Jr. Montclair, New Jersey	Miss Emilie G. Sargent Detroit, Michigan
Mrs. Jonathan Fields Confluence, Kentucky	Mrs. Owen J. Toland Wynnewood, Pennsylvania
Mrs. Vilas Maggard Hyden, Kentucky	Dr. Benjamin P. Watson Danbury, Connecticut
The Hon. Jefferson Patterson Washington, D.C.	Dr. Alexander Ashley Weech Gainesville, Florida
Mrs. Allen Weldy North Manchester, Indiana	

**Mrs. Vilas Maggard (Betty)**, a most gentle and dependable aide for many years in the clinic at the old hospital and in the emergency room at the new Mary Breckinridge Hospital, died at her home after a protracted illness about a month after the birth of her joyfully awaited first grandchild.

Three members of our National Medical Council have died in recent months—**Dr. Ashley Weech** who, as former director of the Cincinnati Childrens Hospital, generously arranged for the special care of numerous FNS children at that very competent hospital. It was through his interest that the residents from Childrens began regular clinics at Frontier Nursing Service. **Dr. Benjamin Watson**, a friend of Mrs. Breckinridge, was involved in the development of the FNS. After leading a party of distinguished obstetricians from the Margaret Hague Hospital on his first visit to FNS, **Dr. Allan Crunden** became a great supporter of nurse-midwives in New Jersey as well as in Kentucky. He subsequently proposed the participation of FNS in an international midwifery program in Africa which, unfortunately, was not able to mature.

**Miss Emilie G. Sargent** of Detroit, a member of the FNS National Nursing Council, had been the Executive Director of the Visiting Nurses Association in Detroit for more than forty years.

Her concern led to significant contributions in improving health care conditions for the elderly and chronically ill.

**Mrs. Allen Weldy** of North Manchester, Indiana, died in August; she, along with her husband, who was the pastor at the Flat Creek Church for many years, was a former committee member and a wonderful help to that District Nurse. **Mrs. Joseph Barnett Paul** of Washington died in June. Mrs. Paul was a former National President of the Daughters of Colonial Wars and an *ex officio* Trustee of FNS, representing an organization which has been unflinching in its concern for this nursing service. The unsung heroines of FNS include our friends who work diligently and namelessly on our City Committees, promoting our welfare, bringing FNS to the attention of others, and working endless hours on behalf of the mothers and babies of this Service. Two such loyal Committee women, **Mrs. Owen J. Toland** of Philadelphia and **Mrs. Otis T. Russell** of Boston, had served faithfully for over forty-five years until their deaths this summer.

**Mrs. Harry Clark Boden** of Newark, Delaware, Trustee, Philadelphia Committee member, mother of Mrs. James Patterson of the Boston Committee and Miss Kip Kelso Boden of the Philadelphia Committee, died in July of this year. Mrs. Boden's vital interest in the affairs of FNS led her into many activities including the endowment of a staff nurse position in memory of her Kentucky grandmother, Elizabeth Canby Bradford du Pont.

**The Hon. Jefferson Patterson** of Washington, D. C., died in November of this year. In addition to being a generous contributor to the new Mary Breckinridge Hospital, his love of the Frontier Nursing Service was most eloquently expressed by his support of his wife who for so many years served ably as the National Chairman of our organization.

**Mr. Charles W. Allen, Jr.** of Glenview, Kentucky, who was aptly and beautifully described by a Louisville paper as a "community servant", died in October of this year. As members of our Board of Governors and as Trustees, he and his wife have been unremitting in their concern and affection for the FNS as part of their broad and lively interests. Their daughter, Mrs. Clinton Kelly, now serves on our Board of Governors, carrying on the family tradition.

**Mrs. Jonathan Fields**, a former staff member and secretary to Mrs. Breckinridge, died at her home in Confluence after a very

long and difficult illness; her constant interest and good humor made "Lucky" a friend indeed. Her final release from pain was fully expressed by her family, "It hurts but it pleases".

To the families of these friends we have extended our deep sympathy.

These memorials are published in thanksgiving for their selfless acts of love.

---

### URGENT NEEDS

#### **A Sewing Machine for the Mary Breckinridge Hospital Linen Room**

A sewing machine is badly needed at the hospital for mending torn linens. A new machine would cost \$350.00 but a used machine, in good working order, would be quite satisfactory. If any of our friends have a sewing machine they are no longer using, we would be most grateful if you would give it to the MBH.

. . . . .

There are two other equipment items that are less urgently needed but would be of enormous help to patients and staff:

- 1 Comfo-pad for the cold, hard x-ray table    \$84.50**
- 1 Head Lamp for use in the Emergency Room    72.00**

## THE DEDICATION OF THE MARY BRECKINRIDGE BANNERS

By Betty Lester



Procession bearing the Mary Breckinridge Banners from the High Altar to the Rare Book Library after their dedication at the Washington Cathedral on October 19, 1977. Mrs. Jefferson Patterson followed by Dean Sayre with Father Parker, Chaplain of Berea College, and the Boys Choir.

In the Cathedral Church of Saint Peter and Saint Paul in Washington are two banners dedicated to the memory of Mrs. Mary Breckinridge and her work for her fellow man.

They were commissioned and presented by Mrs. Jefferson Patterson—Marvin to us who know her—and a cousin of Mrs.

Breckinridge, and were designed and executed in colored stitchery with Persian yarn by Mrs. Mildred Strickler of Berea, Kentucky.

One shows Eve the Mother of all Living with her two sons, Cain and Abel. On the reverse side is a tribute—"Praise God for Mary Breckinridge and the Work She Created". The other banner shows a shepherd boy carrying a lamb, with sheep at his feet. On it are worked the words of the FNS Motto, "He shall gather the lambs in his arms and carry them in his bosom and shall gently lead those that are with young". On the reverse side is the badge of the Frontier Nursing Service—a nurse on horseback.

On October 17, at four o'clock in the afternoon, there was a Service of Evensong with the dedication of the banners in the Cathedral. The service was conducted by the Dean, the Very Reverend Francis B. Sayre, Jr. The first lesson, read by the Rev. Henry L. Parker, Campus Minister, Berea College, was from the book of the prophet Isaiah, Chapter 40, Verses 3-11. Marvin, in her clear, lovely voice, read the second lesson from the Gospel of St. John, Chapter 10, Verses 1-5 and 14-18. Then the Magnificat and Nunc dimittis were sung by the boys choir—clear and beautiful. During the Anthem the Dean, Marvin and Mr. Parker walked to the Altar and slowly up through the nave from the west door came two acolytes carrying the banners, halting at the foot of the Altar steps. Everyone stood for the prayers of dedication:

"Almighty God, in whom wisdom and strength and compassion are so wonderfully blended, we ask thy blessing upon the nurses who tend the sick, and upon all who are appointed to assist them. Teach them when to console and when to challenge. May they temper sympathy with wisdom and insight. In every person committed to their care may they see the image of the Creator. When they are tired, refresh them by thy Spirit; in darkness be thou their Light; in times of stress, give them quiet courage. And bestow upon them all, we beseech thee, a share of that imagination and sensitiveness which beautified the ministry of thy bless Son, our Saviour Jesus Christ."

"In thanksgiving for all that is serviceable to thee in our lives and labors, with faith in Christ Jesus and in his Kingdom to come, we accept these banners, given in

loving memory of thy faithful servant Mary Breckinridge, and dedicate them to God's highest Glory, in the Name of the Father and of the Son and of the Holy Ghost. Amen."

Then came a Fanfare introducing the hymn Old Hundredth in which everybody joined while the procession, led by the Sinai Cross and the Banners, walked slowly back down to the Rare Book Library where the Banners were placed in their stands which had been carved by students at Berea College. One is surmounted by a chicken in memory of the days when Mrs. Breckinridge went out after lunch to gather the eggs and feed the cats and geese and chickens she loved. The other is surmounted by a horse in memory of the days when the nurses rode horseback.

There was a reception in the Rare Book Library where friends and members of the FNS met and reminisced.

Later, the Banners were placed in St. John's Chapel on either side of the entrance to the Children's Chapel where they are a perpetual memorial to the founder of the Frontier Nursing Service whose life was given to the service of others.

A group of eight of us, including Mrs. Mildred Strickler, Mrs. Willis D. Weatherford and other friends from Berea, piled into a big van with the banners at 5:00 a.m. on Tuesday, November 18, and drove to Washington. Anne, Mildred and I stayed with Mr. Jeff and Marvin Patterson and at 10:00 the next morning we went to the Cathedral to set up the banners. We then had lunch at the Capitol, in the House of Representatives Restaurant, as guests of Congressman Tim Lee Carter.

At 3:45 p.m. we arrived at the Cathedral to meet Agnes Lewis, Helen Browne and Kate Ireland and took our seats in the choir. The Service was beautiful and how Mrs. Breckinridge would have loved to hear the boys voices singing.

We had a happy evening with Mr. Jeff and Marvin, listening to his stories and talking. Next morning the Berea contingent left at 8:00 a.m. and dropped me off at Hyden on their way to Berea.

What a memory!

## FOR THOSE WHO MINISTER AND HEAL

In honor of the Frontier Nursing Service  
at the dedication of the Mary Breckinridge Banners  
October 19, 1977, Washington Cathedral

Words by John Oxenham, 1914

Music by  
Richard Dirksen, 1977

Always with expression.

