

## # 22 Associate Degree Graduate 1972 (HCC)

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# 22 ADN Graduate (HCC)

Interview date: May 19, 2010

I went to school at Holyoke Community college. I graduated in 1972. Prior to that I had gone to Springfield Hospital School of Nursing but I flunked out of chemistry so I was lucky to be number ten on the waiting list and I got into the first class at Holyoke Community. And the reason I went into nursing was that you didn't have that many things to choose but either be a teacher, a nurse. I really wanted to be a hairdresser but my mother said that's too much on your feet. So I chose nursing.. I was always the caretaker in the family. I was the first daughter. So I was always the one they sent out to take care of people. So it was kind of an assignment I think now that I look back but I did enjoy it. My first job was at Brightside, rocking the babies and that's how when I was fourteen I got into the Sisters of Providence, doing that: rocking the babies. I was a nurse's aide at Providence and it just kept going and going. I wanted to be a nurse, as I watched those beautiful nurses with the birdcage hats. I really wasn't very good student so they told me I could never be a nurse in High school. I could be an LPN but not an RN. I really wasn't a good student, so. I didn't take all the courses I needed to become an RN but I managed some way to get into nursing school taking extra things but my marks were basically not good. C's in the college course and then when they dropped me down to some other course... basically just C's, just barely kind of making it. And then I got into Springfield Hospital. I applied to a lot of schools. I applied to Mercy Hospital. As a baby I had that vaccinia, so they didn't accept me there. I didn't get accepted at St. Francis for... maybe because I was at the low end of the grades. But I got into Springfield Hospital School of Nursing and I don't know why that was but I got accepted there and started out and it was really difficult for me. It was a struggle to do all the nursing things you had to do and back then, it wasn't nursing school, it was charm, and personality, swimming class you had to do all the extra things along with the nursing studies and stay at the hospital and they really worked you

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hard at the hospital, you know, going on the units. you really lived there and you really worked a lot.

*(Did you have any courses?)*

Yes, We had somebody coming from Springfield College that did A and P, chemistry, you know, the school of nursing... But I really didn't make it very long in the hospital. I think it was December my dad came and got me on Christmas Eve. I got the first mark. F: Chemistry. So then I went back to being a nurse's aide and I was really frustrated and sad that I wanted to be a nurse. A very depressed time but I was taking courses at Holyoke Community. Took all of the general courses and then I got into the first class of the school of nursing by accident, by number ten on the waiting list and they called me and I was so excited that when I went back my marks were great.

*(Wonderful! You said you were in the first class. Can you tell me just a little bit I'd like to know more about how the courses went and what you had to do as far as theory and what you had to do as far as practical and how they introduced because you were the first class.)*

We did our... the clinical was at Providence Hospital and I had Sister Mary H. The sisters came from the Providence Hospital three year program and they had just closed the three year program to began the two year Holyoke community college program. I had Sister...

*(Providence at that time was full service?)*

Yes. It was a medical hospital then. And I had Sister Marita C. so she must have come over from the Providence...

Sister Mary H. and Sister Marita C. were the two instructors I remember the most. But we would go to Providence and it wasn't as much work on the floor...[as] Springfield Hospital's 3 year program. I remember going to Providence and having

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to interview patients. The Providence Hospital's 3 year diploma nurses.. They needed help on the floor "what do they think they're doing; these book nurses here they come". And they were really angry, "I don't know what she's doing; all she did is sit and talk to that patient." And I remember that as being part of my experience. I remember going to Leeds with Sister Marita and a little bit at Springfield Hospital I think the pediatrics we did there. But it was nothing like the diploma program when you really lived there and you didn't leave the hospital and the work was much harder.

*(How long were you on the clinical unit compared with how long you were on a clinical unit at Springfield?)*

I can't really remember much but it was like probably a a quarter of the time I think I would say. Not very much.

*(How about the instructors? were they on the units with you?)*

Oh yes, I remember that. And you know, like I do remember that they were there with us.. I remember doing quite a few first time procedures with them watching. The watched every single thing that you did. I don't want to compare it to now, but when I see students the instructors are not with them and they're set free on my floor. I don't know if it's just Providence but it's not like it was. They didn't let you out of their sight. The instructor watched every single thing really that you did.