The musical score is written in G major (one sharp) and 4/4 time. It consists of six staves of music with lyrics underneath. The first five staves are in a moderate tempo, while the sixth staff is marked 'mf' and '[SLOWER]'. The lyrics are: 'For those who min - is - ter and heal, And spend them - selves, their skill, and zeal; Re - new their hearts with Christ - like faith, And guard them from dis - ease and death; And in thine own good time, Lord, send Thy peace on earth till time shall end. A - - - men.'

For those who min - is - ter and heal,

And spend them - selves, their skill, and zeal;

Re - new their hearts with Christ - like faith,

And guard them from dis - ease and death;

And in thine own good time, Lord, send Thy peace on

earth till time shall end. A - - - men.



## OLD COURIER NEWS

**From Marty Richardson, Portland, Maine**

**—October, 1977**

This summer at camp I could read the Quarterly Bulletin that Lisa Greene got in the mail but I'm starting to miss the inflow of FNS news enough to get off a letter and the enclosed donation! The camp worked us hard but I'd love to go back. Lisa and I spoke of Kentucky often. Tentatively, I'm planning a cross-country bike trip from Maine down to Kentucky next spring. I can't imagine going too far into the Kentucky hills on two wheels but arrival at Wendover will be our goal.

. . . . .

**From Laurel Peterson, Peterborough, New Hampshire**

**—November, 1977**

Since my involvement with the Frontier Nursing Service I have sent down three couriers and have talked with numerous others. Also, I spoke to the New England Chapter of the Daughters of Colonial Wars, praising them for their great support, and I have had the opportunity of talking to the New Hampshire Daughters of the American Revolution and many other area Woman's Clubs, telling them of your program. I am willing to give my time to talk to anyone interested in the FNS program. Please keep me informed.

. . . . .

**From Brett Cook, Andover, Massachusetts**

**—November, 1977**

I am job hunting—hope to find worthy work in the field of juvenile justice or communications. This always raises a few eyebrows—"aren't those rather different directions?"—and, of course, they are, but with a degree in anthropology, one must cultivate diversity. Eventually I hope to combine a commitment in social services with journalistic skills, so experience in either direction will be invaluable at this point. I'm finding the process slow going but extremely educational, especially the exploration of various social service agencies. There is such a proliferation of programs, so much overlap and so little comprehensive supervi-

sion that efficient, effective and personal programming is lost. Having had the privilege of working with the FNS only sets my critical standards higher; I know that it is possible to provide quality services directly and personally—and I know that takes an extraordinary amount of time, dedication and, unfortunately, money.

Well, as they say, time is money, so I must turn to less affectionate but potentially lucrative matters at hand. My thoughts return so often to Wendover—I had a wonderful “telephone reunion” with Taddy Clow a few weeks ago. She is off to Wichita, Kansas, as a VISTA volunteer. She did not make it to my graduation (I guess that’s news—I finally graduated from Stanford this past June with honors and vast relief!) but we may rendezvous in Kansas—or Kentucky—one never knows.

Please pass on my best and warmest regards to ALL. Have a good fall and here’s hoping the Thanksgiving hikers have more luck sticking to the trail than we did!

---

It is with much regret that we have learned of the death of **Sara Lacey Chylack’s** father, Henry B. Lacey, M.D. of Columbus, Ohio, of **Doug Carroll’s** father, Douglas G. Carroll, Jr., M.D. of Brooklandville, Maryland, and of old courier **Mary Chase Stone**—“Dickie”—of Riverhead, New York, the mother and sister of two former couriers, **Mary Stone Parsons**, and **Ruth P. Chase**.

---

It is infinitely gratifying, and really rather remarkable, to realize that the large majority of FNS Couriers do keep up with us in one way or another. Sometimes we may go several years between contacts, but then you turn up again. So that we may notify *all* couriers of the May Courier Conclave (see **CALLING ALL COURIERS**), we ask that you look over the names printed below (by maiden name) and send us the addresses of any of those presently “missing” whom you may know. Many thanks.

Priscilla Auchincloss  
Deborah Baird  
Priscilla Baldwin  
Frances Bennett

Elise Bloustein  
Lois Buhl  
Debby Cake  
Elizabeth Carpenter

Connie Cherrington  
Barbara Clapp  
Janice Clarke  
Katherine Clarke

---

Beth Codman	Mildred Gainer	Pat Mickle
Martha Coleman	Gay Gann	Pat Mitchell
Norma Cummings	Connie Getz	Harriet Morley
Dorothy Danner	Sally Groner	Diana Ness
Adele Dellenbaugh	Isabella Hanger	Chris Pearse
Susan Dette	Harriet Hall	Pat Pettit
Pat Doyle	Corinna Harmon	Holly Phipps
Sarah Dubois	Alberta Heber	Alice Pitcher
Joan Dulles	Winifred Hodgkinson	Susan Potter
Sabra Dunham	Betty Horsburgh	Anne Pratt
Eloise Eberhart	Chris Irwin	Sheila Reath
Suzanne Eckert	Liz Ivory	Betty Rugee
Margaret Englehard	Anna Johnson	Ann Snow
Stephanie Etnier	Elizabeth Johnson	Ellen Stark
Ros Everdell	Eleanor Jones	Elizabeth Truesdale
Patricia Ferneding	Mary Ladwig	Beverly Wakefield
Anne Ferrebee	Dodie Law	Eleanor Wallis
Patricia Fichtner	Emilie Leshar	Lyn Westerland
Sherry Fischer	Mary MacCaughey	Karen Woelfel
Patton Fitzgerald	Jan Mather	
Miki Friedman	Betsy Merrill	

---

### Radio Spot #22 - Patient Compliance

**Narrator:** Do you know what this man is saying?

**Sound:** Indian reading the Bible

**Narrator:** Unless you are fluent in Indian, chances are you have no idea what the man said. In the same way, sometimes medical instructions can be unclear whether you read them on a prescription medicine bottle or hear them from your physician or family nurse. You have a right to know about your own health. If instructions from your physician or family nurse are not clear, ask him or her what they mean. If your prescription medicine bottle label is confusing, ask the pharmacist. Make sure you know what your physician or family nurse has said, and why they've said it. You have a right to know about your own health.

This message is brought to you as a public service by the Frontier Nursing Service.

## AN FNS TOUR IN BRITAIN

By Helen E. Browne

At long last I felt free to spend a nice long time with my sisters in England. During the summer of 1977, my sister, Joan, and I packed the Snow Goose (a camper) and headed for southwestern counties in England. Joan had friends she wanted to see and knew she would enjoy meeting any old FNS staff we might find. We wished to be free of deadlines to meet, but did have a starting point at the home of Joyce Stephens near Newent in Gloucestershire. Stevie had sent very good directions to her house at the end of Forge Lane with a beautiful view of the Cotswold Hills across the valley. One could easily recognize Stevie's house by its beautifully kept garden. I was reminded of how she loved her garden at the Flat Creek Center; and how, just once, I wrongfully accused her of using Ace bandages for her Hollyhocks! We parked the Snow Goose beside the bridle path just as Stevie came in from her daily round of nursing visits. We spent a delightful evening reminiscing. The next day Betty Hillman drove from Cheltenham where she was spending a few days vacation from her work as a supervisor of midwives in south London.

Stevie was on call for the area, so Hilly drove Joan and me to the Malvern Hills where Gwen Jellyman Rosoman met us for tea. Hilly and Gwen were with FNS at the same time, so there was much chat about "way back when". Gwen is looking so young that it was difficult for me to realize that she has a grown family and a husband contemplating retirement.

Stevie was free on Sunday and took Joan and me on a tour of her beloved Cotswold villages; such a tour as can only be conducted by one who knows every nook and cranny of this beautiful section. We said farewell to Stevie in the early evening and headed for Bradford-on Avon in Wiltshire, driving by Bristol in the new county of Avon en route. It poured with rain as darkness descended but a kind farmer let us park the Snow Goose beside his stone barn, which gave us good protection, and access to a water tap in the yard. The next morning we drove into the ancient town of Bradford-on-Avon to visit a friend of Joan's who lives in one of the old houses built on terraces on the steep hillsides which surround the town. We were warmly welcomed by Mrs. Jean Cox and, after a delicious lunch, she took us on a little tour of

an ancient Saxon church and her favorite church in Edrington, a few miles away. After an early supper, we had to leave for Bath where we had reserved a campsite. This historical city is a popular spot for tourists. Our purpose was two-fold. We wanted to visit the American Museum and to find Joan Hunt Rossiter. After leaving the FNS, Joan and her husband settled in Bath where they run a very attractive shop, specializing in things for the house. We found Joan without any trouble, and she told us she had the afternoon free, so please would we have lunch with her, and then she and her daughter, Penelope, would drive us to the American Museum and to see her lovely home on the hill above the city. When we arrived at the American Museum, I discovered that Sheila Betterton was there. She had visited the FNS on one of her tours, seeking out craftsmen. She directed us to the room where the Friendship Quilt was on display, and I was so pleased to see the two squares which were designed by Mallie Pennington and Tempie Young, both from Leslie County, Kentucky.

Just outside Bath, at Coombe Down, we found Annie Ellison and Violet Clark who were with FNS when I arrived in 1938. They welcomed us warmly and insisted we stay for lunch. We had hoped to be able to drive them somewhere, but the weather was not kind. Both of these old FNSers are now retired and living in the comfortable house which was the nurse's house during the many years they served the community. In the afternoon we headed south and reached Buckfastleigh where we found room at a site right on the edge of Dartmoor. In the morning we awoke to bright sunshine and had a lovely drive to Stoke Fleming by way to Totnes, Darlington and Kingsbridge, all new country for both of us. May Green, with her sister and brother, lives on a bluff high above Start Bay with a magnificent view of the blue, sparkling water. It was a real treat for me to see May again because she has always been a special person in my group of old staff members, as it was she who introduced me to district nursing and midwifery in the FNS. After lunch May drove us for a quick tour of Dartmouth and its harbor. Back to the house for a cup of tea before saying farewell to the Greens, and then we started on our return trip to Buckfastleigh.

The next day was one to remember. We had lovely sunshine all day which we spent on Dartmoor, driving the narrow lanes and picknicking among the heather. In the late afternoon we went to

North Tawton and were lucky to find Olive Bunce and her sister, Ellie, home from their district nursing rounds. They work adjoining districts and share their attractive home and garden.

We drove into Cornwall the following morning to find Margaret Willson in North Petherwin near Launceston. Maggie is supervising nurse-midwife for the whole of north Cornwall and has an attractive modern house with a view of the Cornish hills. This was the farthest point west of our trip. The next day we headed east and found a heavenly camp site near Collumpton in Devon. We found ourselves in a forest clearing amidst the Blackdown Hills and parked the Snow Goose on the fringe of a large meadow with the forest behind us. It was such a perfect spot that we decided to spend the Bank Holiday there. A walk through the woods brought us a glorious view of the Devon hills and farms. There was a gliding club nearby and we were intrigued to watch the gliders being lifted into the air and then floating in ever-widening circles.

Blandford Forum provided a camp site near Poole. We found our way to Star Provost where we stopped to visit a friend of Joan's and, in the afternoon, drove to Wareham, the home of Nora Kelly and her sister, Violet. They were getting ready to go on vacation to Tenerife. We had tea and then they persuaded us to stay for a game of bridge and supper before going back to our camp. The next day Liz Palethorp came over from Swanage and we drove into the lovely Dorset countryside for a picnic lunch and a chat about FNS. In the late afternoon we drove to the middle of the New Forest for our last night. Unfortunately, it poured with rain so we could not walk in the forest, and we left for home the next day.

It was a special pleasure for me to visit eleven old FNS staff members who had been in Kentucky during my first twenty-five years. To each I give my thanks for such generous hospitality and send best wishes for the years to come.

**OLD STAFF NEWS****From Mary Nell Harper in Nairobi, Kenya****—October, 1977**

Due to the unrest in Ethiopia, it seemed wise to leave and this I did on July 22. I do have a re-entry visa but the possibility of returning seems less and less. I have been waiting in Nairobi for reassignment. Presently I am acting as a school nurse in the North Frontier District of Kenya called Garba Tula. It's a desert area, sand, rocks, dust, wind. The contrast to my station in Ethiopia could not be more. The job possibility before me now is a nurse-midwife in a Women and Childrens Hospital in the south of Malawi. The job sounds like a real challenge but it takes some time for the work permit to be processed.

. . . . .

**From Treva Geiger in Ouelessebouyou via Bamako, Mali****—October, 1977**

The transition from the States to Mali is quite an adjustment, although those of us who have experienced this several times become quite accustomed to it. Friends met me when I landed at Dakar and it was restful to spend a few hours in their home overlooking the Atlantic Ocean.

Nzan, our national translator, helped me clean the house which has been vacant for almost six months. Birds have been nesting under the porch; lizards and bats have made themselves at home in our attic! But most of the cupboards and closets have been wiped out, the floors swept, washed and waxed, and Kanuya, my maternity helper, should be here by Monday. We will try to get organized for prenatal clinics, deliveries, and treatment of sick children by the middle of next week.

. . . . .

**From Mary Ruth Sparks in Pleasant Hill, Tennessee****—November, 1977**

I had dinner with Bridie Gallagher and Liz Palethorp in London last week, when we had a pleasant visit and reminisced about FNS. They send best wishes, as I always do.

**From Sandy Tebben in Joliet, Illinois****—November, 1977**

I returned in June from Nigeria and am now a full-time student. I hope to complete my B.S. in May and then join the MPH program at Johns Hopkins University.

I will always have a great love for FNS and the people—after being twice on the staff and a midwifery student, one does not forget. I talk about FNS whenever I have a chance and I've shown the movie a number of times.

---

**DEATHS**

**Ellen Marsh**, London, England, a nurse-midwife with FNS from 1927 to 1931;

**Francis Brewer, M.D.**, El Cerrito, California, Medical Director, 1962-63.

We extend our sincere sympathy to the family and friends of these former FNS staff members, and also to **Josie Finnerty** whose aunt, Miss Annie Farrell, died earlier this year.

---

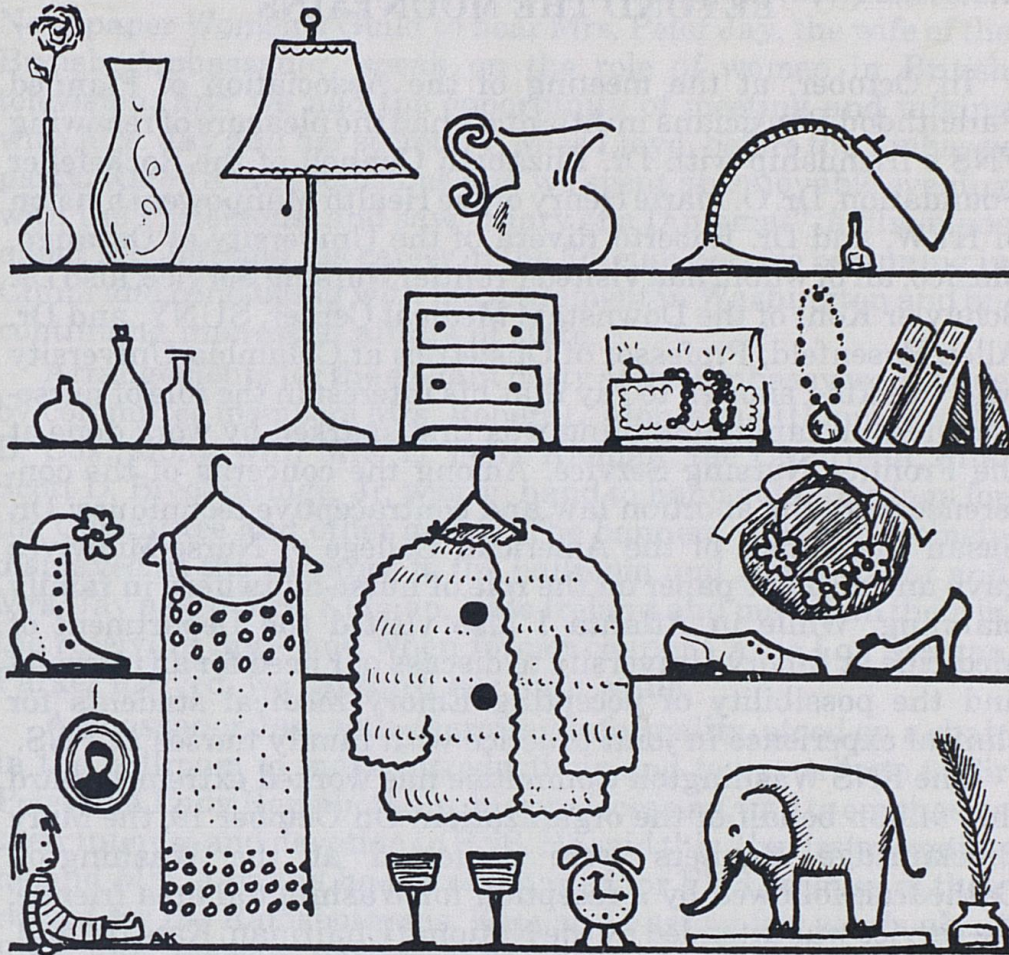
Our warmest congratulations to an early FNS nurse-midwife, Rose McNaught, who received the Hattie Hemschemeyer Award at the 22nd Annual Meeting of the American College of Nurse-Midwives.

---

We have recently heard from Susan Kennedy Pennington's grandmother that Sue and Jerry spent two years in New Haven while Sue studied at Yale for her Masters in Community Adult Nursing. She graduated last June and the Penningtons are living in Bloomsburg, Pennsylvania, where Sue is teaching in a college and hospital there. Sue and Jerry are fine and their daughter, Teresa, is now six years old.



WHITE ELEPHANT



DON'T THROW AWAY THAT WHITE ELEPHANT  
 SEND IT TO FRONTIER NURSING SERVICE  
 1579 Third Avenue, New York, New York 10028

You don't have to live in or near New York to help make money for the Nursing Service at the Bargain Box in New York. We have received thousands of dollars from the sale of knickknacks sent by friends from sixteen states besides New York. The vase you have never liked; the ornaments for which you have no room; the party dress that is no use to shivering humanity; the extra picture frame; the old pocketbook; odd bits of silver; old jewelry—There are loads of things you could send to be sold in our behalf.