*(How did you feel about that?)*

Of course you're intimidated by... oh God, depending on the personality of the instructor too. When you're being reamed out for not knowing some medication and you're being questioned in front of the patient. It's kind of a bullying thing, but neither Sister Marita nor Sister Mary H' did that -- there were other instructors there that I've probably put out of my mind and don't ever want to remember their names, but it was that kind of thing. Back then there was a lot of shaming and the

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doctor was put up on this pedestal. It was a different training things are now. You know what I mean.

I remember doing quite a few procedures with the instructor right there with me. Catheterizations: I remember look for the star (laughs) You know what I mean. And every single procedure the instructor was watching you... I remember learning IVs after I was out of nursing school.

*(Talking about procedures, did they have any clinical labs at that time at the school to go through the procedure with you? How was it taught?)*

Yes. I don't remember much but I think we must have had that doll, Annie or; a couple maybe two of them. We had visual aids because I remember there was the biology instructor but that was just biology, it wasn't on how to do a procedure. And I got so nervous in the practical exam when you had to identify parts of something. I don't know, I think I identified the ear as part of the vagina or something I got so nervous because I was so intimidated in having to perform in front of the instructor.. and later on he had eye surgery and he said "keep that one away from me." cause we went to visit him and ... I couldn't learn if someone was watching me. That's how I felt. I was very intimidated by that.

I know we had clinical I don't remember it being as traumatic like Springfield Hospital we had to wash each other up. Take your clothes off and we had to give each other a bath. We didn't try shots on each other except we did try to stick our finger for blood and I think I was the last one in there because I couldn't do it.

*(How did you learn to give an injection then?)*

An orange. We had the orange.

*(Was that at Springfield or at Holyoke?)*

Holyoke Community was an orange. And an alcohol wipe and an orange.

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*(That's interesting.)*

That's what I remember. And I think she watched us do it the first time in the hospital. I don't think it was on each other, I think it was on a patient. And I remember being scared...

*(How did they teach you how to find the site?)*

Probably on Annie

*(Did they teach that on humans or...)*

Probably both you know.

*(Did they have any audio visual like ? or anything...)*

I think overheads. Boring overhead things with you know that they read from the book and probably the overhead thing.

*(How do you remember the classes?)*

Med surg was boring but the clinical wasn't My marks were good but I don't remember being too excited about going to class.

*(Interesting.)*

*( Were you more excited on the unit?) yes*

On the unit. Definitely on the unit.

*(Did you have a separate course for maternal child health?)*

Yes we did.

*(Was Providence delivering at that point?)*

. Yes. And we did our OB there. And I remember they let me come out and tell somebody that a baby was born. I remember that being a wonderful thing.

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*(You enjoyed that?)*

Yes.

*(Did you work in the nursery at all?)*

No. I never did. That's one thing I probably would have liked to have done in my career.

*(Since you worked at Brightside...)*

Yea but I didn't.

*(How about pediatrics?)*

Pediatrics... we did our pedes at Springfield Hospital and I know I found it distressing.

*(How so?)*

Because I had think I had a baby that I had to rock, or a little young boy with cancer and a big belly and he was just dying and that was my experience that I thought it took too much I couldn't and I was just real sad and that's what I remember. And they had those tents back then.

*(Oxygen?)*

Yea. And I remember that. I found that pretty distressing and said I would never work with kids but then I did ten years of child psych after, but it was different that way, you know not, not.... I find it hard to be with children. It's hard.

*(Many people do. At the time you were there, did Providence have their behavioral health?)*

No.

*(Which is interesting because the hospital is all behavioral health.)*

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I got laid off from the med surg hospital. And that's how and I got called back for behavioral health. Prior to that...

*(Can we go back. Where did you go for behavioral health experience?)*

From Holyoke Community?