If you want our green tags, fully addressed as labels, for your parcels—then write us here at Wendover for them. We shall be happy to send you as many as you want by return mail. However, your shipment by parcel post or express would be credited to the Frontier Nursing Service at the Bargain Box if you addressed it

FRONTIER NURSING SERVICE  
 1579 Third Avenue  
 New York, New York 10028

## BEYOND THE MOUNTAINS

In October, at the meeting of the Association of Planned Parenthood Physicians in Atlanta, I had the pleasure of renewing FNS's friendship with Dr. Elizabeth Connell of the Rockefeller Foundation, Dr. O. Marie Henry of the Health Manpower Division of HEW, and Dr. Roberto Rivera of the University of Durango, Mexico, all of whom had visited Frontier Nursing Service; also Dr. Schuyler Kohl of the Downstate Medical Center, SUNY, and Dr. Allen Rosenfeld, Professor of Obstetrics at Columbia University who was kind enough to say that his interest in the role of nurse-midwives in family planning was first sparked by work done at the Frontier Nursing Service. Among the concerns of the conference were the abortion law and contraceptive techniques; Dr. Susan Fleishman of the American College of Nurse-Midwives gave an excellent paper on the role of nurse-midwifery in family planning. While in Atlanta I also visited the Department of Medicine at Emory University to discuss our need for an internist and the possibility of accepting Emory medical students for clinical experience in joint practice with family nurses at FNS.

The FNS Washington Committee has worked extremely hard this fall on behalf of the organization. On October 19, the Mary Breckinridge Banners were dedicated at the Washington Cathedral, followed by a reception for Washington area friends; the service was attended by the National Chairman, Kate Ireland, and old staff members Betty Lester, Helen Browne, Agnes Lewis and Joan Fenton, and is reported by "The General" elsewhere in the Bulletin. In Washington at the end of October, I was the guest of our former National Chairman, Mrs. Jefferson Patterson and Mr. Patterson, for a meeting of the American Public Health Association and an FNS Committee party at the British Embassy.

The APHA meeting offered much of interest and concern for those of us involved in the care of mothers and babies. There were sessions on midwifery, on rural health, on nurse practitioners, on alternatives in childbirth; provocative papers were presented by nurse-midwives Dr. Susan Fleishman and Dr. Ruth Lubic of the Maternity Center Association, a member of the FNS National Nursing Council, and by an old friend, Dr. Archie Golden of Johns Hopkins University.

Marvin Patterson took me to a meeting of the American Newspaper Women's Guild to hear Mrs. Peter Jay, the wife of the British Ambassador, speak on the role of women in British television, and we had the opportunity of meeting and talking with Mrs. Jay and her secretary, Miss Lloyd, before the Embassy party. Kate Ireland joined us and we spent an enjoyable evening with the Pattersons, and saw "Diary of a Diplomat", a film made about Mr. Jeff and his career in the Foreign Service beginning in China and concluding with his retirement in Washington and his continuing interest in affairs of state.

Arrangements for the elegant party at the Embassy were made by committee members Mrs. Robert L. Montague III and Mrs. H. B. Cox, along with Mrs. E. Felix Kloman, the Chairman; Mrs. Scott D. Breckinridge, Jr. was on hand to hand out name tags for the Committee and other guests. The banners were handsomely displayed at the entrance to the ballroom and Ambassador and Mrs. Jay asked Mrs. Kloman, Kate Ireland and me to join them in the receiving line—and when former courier Carrie Lou Morgan Parker arrived, we captured her for a while.

Ambassador Jay, with charming informality, stood on a chair in the ballroom to make introductions and to pay tribute to Sir Peter and Lady Ramsbotham, his predecessors, and to emphasize their interest and devotion to FNS. He said this, the first reception he and Mrs. Jay had had, was planned for FNS because of their regard for the Ramsbothams. Kate and I said a few words about FNS and Marvin Patterson narrated the documentary, *The Forgotten Frontier*, which was shown in the dining room. Mrs. Robert Gawthrop, Chairman of our Philadelphia Committee, was there to display the needlepoint rug; amongst the many Kentuckians present were former Governor and Mrs. Edward Breathitt.

The Philadelphia Committee had scheduled the drawing for THE RUG the evening of November 6, and Kate and I had planned to leave Washington early that morning to drive to Philadelphia. Marvin called us at 6:00 a.m., because of Mr. Jeff's suddenly worsening condition, and we were so glad to be of some help in getting him to the hospital and into the Intensive Care Unit.

We reached West Chester, Pennsylvania, in time for luncheon at the home of Mrs. and Mrs. Robert Gawthrop with a number of

old friends, including Carrie and Morris Cheston, Bee and Gib McIlvain, and Brownie. Old courier Claire Hodupp Irwin, now a member of the New York Committee, and her husband, Bill, were there with Claire's mother, Mrs. J. Cranston Hodupp. In the evening we went to Annette and Ernie von Starck's charming old home in the country to join a great crowd of Philadelphia area friends for the drawing for the rug. Mrs. Henry C. Biddle, a charter member of the Philadelphia Committee, was there to draw the lucky winner out of the pot—and everyone present was filled with envy and regret that he did not win the rug himself!

In a downpour the next morning, Kate and I drove to New York. After a brief stop in the city to buy a much-needed raincoat, I flew to Boston where Board member Joey Donnelly had arranged an appointment with Dr. John Stoekle, Professor of Internal Medicine at the Massachusetts General Hospital; we had a great discussion about setting up at Frontier Nursing Service an elective rotation for Residents in Family Practice so that they would have the opportunity to work in joint practice with family nurses and nurse-midwives in an established system in a rural setting. Dr. Stoekle was most encouraging.

Joey took me to the new Harvard Club for the reception and dinner planned by the Boston Committee for the Sponsors of the Christmas Preview. At the entrance to the reception was a display of beautiful color photographs taken by the late Ginny Branham some twenty years ago. Ginny's mother, Mrs. Roger L. Branham, was there to identify the pictures which were particularly impressive by their timelessness.

Dinner with the Boston Chairman, Audrey Robb, and her husband, George, a pediatrician, and Kaydee Schmidt, a former pediatric staff member, was followed by a review of the current activities of FNS. The group asked many questions about courier activities, about pending national legislation and about the financing of FNS programs; Brownie and I enjoyed fielding these, and afterwards I had the pleasure of seeing and talking with many old friends—the Standleys, the Perrys, the Donnellys, the Dawsons, the Grandins, the Higgins, the Moirs, the Chestons, the Lawrences, the MacAuslands, Mary Ann Quarles Hawkes and many more. The Samuel Kings, whose daughter is now chief courier at FNS, graciously provided me overnight hospitality at

their lovely old home facing the Charles River, which is about the size of the Middle Fork at Wendover.

Tuesday began with a drive to West Hartford to present FNS to the Women of St. James Episcopal Church, returning to Boston in time for the opening of the Christmas Preview that afternoon. It was my first Preview and it was grand seeing the shops and sampling wine and cheese from the ample board presided over by Jane Fisher, and talking with Boston Committee members and their guests.

The Boston visit included a seminar on Cost Containment presented by the Program in Health Service Management of the Harvard Business and Public Health Schools. The program had been arranged by Lindsay Hanna who visited FNS when his daughter, Meg, was with us as a courier. One session, with people from Washington, focused on contemporary legislation. Afterwards there was a luncheon with Health Services Management, a private organization in Boston which does exactly what its title says, on an international basis.

Taking an afternoon plane to New York, I stayed at Bishop and Mrs. John Allin's apartment, did a little recruiting at Cornell, and at Dr. Kurt Deuschle's Department of Community Medicine at Mt. Sinai.

I learned of Mr. Jefferson Patterson's death when I called the house from the airport on my way back to Kentucky, and resolved to return to Washington with Katie for the memorial service the following week. We were so pleased to join Mr. Jeff's family and friends in the National Cathedral to pay tribute to him and his distinguished career.

In the first week of December, Katie and I flew to Chicago to present the current program of FNS to the Chicago Committee at a luncheon at the Women's Athletic Club, arranged by Mrs. Erskine Phelps Wilder and Mrs. F. B. MacKinnon. The large crowd included a former midwifery student, Carolyn Ruth, several former and prospective couriers, representatives from the American Hospital Association and from the Daughters of Colonial Wars. It was a very special delight to meet former Chicago Chairmen Katherine Arpee and Barbara Potter. After showing our slides the questions raised concerned the curriculum of the family nursing program, the activities of couriers, and possible alternatives in the use of beds in rural hospitals. There

was considerable interest in the discussion of joint practice of nursing and medicine. Chicago Committee member Jean Ireland, our hostess, had delightful dinner parties both evenings at Lake Forest in the snow.

Despite the snow we were able to reach Cleveland in time to meet the Cleveland Committee and friends at the Intown Club. The Chairman, Mrs. Paul Vignos, introduced Katie and we again made a slide presentation which was followed by a lively discussion about the FNS program on family planning and abortions, courier activities, and some of the effects of cost containment legislation and the rural health practice legislation on the FNS program. We were the overnight guests of Kate's father, Mr. R. L. Ireland, and Mrs. Ireland and the whole household was most attentive. We were particularly grateful to Betty Elliott for the beautiful arrangements she made for the reception and for driving us to and from airports in the snowstorm.

Two days later our pharmacist, Joe Lewis, and I went to Lexington to make a presentation at the University of Kentucky Medical Center on the relationship of pharmacists and nurse practitioners in clinical practice. Joe's presentation, his first to such a large audience, was clear, effective and admirable. It should help in the recruitment of pharmacists here as Joe is on the clinical faculty at UK.

. . . . .

On November 2, Kate Ireland spoke with members of the Kentucky Society of the Daughters of Colonial Wars at Spindletop Hall in Lexington, The President, Miss Josephine Ewalt, was a most gracious hostess and Kate had the pleasure of renewing her friendship with Mrs. Dewey Daniel and Mrs. French Maggard. Kate showed slides and reported on the FNS today. The members are excited that they will be meeting in the mountains next fall.

. . . . .

The New York Committee, under the chairmanship of Mrs. R. McAllister Lloyd, invited New York area friends to cocktails and a bazaar at the home of Mr. and Mrs. William F. Ray (parents of former courier Debbie Ray) on November 17. Guests were asked to bring something of value to be displayed and sold at the party.

Previous commitments prevented anyone from FNS going from Kentucky to New York for the party but Kate and I shall look forward to giving a report to the New York Committee at a later date.

President Carter signed the Rural Health Clinics bill on Thursday, December 8. This bill authorizes payment to nurse practitioners, certified nurse-midwives and physician assistants for the services they provide to Medicare and Medicaid patients in rural clinics. Regulations are being written and implementation of the bill should begin sometime in 1978. We rejoice over this significant step in health care. Dr. Tim Lee Carter, the Representative from our district, was prominent in designing this bill and managing it through its successful passage.

We would like to extend our hearty thanks to so many members of our city committees and Trustees who wrote their congressmen and senators urging the passage of the Rural Health Clinics bill. You have been a successful lobby!

The appropriate modification of the Nurse Practice Act and the Medical Practice Act are being considered for the meeting of the Kentucky General Assembly in January 1978. These modifications are to recognize and credential nurse practitioners, certified nurse-midwives and physician assistants in the State of Kentucky to assure their eligibility for Medicaid payments.

—W. B. R. Beasley, M.D.

A patient suffering from bursitis was directed by her doctor to apply heat for relief.

"But doctor," objected the patient, "my husband says to use cold packs."

"Well," replied the doctor, "you tell your husband that my wife says heat is better."

—*Modern Maturity*, August-September 1975

## FIELD NOTES

By Peggy G. Elmore

In early November, I had the pleasure of going to Boston to attend the Christmas Preview sponsored by the FNS Boston Committee—the first time I had been to a Preview since I had gone with Mrs. Breckinridge in the very beginning of this marvelous fund-raising project. It was great fun to see a number of the committee members who had been instrumental in getting the first Previews under way almost twenty years ago—Mardi Perry, Hanna Higgins, Sue Grandin, Frances Knight, Patsy Lawrence, Franny MacAusland, “Mrs. Streck”—and to meet again some of the newer Committee members who have visited FNS in recent years—Audrey Robb, Caroline Standley, Liz Dawson, Jane Fisher, Tia Moir, Jean Morehead, Mary Boyle. I had a chance to talk with some of the members whom I had not met before who work so hard for the success of the Preview—Evie Leach, Happy Lee, Betts Barker (who was also an exhibitor), Alexandra Dane, Whitney Robbins, Libby Phillips, and Brooks Lobkowitz, a fellow Kentuckian, and to catch up with several other old couriers—Chris Boyle, Nan Sersig, Lila Caner Mehlman, Janie Cheever, Pacey White. An old friend and former staff member, Mary Ann Quarles Hawkes, put me up at her home in Newton and I had a chance to visit on the phone with former staff nurse-midwife Mary Simmers Penton. Mary Ann and I even found time one evening to go down to the Waterfront to see some of the marvelous restoration which is going on in old Boston. It was a lovely three day interlude!

. . . . .

Our congratulations, and thanks for jobs well done, to the twelve FNS employees who completed five years of continuous employment this fall:

From the Medical-Surgical floor—**Marie Mitchell, LPN**

From the Pharmacy—**Joe Lewis, R.Ph. and Lizette Begley**

From Maintenance—**John C. Campbell**

From Security—**Clifford Whitehead**



From the Buiness Office—**Juanita Johnson** and **Alta Browning**  
From Dietary—**Geraldine Collins**, **Georgia Osborne**,  
**Della M. Sizemore**  
PBX Supervisor **Virginia Roberts**  
and  
Family Nurse-Midwife at Oneida **Cynthia Sherwood**

. . . . .

Five additional staff members—Anne A. Wasson, M.D., G. Bradley Gascoigne III, M.D., Chris Schenk, Esther Seeley and Ida Laserson—have recently received voluntary faculty appointments at the University of Kentucky.

The Memorandum of Agreement which is the basis for collegiate credit at the University for students who receive their family nursing and nurse-midwifery at the Frontier School of Midwifery and Family Nursing has been completed and the final form is being circulated for official signatures. Curriculum and faculty have been agreed upon and students who follow the curriculum, under the faculty with joint appointments, will receive university credit. This is a time of real celebration for us to have the long-standing FNS training receive university affiliation.

. . . . .

Deborah Parker, a medical records student at Eastern Kentucky University, spent two months at the Mary Breckinridge Hospital this fall, gaining "directed practice and affiliation experience". This is another university affiliation of which we are proud.

. . . . .

Ida Laserson and Dr. Brad Gascoigne presented a workshop on Health Problems and Youth at the fall meeting of the Settlement Institutes of Appalachia held in Berea, Kentucky, on October 14. At the same time, Phil Reppond, who is a member of the SIA Board, was asked to give a ninety-second summary of the activities of Frontier Nursing Service!

After two snowfalls, with attendant slick roads, Debby King, the Chief Courier, is predicting that she will be a basket case before the end of the winter season! Otherwise, the Courier Service is hale and hearty and helpful. Debby has been ably assisted by seven couriers during the fall months. Marian Barrett, Kit Jamieson and Anne Saunders, here when the last Bulletin was printed, all left in November. Deborah Lewis, Wakefield, Rhode Island, and Rebecca Quinn, Merion Station, Pennsylvania, came in early October and were joined by Betsy Bret Harte of Tucson, Arizona, and Mary Garding of Paynesville, Minnesota, on November 1. Mary had worked as a volunteer in the emergency room at the Mary Breckinridge Hospital for a couple of months before moving over to Wendover. The girls have added "Christmas" to their usual activities and are the producers and directors, stage hands and wardrobe mistresses of the traditional Childrens' Christmas Pageant at Wendover, to be held on December 17.

. . . . .

A new class in the Frontier School of Midwifery and Family Nursing will begin on January 2, 1978, and the twelve new students for FNIA who are having orientation during the month of December are: Betty Anderson, Arlene Bowling, Cathy Carr, Barbara Donaghy, Jan Perkins, Ellen Prueher, Nina Redgrave, Ann Shaw, Kathy Smith, Doris Wall, Jane Webster and Susan Willis. Five of these nurses are "transfers" from the FNS staff: Arlene from the Primary Care Center, Cathy from Medical-Surgical, Nina from O.B., and Susan from the Emergency Room at Mary Breckinridge Hospital, and Kathy from the Home Health Agency.

. . . . .

Verna Potter, who has been Coordinator of the Home Health Agency since it became a separate entity last year, will continue to be a consultant to Home Health but, at the beginning of December, her primary responsibility shifted to Wendover as coordinator of domestic and maintenance affairs and as hostess for our many guests. When Sue Hightower—"the voice of MBH"—resigned, Virginia Roberts became the PBX supervisor at the hospital and Brenda Davidson was promoted to front desk

supervisor. Sue set such a high standard of courtesy and efficiency on the switchboard—a standard which she translated into training—that her influence will long be felt. Kim Shepherd has replaced Hilda Asher as secretary to Dr. Beasley and our new nurse-anesthetist is Gretchen Mason, C.R.N.A. It is good to see three “old” friends back at the hospital—Glenda Swartz, R.T. and Ruth Rushby, M.T. (ASCP), who were short-term volunteers earlier in the year, have returned to staff positions in x-ray and the lab., and Marcia Stevenson McDonald has returned as a family nurse in the Primary Care Center. Chet Ward, Assistant Controller, and his wife Carol, an R.N., resigned in November, as did family nurse-midwives Kim Beck Wooton and Sue Harris, Kim to devote full-time to her new baby and Sue to return to her home in Ohio. We welcome three new staff R.N.’s at the hospital—Susan Blaisdell, Anita Johnson and Linda Roggenkamp. Charles Thornbury will leave FNS on December 23, for a short holiday before assuming his new position at the Leslie County Telephone Company in Hyden on January 2. As the first Controller the FNS has ever had, Charles brought a new order to our complex accounting department and introduced FNS to computer billing and accounting. We shall always be grateful for his devoted service. We are delighted that the Thornburys are remaining in the area and that Reo will continue in the business office at the Mary Breckinridge Hospital.

. . . . .

When the Mary Breckinridge Hospital Auxiliary presented FNS with a check for \$1,000.00 in June, toward the purchase of a new isolette for the newborn nursery, the members resolved to raise the money to complete the purchase by the first of January. They met this goal with two and a half months to spare! The latest project of the Auxiliary was a Christmas Bazaar, held at the hospital on December 3, which we understand was most successful.