*(Yes.)*

Sister Marita took us to Leeds. And back then I mean I just remember her staring and looking at me in my eyes and I was so self conscious I just couldn't look her in the eyes. But today when I see her in the lobby, I look her right in the eyes and can talk to her but now I know it was a self esteem type of thing. I remember her being my teacher and she's special.

*(I personally have talked to her too. She is special.)*

She's a very special person. We went to Leeds and I said of course I didn't want to work with any alcoholics because I knew everything about it because in my family, on both sides of my family there were aunts and uncles and this and that. So she put me in the schizophrenic ward with people and I remember somebody gave me a present and he had stolen it from somebody and he set me up that way. But I thought I knew everything then about it but I didn't know one thing. When you think you know everything because you're in it, but you don't know a thing. I'm in substance abuse now.

Looking back, it was a good experience at Leeds. We used to take the people that were blind out to eat. It was different back then, for a steak and fries. I think that was a good experience. Leeds and...

*(You're talking about the VA hospital?)*

Yea, the VA hospital. That's where they went for the psych.

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*(Let's go back. Could you share your experiences when you first graduated: where you went to work and how you felt when you went into your first job?)*

When I went into my first job it was at Mass General. And I was completely overwhelmed. I didn't have a clue. So here I had seven patients and one of them was a hockey player and of course you know what I mean. I don't want to use the name but it could have been <name withheld> or some big huge thing and you'd go in there and here's a young woman and you're going to take care of this famous hockey player and I was supposed to get vital signs every fifteen minutes. Well he was washed up pretty good but there were no vital signs to take! I probably got a couple of them but I was just overwhelmed. We had seven patients and it was a cardiovascular unit. They just threw you to the wolves.

*(Did you get any orientation?)*

I'm pretty sure I did but to get it and to do it are two different things. But I wasn't ready. I didn't have a clue. I struggled that first year. I lived on Beacon Hill, partied all night and came to work in the morning. And it was... I moved home after a couple of years because I had no money I had nothing left. It was a good time...

*(You had a good time?)*

No. Not really. No. Eaten alive by the hospital. You trust people. I was brought up in Holyoke in a small area right by Providence Hospital. So I went right back to Providence Hospital to work. And I had been a nurse's aide and got hired right away to be an assistant head nurse, which I had no business doing. And got eaten alive that way too. And decided I'd never take another management job in my life. It was like eight years and that was the end of it, you know. But I had to tell friends of mine what to do and I wasn't prepared for that either. Plus the diploma students and the associate students kind of didn't care for me at all. Like what does she think she knows, you know. They really.... I'm not complaining, but the way it is today I don't think... it was always said nurses eat their young. They really did. You

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cannot bully people like we were bullied back then. And it was bullying. Each other, you know. It's like... It just was rough, you know.

*(So then what happened?)*

So I did that for... I was an assistant head nurse I think for eight years and then somebody said come and work in ICU cause I was sick of it and I said OK. And they said we need two positions so ask your friend -- this other nurse -- so I did and she got the position and I didn't because they said I hadn't resigned my position as assistant head nurse because the position I had nobody wanted; it was hard to fill. I believe that was the reason.

So I acted hastily and quit. 'Went and did dialysis at the Western Mass kidney center for six years and then I worked at the Teamsters doing physicals and I worked at Providence still like per diem. After leaving I came back and did that. I was always still kind of... Providence was like home to me. I felt a connection there. And so I did the med surg for a while I worked on the telemetry unit; step down unit when I came back. Then it opened up...

I had my kids. I had two children. I stopped doing dialysis when they were like three or four or something, and went back to the hospital and I did something called first step. It was adolescent substance abuse. The medical hospital got a grant for substance abuse for teenagers and I wanted to try something like that and I went up there and it was the best job I ever had I think. And they lost the grant and that closed. Then the hospital closed and I got transferred to child psych so...

*(Transferred to child psych?)*

When it opened as a behavioral hospital they called all the medical nurses back and that's how we got the psych job because we were in the union and that's how we got called back.