. . . . .

Opal Morgan and her assistants, Hazel Bowling, Gladys Bowling and Elizabeth Mosley, put “the big pot in the little one” on November 24, and served Thanksgiving luncheon to some 78 FNSers. From Ian Snead at seven months to Mrs. Beasley, Sr. at

eighty plus years, staff, husbands, wives, children, mothers, fathers, brothers and sisters, gathered at Wendover and we don't think anyone went home hungry. A few hearty souls, led by Molly Lee, hiked over the mountains from the Head of Hurricane, without getting too lost and arriving only about forty minutes late!

. . . . .

The second Trustee "open house" of the fall gave us the pleasure of entertaining Mrs. William C. Robinson and Mr. and Mrs. Joseph Carter of Versailles, Kentucky, Dr. and Mrs. Stuart Graves of Louisville, Mr. and Mrs. Angus McDonald and Dr. Juanita Fleming of Lexington, and Dr. Patience White of Boston. Early in the New Year, we will be in touch again with the Trustees and City Committee members about plans for 1978 "open houses" and we shall hope to see many more of our good friends in the mountains within the next twelve months.

. . . . .

The fall meeting of the Frontier Nursing Service Board of Governors was held at Wendover and Hyden on October 1, 2, and 3, with twenty members and an honorary member present. On October 1, the Board met with staff and community to discuss mutual concerns. Committee meetings were scheduled for the 2nd, with the formal Board meeting held on the morning of the 3rd.

The winter Board meeting is scheduled for January 13 and 14 in Louisville, Kentucky—and we hope the weather will cooperate!

. . . . .

The Board of Governors, at its October meeting, authorized a change in clinic charges and a firmer collection policy for the Service; this was the next logical step since we began computer billing in April 1976. With the passage of the Rural Health Clinic bill, which will authorize payment to nurse practitioners and certified nurse-midwives for the services they provide to Medicare and Medicaid patients, it is essential that the charges are accurate in relation to the cost of providing the services. After much staff work the level of charges and the billing policy have been established. Special meetings of the nursing staff on district and

at the Primary Care Center have been held by Evelyn Peck and Ron Hart. Following the staff meetings our district committees at each of the centers have met for an explanation and discussion of the new charges and collection procedures. Each committee has given its clear support to the new policies. The discussion has been vigorous at each meeting and these discussions included a probing of the quality of care to be provided by family nurse practitioners (all districts have this staffing) as compared with the quality of care of physicians. Some of the committees wished to continue to meet on a monthly basis to assure successful implementation of these new charges and collection procedures. A goal of self-sufficiency was suggested by several committee members.

. . . . .

In December a meeting was held at the Wooton Clinic with representatives from Mountain Comprehensive Health Corporation, the former manager of the clinic, and Frontier Nursing Service, the future owner and operator of the clinic, together with a goodly number of residents in the area. The meeting confirmed the transfer date of January 1, 1978, and reassured the community that the scope of services would continue. Dr. Anne Wasson will be the responsible physician and the daily services will be provided by a district family nurse. A local committee is to be organized promptly.

. . . . .

In September Betty Lester went to California to visit Edna Rockstroh who was one the first two nurses to join Mrs. Breckinridge in beginning the work of Frontier Nursing Service in 1925. Betty reports that they had a wonderful visit and she returned with some interesting tapes of "Rocky's" recollections of the early days. Betty also had the opportunity of seeing another former staff member, Anne Nims Nixon, who met her plane and showed her something of the Pebble Beach area.

. . . . .

In October we had the pleasure of an overnight visit from Mrs. Lewis Cass Scheffey, an old friend and member of our

Philadelphia Committee, and her grandson, Tom Scheffey, a reporter on a northern Kentucky newspaper and a beginning law student. The Scheffey visit came almost nineteen years to the day after Mrs. Scheffey's first visit to Wendover, when she accompanied her husband, the late Lewis Cass Scheffey, M.D., to an annual meeting of the American College of Nurse-Midwives, at which he spoke on "Population Pressures and Global Tensions". This distinguished obstetrician, President of the American Gynecological Society and Professor Emeritus of Jefferson Medical College in Philadelphia, was one of the early advocates of family planning in this country, and the 1958 ACNM meeting has long been remembered as one of the most interesting and provocative ever held at Wendover!

We were pleased to have an old staff member Edith Anderson Lawrence and her husband stop by one day and to see, briefly, Miss Marian R. Johnson of Cincinnati. Two University of Kentucky College of Nursing faculty members, Dr. Jan Thomas and Betty Bear, the new Vice President of the American College of Nurse-Midwives, brought their family nursing and nurse-midwifery students for one day visits to FNS recently. A site visit from representatives of The Robert Wood Johnson Foundation gave us a chance to renew our acquaintance with Mrs. Ann Bliss, Mr. Terrance Keenan and Mr. John Thones, and to get to know a most distinguished and delightful leader of the nursing profession, Miss Virginia Henderson, an emeritus member of the Yale nursing faculty, author of nursing textbooks, and the "compiler" of the index to nursing literature from 1900 to 1960.

The Asia Foundation arranged a two day visit to FNS for two Asian health professionals in mid-November and their tour coordinator, Fay Schlesinger, has been so kind as to write Dr. Beasley:

"I am back in our home office after three very full and interesting weeks on the road with our Asian visitors. As you may know, we visited a variety of rural community health programs in Iowa, Missouri and Texas, and I must say, our visit to Hyden/Wendover and the FNS was a special highlight. Of course, Trining de la Paz was so delighted that you had met her husband in Davao, but as well, this was the most relevant model to both of their

rural Asian environments of all the facilities and programs that we visited . . .

"We all deeply appreciated the candid and open approach with which all of the FNS employees and volunteers presented the Service. The frustrations and continuing snags were discussed alongside all of the fabulous successes of FNS. I might add that we were so impressed with the high caliber of your employees, and their inspiring dedication to delivery of the highest quality health care. Dr. Cheong, with her interest in family planning, was quite excited to hear about the dramatic drop in the birthrate in the period following 1958 when you started doing family planning. She was interested to know how that was possible in large part due to the rapport that had already been established by the nurse-midwives with the people. For myself personally, I appreciated most of all the human-ness and spirit that pervade in every aspect of your remarkable service. From the kitchen staff at Wendover to the new pharmacist at the Oneida Center, it is evident that you are a "family" working together in a pioneering effort to respond to vital health care needs."

. . . . .

Our congratulations and grateful thanks to Mrs. Betty Huff, R.N. who has been secretary to the FNS Advisory Committee for the past two years and has never missed a meeting. Mrs. Huff is retiring now in accordance with the by laws of the Advisory Committee.

. . . . .

**HAPPY NEW YEAR TO YOU ALL!**

**FRONTIER NURSING SERVICE, INC.****BOARD OF GOVERNORS****Chairman**

Miss Kate Ireland, Wendover, Ky.

**Vice-Chairmen**Mrs. Alfred R. Shands III, Crestwood, Ky.  
Mr. Henry R. Heyburn, Louisville, Ky.**Treasurer**

Mr. Homer L. Drew, One First Security Plaza, Lexington, Ky.

**Assistant Treasurer**

Mr. W. F. Brashear, Hyden, Ky.

**Recording Secretary**Mrs. John Marshall Prewitt, Mt. Sterling, Ky.  
Mrs. John Harris Clay, Louisville, Ky.  
Mr. C. V. Cooper, Hazard, Ky.  
Mr. Joseph C. Donnelly, Jr., Medfield, Mass.  
Mrs. Albert Ernst, Perkiomenville, Pa.  
Miss Fredericka Holdship, Sewickley, Pa.  
Dr. James B. Holloway, Jr., Lexington, Ky.  
Mrs. Clinton W. Kelly III, Reston, Va.  
Mr. John H. Kerr, Jr., Lexington, Ky.**Corresponding Secretary**Miss Jane Leigh Powell, Glen Cove, New York  
Mr. Edward A. Mattingly, Hyden, Ky.  
Mr. Eddie J. Moore, Hyden, Ky.  
Mr. Wade Mountz, Louisville, Ky.  
Dr. C. T. Nuzum, Chapel Hill, N. C.  
Mrs. Arthur Perry, Jr., Concord, Mass.  
Mrs. Burgess P. Standley, Medfield, Mass.  
Mrs. William M. Street, Louisville, Ky.  
Dr. Willis D. Weatherford, Jr., Berea, Ky.**Honorary Chairman**

Mrs. Jefferson Patterson, Washington, D. C.

**Honorary Treasurer**

Mr. Edward S. Dabney, Lexington, Ky.

**Honorary Member**

Miss Helen E. Browne, C.B.E., Milford, Pa.

**Members Emeritus**Dr. Francis M. Massie, Lexington, Ky.  
Mrs. Floyd H. Wright, Lexington, Ky.**AUDITORS**

Ernst &amp; Ernst, Lexington, Ky.