*(Did you get any special orientation when you switched from.... no)*

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No. No, no, no and no. And it's just like everything else that as in that system. I remember even when I worked in telemetry reading a book as the strip came out to try to figure out what medicine to give and eating the inside of my mouth because I was so afraid I was going to give the wrong medication. Being in such fear that the next day the doctor would come in and say well I wouldn't have given that for that. But we'd run over to ICU with the strip and ask questions.

Well we had the course but you know to have the course and to go... it was like learn on the job. We had the course, probably a little course. But it was back then... I think you kind of learned a little bit from your peers and your elders as time went on.

*(Do you see any difference now in the way people are brought into the system? Has it improved is what I'm saying.)*

We just had a new nurse and... where did she come from? I'm not even sure. What school was it? But she was right up on things. Excellent nurse. We really don't have that many new nurses that I see. Rather I see students on the unit and I see them left to fend for themselves.

*(These students are coming from where?)*

AIC, UMass, Holyoke Community College students of course are not left because they are my special students (laughs) No, they don't have the instructor bird dogging them like I used to have; they're left. You know what I mean, Like okay C., I'm going to leave you these two. Maybe because they know me and I'm going to precept them but they don't do anything like we used to do. They just watch me, they don't do a thing. They just observe and write whatever they have to write. Interview a patient. Every once and a while they may come in the med room with me but I have like 30 patients and its real quick.

*(They don't give medications?)*

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No.

*(Did you give medications?)*

Oh yes. When I was a student I definitely gave medications.

*(By the way, did you have a medication course at all?)*

I remember that, yea; pharmaceutical course. Yea. It was like, you know. It was definitely different back then with the pill bottles and the...

*(Do any of the students give meds or do anything?)*

Not on the behavioral health they don't. They just come and kind of observe us. On CHAD, I was on Chad, the child adolescent unit. I was on that for ten years. And it's pretty scary for students to come and see that sort of thing -- restraining children and this and that. And you know you can't just walk into something like that

*(This is true.)*

... and they're fearful, I don't know. It's taken out of context what people do. It's easy for you to come in and just look at things as a student. But when you're working there and you know the kidding and you know what goes on, you know, it's not like it should be you know what I mean all the time. I found... at the end it was enough. Ten years, I couldn't do restraints any more. I'd get the shot and I'd be shaking you know. Child psych can really be misunderstood if they don't know the child if you know what I mean and what's going on. They just come in from the outside and observe and go and report and but they really don't know, like I heard back from somebody that was a student that they thought we were a bunch of losers, or whatever like a student had reported that we didn't know what we were doing. But they weren't in on it. They didn't know what led up to it, or they would have handled it different, and they probably would have if they had just that child, but when you have to keep the whole milieu safe, things are different.

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*(Different because...?)*

You're short staffed, you have the whole place to look out for. It's not ideal. There's never enough help to do... there's just never enough help, especially today.

*(How about where you are now?)*

It's disgusting because there's never enough help. It's going to get better they keep saying; they're going to hire another nurse. But it's pretty unsafe.

*(You're on...?)*

I'm on a detox unit. And you know I just so from seven to ten in the morning I pass my medications. I don't even come up for air. And you do these assessments for alcoholics and opiate you know. There are assessments and you have to do there's like ten or twelve questions on each thing and you can't even spend five minutes you have you start your eight o'clock meds about a quarter of eight and it goes to ten and I have to go right to team. I you don't even have time to go to the bathroom and you have to present everything to the team. You come back and you have time for your twelve o'clock. There's two nurses on the floor today

*(How many patients?)*

Thirty. In the meantime the other nurse is doing admissions. It's like the bed and breakfast. Gotta keep them rolling: discharges and admissions. And there's me. Somebody comes in at eleven thirty and does admissions, but we've been short so it's basically and the potential for errors is scary because we still have the old MAR's from the 70s, like the sheets; the old, can't read each other's writing, the little boxes, can't read the doctor's writing, can't read your own writing the next day. And you're very short. You have to be short with the patients there's just no time. You have to get them medicated. But to go out and see how the patient's doing after the medication - impossible cause you have such a load. So I have to send an aide to check on them. You try to get out there but... the patient load is just too

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much. But I do get to look in their eyes like Sister Marita taught me. I get to do that.

One thing I'll mention, when my brother in law was in hospital what I noticed, this was Holyoke Hospital, everybody was so involved like with his pump and this and that but they didn't see he was going bad right in front of my own eyes. And I could see that and he ended up coding and went into respiratory arrest but he was so concerned about the morphine pump and this pump and IVs and no one it was just a bad, bad experience. If they had just looked at the patient and I just see that's missing today in nursing care. You know what I mean. My brother in law he had stage three cancer so but he's alright now but it was he had an ileus so he just filled up but nobody picked it up or anything everybody was saying well this pump at this he should be pain free. It was one of those where he could give himself.... it wasn't working right but they... everything they come in they weren't oriented to the machines, they got the booklet there, it reminded me of B and F. It made me feel like I was home!

Then they put his levane tubing in and the student says to me "thank you so much this was the first one I've ever seen" you know coming out. Thank you. We were so distressed at that point. Get her out of here you know.

Today I don't see the instructors with the students on the unit. But I don't have the opportunity to see the med surg part. I only see the substance abuse and they're very fearful when they come on the unit. Who wants that, you know.

*(All in all at this point, have you noticed any changes within you know, the program you had. Have you talked with recent graduates to see how they're feeling?)*

I'm telling you, we have one girl who's just graduating today but she's a mental health councilor. She's a student now. She's so excited and she just says how she's had patients recently and didn't realized what we did and how hard we worked. She has great respect for nurses now after knowing exactly what we do.

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*(And how does she feel about the program?)*

I don't know. I know she's thrilled. It was hard work. I don't know. She's getting some award so she must be one of the shining stars.

*(is she going into mental health?)*

I'm not sure. They say you should spend a couple of years in med surg so that's what I think they're encouraging her to do but I don't know what her plans are. I think today if you can get a job you're lucky.

*(Is it that hard?)*

I think that's what they say. They say there's nothing out there.

*(That's interesting. You're short staffed but there's nothing out there.)*

That's what I hear though. I hear... because we've had a lot of people leaving our unit because it was so crazy and hectic and they felt it was unsafe. And they say there's nothing out there at all. I don't really know what really going on in psych. There's a lot of changes, like the detox at Baystate was bought out but something like they pay less money So Baystate doesn't have that detox. Carson was bought out by somebody...

*(Really?!)*

Yea. A couple people that I know work for the Institute of Living in Hartford and they're very happy there. They say it's professional it's..

*(I've heard very, very good things about the Institute of Living and some are students there.)*

They say it's wonderful. That's what I hear. I think Providence really isn't a teaching hospital and we're short staffed and you can't really... you'd like to teach, but when... I have two students that come on the floor or... You don't just have two students, you have students from U Mass, there's students from Elms, there's

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students from you know, Holyoke Community maybe... all at the same time and you can't... you have two computers they're there to print us out the medicine list and you're like, "I can't I have to put my orders in you can't get snappy, you get short. And you say, what if someone treated me that way. There's resentment because the nurses don't get paid to mentor somebody so there's all that kind of... where's their instructor? How come they're not helping them? They should be here". But they can't be everywhere like they'll leave two upstairs, two on this floor, two here and you keep checking in on everybody. It seems like... I don't know. We were in one big group. We weren't really left. I don't remember her leaving us. We had a different care then. We were washing, scrubbing...

*(Even in Psych?)*

No, not in psych. But in med surge back then. I don't know what they do in med surg today, but in psych, we were left but... we had a project to do to, you know what I mean. I had to write a book on that man that she assigned me to. Case studies, that's what we did.

It seemed to me that there were.. . I don't even know the instructors but they were more attentive or able... I don't know if classes have gotten bigger. I just don't know...

*(What the problem is.)*

Yea.