**TRUSTEES**Mrs. Charles W. Allen, Jr., Glenview, Ky.  
Mrs. Edward Arpee, Lake Forest, Ill.  
Mrs. Richard M. Bean, Lexington, Ky.  
Miss Sarah Gibson Blanding, Lakeville, Conn.  
Mr. Kenyon Castle Bolton, Cleveland, Ohio  
Dr. John Breckinridge, Denver, Col.  
Mr. John B. Breckinridge, Lexington, Ky.  
Mr. R. B. Campbell, Hyden, Ky.  
Mrs. R. B. Campbell, Hyden, Ky.  
Mr. Joseph C. Carter, Versailles, Ky.  
Mrs. Charles S. Cheston, Jr., Topsfield, Mass.  
Mrs. N. Holmes Clare, New York  
Mrs. William W. Collin, Jr., Sewickley, Pa.  
Mr. A. B. Comstock, Louisville, Ky.  
Mrs. John Sherman Cooper, Washington  
Judge A. E. Cornett, Hyden, Ky.  
Mrs. David Dangler, Lake Forest, Ill.  
Mrs. John E. Dawson, Dover, Mass.  
Mrs. Robert W. Estill, Dallas, Texas  
Mrs. Rex C. Farmer, Hyden, Ky.  
Dr. Juanita Fleming, Lexington, Ky.  
Miss Margaret Gage, Los Angeles, Calif.  
Mrs. William A. Galbraith, Sewickley, Pa.  
Mrs. Robert S. Gawthrop, West Chester, Pa.  
Mrs. John L. Grandin, Jr., Chestnut Hills, Mass.  
Dr. Stuart Graves, Louisville, Ky.  
Mrs. Gus Griffin, Louisville, Ky.  
Dr. John W. Greene, Jr., Lexington, Ky.  
Dr. Charles E. Hagyard, Lexington, Ky.  
Mrs. Paul Church Harper, Lake Forest, Ill.  
Mr. Dwight Hendrix, Hyden, Ky.  
Mrs. Charles H. Hodges, Jr., Grosse Pointe, Mich.  
Mrs. John B. Hollister, Cincinnati, Ohio  
Mrs. James B. Holloway, Jr., Lexington, Ky.  
Mrs. T. N. Horn, Greenville, Miss.  
Mrs. Gilbert W. Humphrey, Chagrin Falls, Ohio  
Dr. Francis Hutchins, Berea, Ky.  
Mrs. David S. Ingalls, Cleveland, Ohio  
Mr. Melville H. Ireland, Lake Forest, Ill.  
Mr. R. W. P. Johnston, Lexington, Ky.  
Mrs. E. Donald Jones, Bellefontaine, Ohio  
Mrs. E. Felix Kloman, Washington, D. C.Mrs. Robert Ashton Lawrence, Westwood, Mass.  
Miss Betty Lester, Hyden, Ky.  
Miss Agnes Lewis, Maryville, Tenn.  
Mrs. Marion E. S. Lewis, Matamoras, Pa.  
Mrs. R. McAllister Lloyd, New York  
Mrs. Charles J. Lynn, Indianapolis, Ind.  
Miss Hope McCown, Ashland, Ky.  
Mr. Angus W. McDonald, Lexington, Ky.  
Mrs. Arthur B. McGraw, Grosse Pointe, Mich.  
Mr. J. Gibson McIlvain II, Devon, Pa.  
Mrs. Cleveland Marcum, Lexington, Ky.  
Mrs. Langdon Marvin, New York  
Mrs. Keith Merrill, Pride's Crossing, Mass.  
Mrs. Elinor M. Moore, Lexington, Ky.  
Mr. Clay L. Morton, Louisville, Ky.  
Hon. Thruston B. Morton, Louisville, Ky.  
Mrs. Robert F. Muhlhauser, Glendale, Ohio  
Mrs. Samuel E. Neel, McLean, Va.  
Mrs. Samuel H. Ordway, New York  
Mrs. Stanley D. Petter, Jr., Lexington, Ky.  
Mrs. P. B. Poe, Thomasville, Ga.  
Mrs. Charles S. Potter, Chicago, Ill.  
President National Society of Daughters of  
Colonial Wars  
Lady Ramsbotham, Hamilton, Bermuda  
(Honorary)  
Mrs. James N. Rawleigh, Jr., Harrods Creek, Ky.  
Mrs. William C. Robinson, Jr., Versailles, Ky.  
Mrs. William M. Schreiber, Louisville, Ky.  
Mrs. John Sherwin, Cleveland, Ohio  
Mrs. Seymour Siegel, New York  
Dr. Harvey Sloane, Louisville, Ky.  
Mr. Albert P. Smith, Jr., Russellville, Ky.  
Mrs. James W. Stites, Jr., Louisville, Ky.  
Dr. Grady Stumbo, Hindman, Ky.  
Mrs. Paul J. Vignos, Jr., Chagrin Falls, Ohio  
Dr. Patience White, Brookline, Mass.  
Mr. Arnold Whitridge, New York  
Mr. Ralph B. Williams, Boston, Mass.  
Mrs. George B. Wislocki, Little Compton, R. I.  
Mr. George Wooton, Hyden, Ky.  
Mrs. William W. Wotherspoon, Grosse Pointe, Mich.  
Mr. William T. Young, Lexington, Ky.



**NATIONAL MEDICAL COUNCIL**

- |   |   |
|---|---|
| Dr. W. F. Bulle, St. Louis, Mo.               | Dr. Rustin McIntosh, Tyringham, Mass.     |
| Dr. Bayard Carter, Hillsborough, N. C.        | Dr. E. D. Pellegrino, New Haven, Conn.    |
| Dr. C. L. Combs, Hazard, Ky.                  | Dr. John A. Petry, Louisville, Ky.        |
| Dr. R. Gordon Douglas, Little Compton, R. I.  | Dr. John Rock, Temple, N. H.              |
| Dr. Isadore Dyer, New Orleans, La.            | Dr. Richard M. Smith, Boston, Mass.       |
| Dr. Ben Eiseman, Englewood, Col.              | Dr. Reginald Smithwick, Boston, Mass.     |
| Dr. Laman A. Gray, Louisville, Ky.            | Dr. James E. Thompson, Sarasota, Fla.     |
| Dr. Louis M. Hellman, Washington, D. C.       | Dr. George W. Waterman, Providence, R. I. |
| Dr. Louise Hutchins, Berea, Ky.               | Dr. J. Huston Westover, Woodstock, Vt.    |
| Dr. Arthur H. Keeney, Louisville, Ky.         | Dr. John Whitridge, Jr., Baltimore, Md.   |
| Dr. John F. W. King, New York                 | Dr. Elwood L. Woolsey, Harlan, Ky.        |
| Dr. Samuel B. Kirkwood, North Sandwich, N. H. | Dr. Hermann A. Ziel, Jr., Lansing, Mich.  |

inclusive of

**MEDICAL ADVISORY COMMITTEE**

- |                                      |  |
|--------------------------------------|--|
| Dr. Marion G. Brown, Lexington, Ky.  | Dr. Carl M. Friesen, Lexington, Ky.        |
| Dr. Keith W. Cameron, Ary, Ky.       | Dr. John W. Greene, Jr., Lexington, Ky.    |
| Dr. Harvey Chenault, Lexington, Ky.  | Dr. James B. Holloway, Jr., Lexington, Ky. |
| Dr. Arnold B. Combs, Lexington, Ky.  | Dr. Coleman C. Johnston, Lexington, Ky.    |
| Dr. Allen L. Cornish, Lexington, Ky. | Dr. Edward H. Ray, Lexington, Ky.          |
| Dr. Carl Fortune, Lexington, Ky.     | Dr. Harold D. Rosenbaum, Lexington, Ky.    |
| Dr. Walter D. Frey, Lexington, Ky.   | Dr. David B. Stevens, Lexington, Ky.       |
| Dr. A. J. Whitehouse, Lexington, Ky. |  |

**NATIONAL NURSING COUNCIL**

- |   |                                       |
|---|---------------------------------------|
| Miss Maryellen Amato, Lexington, Ky.    | Dr. Ruth W. Lubic, New York           |
| Miss Lurette Beck, Brooklyn, N. Y.      | Dr. Beulah Miller, Ada, Okla.         |
| Miss Hazel Corbin, New York             | Miss Mary L. Mills, Washington, D. C. |
| Miss Naomi Deutsch, New Orleans, La.    | Mrs. Celia Oseasohn, Montreal, Canada |
| Miss Ruth Doran, Denver, Colo.          | Miss Carol Randall, Cleveland, Ohio   |
| Miss E. Jane Furnas, Phoenix, Ariz.     | Miss Ruth Spurrier, Frankfort, Ky.    |
| Miss Louise Griggs, Lexington, Ky.      | Miss Marion Strachan, New York        |
| Mrs. Elinore Hammond, Louisville, Ky.   | Dr. Helen Tirpak, New York            |
| Miss Elsie M. Warner, Philadelphia, Pa. |                                       |

## MARY BRECKINRIDGE HOSPITAL

### Medical and Dental Staff

Thomas Dean, M.D., A.B.F.P.,  
Medical Director  
Anne A. Wasson, M.D., A.B.F.P.,  
Chief of Special Services  
E. Fidelia Gilbert, M.D.  
Stephen Thorngate, M.D., F.A.C.S.  
David Coursin, M.D.  
G. Bradley Gascoigne III, M.D.  
Joseph A. Levine, D.D.S.