*(It's interesting what you said in that I hear that we need more nurses, we need more faculty, but I'm hearing from you that there aren't the jobs there and I haven't explored it to find out...)*

I hear they don't pay in human services. The pay isn't there. I don't know about... even in med surg the new graduates come out and "oh we'll be lucky to get a job anywhere, like the two graduates I'm with, well there's three of them and God, if

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you can get a job today you're really lucky: that's what they say. And I haven't stopped long enough to look but you know it's coming to the point where you know you need to make a change and do something that... but when you've been someplace for all those years, it's hard to break away. I'm just starting to cut my hours to three days and try to do something to take care of myself because that's part of what's gone.

*(OK. Are there any other things you want to share about your experience at Holyoke Community College; anything that sticks out in your mind?)*

We stuck together; the first class. The sisters, Sister Mary H. took me up to the convent and helped me study so that I passed my boards so I passed my boards. I wasn't good with the multiple choice tests, but she gave me the one-on-one personal touch that I needed to get me through it. She was there for me. She just went above and beyond just to, to make... for somebody to do that for somebody, I will be forever grateful.

*(laughs. I'm sorry I...)*

I mean I just remember that I remember going to somebody's kitchen. There'd be five of us trying to learn the heart chambers and this and that. We were all together. We did everything together. And then when we got through it, you know what I mean. I don't know how many of us graduated; not all of us did, but... we were a tight group back then, the first class.

*(Did you have any ceremonies like pinning ceremonies then and the cap?)*

Yes. We had the capping; pinning - I don't remember the pinning. I remember the capping in the chapel at Providence Hospital. And I have some pictures from that and it was the President Frost who was there. Two of the college and it was the first class. I have some beautiful pictures. The chapel is no longer a chapel, it's a gymnasium for the kids so you know what I mean when I go in there, there are a lot of memories of Providence Hospital for me. And we graduated up in Northampton, I

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don't remember the name of the auditorium by Smith College. That's where we graduated back then.

*(Smith College?)*

Yea. Nice little auditorium up there. Because Holyoke Community college was like five different buildings back then.

*(Oh. Where was this?)*

It was on Elmwood; on Elmwood. We had to drive down the street. You had to jump all over Holyoke. Drive to different places; through the Dingle, around the ... you know what I mean. There was a restaurant right there called Emily and Jenny's where I hung out during my break. Everyone went to Emily and Jenny's and it was... where Holyoke High School is now there were two buildings that were Holyoke Community College, then there was one way up on Elmwood.

*(And you went to all the different buildings?)*

Yea. You might have the first class in one building, the second class you'd have to drive down and get to another building. And then some days you'd go to Emily and Jenny's all day and eat (laughs). It was fun. It was like that. I think it's the John McCue building or the Ann McCue building was part of the Holyoke Community College back then too. And the big yellow building down there on Appleton street or whatever it is; what's the street, I don't even know, but it was all over. It wasn't beautiful Holyoke Community. When I went there the other night, they've even added other buildings... it's beautiful.

*(Well. Anything else you would like to add?)*

No. My Holyoke Community College education was you know enabled me to just do loads of things. I've had so many different... If you're a nurse you can do anything you want. You can work with the elderly, you can do mental health and when you're sick of it you just move to something else. And I have only my two year degree but

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for me, it's you know in hard times it's kept my family... at times when my husband was laid off there was always something for the nurse and when you're sick of something you can always change and do something else. And to me it's been good to me and Thank God for Holyoke Community.

*(Have you thought of ever going on and getting another degree?)*

Not at this time. What I want to do is something like holistic... I thought of becoming a holistic nurse but I've changed my mind. My kids are 27 and 25 and then they went to school. Right now I just want to be and just I'm learning like the Bock flower remedies were emotions cause illness and that's my interest right now. I want to become certified and just kind of do something like that. It won't pay for the groceries you know, but just work a couple of days if I can still work a couple of days when I get older and do something like have a hobby, you know.

I think when you're a nurse, you put everybody else first and you have trouble owning yourself in some ways, you know what I mean? You don't take time for yourself and that's what I'd to do in my later years -- just be quiet enough because there's just such racing in my job in what we do I think It's always been like that, like who can you take care of next. When you're quiet you don't feel comfortable when you're with yourself. It's like your looking for someone else to take care of.

*(You need to take care of yourself.)*

Yea.

End