### Nursing Staff

Patricia Campbell, R.N., Hospital Nursing  
Care Coordinator  
Susan Albritton, R.N., A.A., C.N.M., F.N.,  
Assistant Nursing Care Coordinator—MTD  
Margaret Hamblin, R.N., A.A., Assistant  
Nursing Care Coordinator, Medical-  
Surgical Unit  
Bernadette Hart, R.N., C.N.M., Assistant  
Nursing Care Coordinator—Maternity  
Mary Weaver, R.N., A.D.N., C.N.M., F.N.,  
Assistant Nursing Care Coordinator—  
Primary Care Center

### Administrative and Supportive Services

Kenneth Palmer, M.B.A., Hospital  
Administrator  
Joe R. Lewis, R.Ph., Pharmacy  
Gary Worley, M.T. (ASCP), Laboratory  
Phillip Reppond, M.S.W., Social Work  
James Click, L.P.T., Physical Therapy  
Charles McCrady, R.T., X-Ray  
Virginia Roberts, Office Manager  
Betty Helen Couch, A.R.T., Medical Records  
Mae Campbell, Food Service Manager  
Lillie Campbell, Housekeeping

F.N. indicates nurses who have completed post-graduate education in Family Nursing  
C.F.N.P. indicates family nurses who have taken and passed the national certifying examinations.

## Director

W. B. R. Beasley, M.D., M.P.H., D.T.M. & H.,  
Hyden, Kentucky 41749

## Associate Director

### Director of Nursing

Evelyn M. Peck, R.N., M.A.  
Hyden, Kentucky 41749

## Administrative

Peggy G. Elmore, B.A., Administrative  
Assistant

Ron Hart, B.A., M.Div., M.R.E.,  
Administrative Assistant for Primary  
Care Administration

Mary Combs, Bookkeeper

Ann Browning, Billing Supervisor

Darrell Moore, B.A., Personnel

Ruth O. Morgan, Donor Secretary

## Frontier School of Midwifery and Family Nursing

Elsie Maier, R.N., M.S.N., C.N.M., C.F.N.C.,  
Dean and Director

Carolyn Miller, R.N., M.A., N.M., Nurse-  
Midwifery Education Coordinator

Christine Schenk, R.N., M.S., C.N.M.,  
C.F.N.P., Family Nurse Education  
Coordinator

Molly Lee, R.N., C.N.M., M.T.D., Assistant  
Director and Senior Nurse-Midwife

Ida Laserson, R.N., M.S., C.N.M., P.N.P.

Lillian Link, R.N., B.S., F.N.

Esther Seeley, R.N., M.N.

Carol Tracy, R.N., B.S.N., P.N.P.

Elaine Waters, R.N., M.S.N.

Karen Gordon, M.P.M., Research Assistant

## DISTRICT NURSING SERVICE

District Nursing Care Coordinator—  
Position Vacant

Nancy Williams, District Records

Jessie Preston Draper Memorial Nursing  
Center

Laura Pilotto, R.N., A.A., F.N.

Sharon D. Koser, R.N., B.S.N., C.F.N.P.

Clara Ford Nursing Center

Rita Miller, R.N., F.N.

Caroline Butler Atwood Memorial  
Nursing Center

Christina Guy, R.N., A.A., F.N.

Belle Barrett Hughitt Memorial Nursing  
Center

Wanda T. King, R.N., C.N.M.

Bob Fork District (Betty Lester Clinic)

Gail Alexander, R.N., A.A., F.N.

Jean Barker, R.N., F.N.

Oneida District

Mable R. Spell, R.N., C.N.M., F.N.,  
Assistant Director

Cynthia Sherwood, R.N., C.N.M., C.F.N.P.

## HOME HEALTH AGENCY

Karl Gorwoda, R.N., Nursing Care Coordinator

Mary Fuchs, R.N., B.S.N.

Janice Noren, R.N., B.S.N.

Dawn Osborn, R.N.

Elaine Berdan, R.N.



## FRONTIER NURSING SERVICE, Inc.

Its motto:

“He shall gather the lambs with his arm  
and carry them in his bosom, and shall  
gently lead those that are with young.”

Its object:

To safeguard the lives and health of mothers and children by providing and preparing trained nurse-midwives for rural areas in Kentucky and elsewhere, where there is inadequate medical service; to give skilled care to women in childbirth; to give nursing care to the sick of both sexes and all ages; to establish, own, maintain and operate hospitals, clinics, nursing centers, and midwifery training schools for graduate nurses; to educate the rural population in the laws of health, and parents in baby hygiene and child care; to provide expert social service, to obtain medical, dental and surgical services for those who need them at a price they can afford to pay; to ameliorate economic condition inimical to health and growth, and to conduct research towards that end; to do any and all other things in any way incident to, or connected with, these objects, and, in pursuit of them, to cooperate with individuals and with organizations, whether private, state or federal; and through the fulfillment of these aims to advance the cause of health, social welfare and economic independence in rural districts with the help of their own leading citizens.

Articles of Incorporation of the  
Frontier Nursing Service, Article III.

---

Contributions to Frontier Nursing Service, Inc. are tax deductible under Section 501 (c) (3) of the Internal Revenue Code of 1954.

---

Gifts of stock should be sent to

FRONTIER NURSING SERVICE  
Mr. Homer L. Drew, Treasurer  
First Security National Bank & Trust Co.  
One First Security Plaza  
Lexington, Kentucky 40507

Gifts of money should be made  
payable to

FRONTIER NURSING SERVICE  
and sent to  
Office of the Director  
Frontier Nursing Service  
Wendover, Kentucky 41775

## FORM OF BEQUEST

For the convenience of those who wish to remember the Frontier Nursing Service in their wills, this form of bequest is suggested:

"I hereby give, devise and bequeath the sum of ..... dollars (or property properly described) to the Frontier Nursing Service, a corporation organized under the laws of the State of Kentucky."

### HOW ENDOWMENT GIFTS MAY BE MADE

The following are some of the ways of making gifts to the Endowment Funds of the Frontier Nursing Service:

1. **By Specific Gift under Your Will.** You may leave outright a sum of money, specified securities, real property, or a fraction or percentage of your estate.

2. **By Gift of residue under Your Will.** You may leave all or a portion of your residuary estate to the Service.

3. **By Living Trust.** You may put property in trust and have the income paid to you or to any other person or persons for life and then have the income or the principal go to the Service.

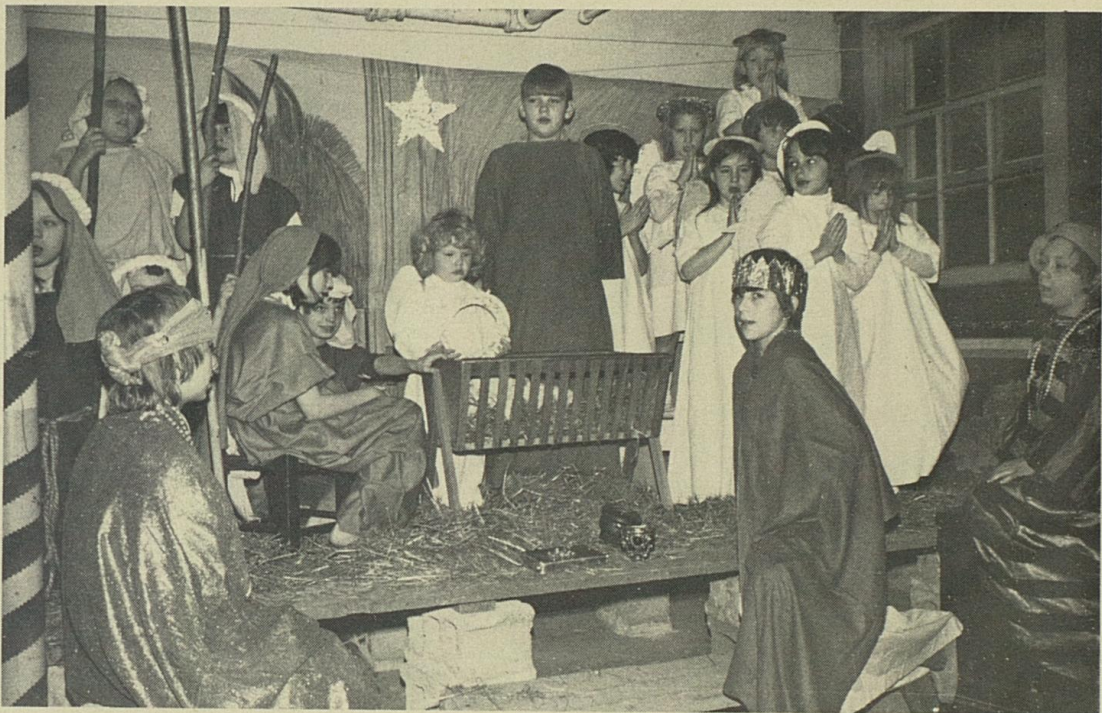
4. **By Life Insurance Trust.** You may put life insurance in trust and, after your death, have the income paid to your wife or to any other person for life, and then have the income or principal go to the Service.

5. **By Life Insurance.** You may have life insurance made payable direct to the Service.

6. **By Annuity.** The unconsumed portion of a refund annuity may be made payable to the Service.

. . . . .

The principal of the gifts will carry the donor's name unless other instructions are given. The income will be used for the work of the Service in the manner judged best by its Trustees.



THE CHRISTMAS PAGEANT AT WENDOVER, 1977

