CHARTING A NEW COURSE

1967-79
Babies need nurses too, 1969
CHARTING A NEW COURSE

The woman who was to become the third Director of the School of Nursing, in its Golden Anniversary year, was firmly established in the nursing profession. In 1966 she was the highly respected Director of the Baccalaureate and Higher Degree Programs of the National League for Nursing (NLN) in New York City.

Dr. Rena E. Boyle, a native of Chicago, Illinois claimed that she never really wanted to be a nurse. She yearned to be a teacher, but "it was the Depression and the only thing I could afford to be was a nurse." She had earned a diploma in nursing from the Methodist Hospital School of Nursing in Peoria, Illinois, in 1938. Her love for teaching led her to the University of Minnesota where she earned a baccalaureate degree in nursing education (1941), a Master of Arts in Educational Psychology (1946), and a Ph.D. in Clinical Psychology and Higher Education (1953).

As Director of Student Teaching in Nursing at the University of Minnesota from 1943 to 1954 she was able to combine both careers — nursing and teaching. After leaving Minnesota she served as a nurse consultant with the International Cooperating Administration in Haiti and Guatemala. From 1956 to 1961 she was Chief of Research and Consultation, Division of Nursing Resources, U.S. Public Health Service in Washington, D.C.; in 1961 she joined the staff of the NLN.
It was in the NLN offices where Dr. Boyle first met Dr. Cecil L. Wittson, then Dean of the College of Medicine at the University of Nebraska. Dean Wittson had said he wanted "the best in the country" as the new Director for the School of Nursing. His trip to the NLN headquarters and his meeting with Dr. Boyle convinced him that he had found the right person and he invited her to visit the University. Dr. Boyle’s decision to leave the NLN was based on her desire to return to a school of nursing. She was nearly ready to accept the position of Chairman of the Graduate Program at the University of Indiana, but decided to keep her commitment to visit Omaha.

Just as she had not had aspirations of being a nurse, she had always thought that she would never be a dean. "I loved to teach. I had worked with beginning students and with student teachers at Minnesota. And even as a consultant... I always did a great deal of teaching. But once I had been at the League... I realized that if you wanted to change some things in nursing, you almost had to be in an administrative position. You couldn’t just be a faculty member. It was at that time that I began looking for positions for deans."

When the rumor spread on campus that Dean Wittson was courting such a well-known and respected nurse educator, the response was "You’ll never get Rena Boyle!" Always known as a very persuasive man, Dean Wittson did indeed hire Dr. Boyle and on April 1, 1967, she began her appointment as Associate Dean for Nursing and Director of the School of Nursing.

What did Dr. Boyle like about Nebraska? "First of all, it was the midwest, and home for me is the midwest. It had a small program, it was accredited, and it was only one program. I wanted no part of these huge programs." It was in fact a small program, with 79 students studying for the only degree offered — the BSN — and 20 faculty. It was not a Dean’s position since the School of Nursing was administratively a department of the College of Medicine, as it had been since 1917.

The growth of the School in the next 12 years would surpass anything that had happened in its first 50 years. The School would become known nationally as an innovator in nursing education. Much of the credit for this growth goes to Dr. Boyle for her strong leadership, creativity, and risk-taking, but she in turn would always give credit to the students, faculty, alumni, university administrators, Board of Regents, the State Legislature, and the citizens of the state for their loyalty and support.

Dr. Boyle had hardly settled into her new position when a major university administrative re-organization occurred. Prior to 1968 the Medical Center campus was administratively part of the University of
Nebraska in Lincoln. In 1968 the Municipal University of Omaha was added to the system and the Medical Center became a semi-autonomous unit of the University system, which now had 3 campuses — the University of Nebraska-Lincoln (UN-L), the University of Nebraska at Omaha (UNO), and the University of Nebraska Medical Center (UNMC).

Dr. Wittson was appointed President of UNMC, Dr. Robert B. Kugel became Dean of the College of Medicine, and Dr. Boyle was named Dean of the School of Nursing. Dean Boyle now reported directly to the President of the Medical Center. (The title of the chief administrative officer of each of the three campuses was changed from President to Chancellor in 1971). This was a significant event in that the School of Nursing was no longer under the control of the College of Medicine.

Merger of University of Omaha and Medical Center Nursing Programs

In the months preceding the merger of the University of Omaha with the Nebraska system an immediate concern arose regarding the nursing program offered at the University of Omaha. This university had offered a non-accredited program leading to the Bachelor of Science in Nursing (BSN) degree to registered nurses for many years. University administrators insisted that the University offer one accredited baccalaureate nursing program. Task forces composed of representatives from UNO and UNMC were formed and plans were made to phase out the program at UNO. Registered nurses enrolled in that program could finish within a specified time or enroll in the nursing program at UNMC. Despite some opposition from nurses enrolled in the UNO program, the merger went smoothly. No nursing courses were offered at UNO after the 1968-69 school year.

Dorothy Patach, RN, MS, a 1944 graduate of the School of Nursing, who had directed and taught in the University of Omaha program, retained her faculty appointment at UNO and was later given a joint appointment in the School of Nursing. In the years since the merger she has provided counseling services for nursing students enrolled in classes at UNO and has served as the nursing liaison between the two campuses.

The Graduate Program and Nursing Care Research Center

One of Dr. Wittson’s questions to Dr. Boyle soon after her arrival was related to a master’s program in nursing. Dr. Boyle assured him
that she would not even think of it for the first year until she knew
that the faculty was ready.5 Ready or not, planning for the graduate
program leading to the Master of Science in Nursing degree began in
1968. The need for this program was great since no program existed
in Nebraska to prepare nurses for leadership positions in nursing ser-
vice, for teaching positions in schools of nursing, and as clinical
nurse specialists.

The Nebraska Nurses’ Association and the Nebraska State Medical
Association both passed resolutions supporting the need for a
graduate program in nursing. The Nebraska Hospital Association
also urged that “…training at the graduate level be initiated at the
earliest possible date.”

A committee of eight nursing faculty members was charged with
the task of developing the master’s curriculum. Budgetary support
was made available by Dr. Wittson. Meetings were held with Direc-
tors of Nursing Service, and department heads and deans from the
Lincoln and Omaha campuses to secure suggestions in developing
and implementing the program.6

The curriculum proposal was approved by the Graduate Council in
May, 1969, and by the Board of Regents in September, 1969.
Reasonable assurance of NLN accreditation was also granted in
September, 1969. With this preliminary approval, students were ad-

First M.S.N. graduates, 1971
mitted for enrollment in non-nursing courses in the fall of 1969. In the fall of 1970 students were enrolled in graduate nursing courses in Medical-Surgical and Psychiatric-Mental Health Nursing for the first time. Ann Lallman and Sharon Swift Rife ’58 were the first to complete the program and received their degrees in December of 1971.

The Master in Psychiatric Nursing (MPN) program, established in 1954 under the direction of Theresa Muller, was discontinued shortly after the MSN program became operational. Students already enrolled were allowed to complete the requirements for the MPN degree; 23 nurses had been graduated from this program since its beginning.

The purpose of the graduate program in the early 1970’s was to prepare clinical nurse specialists in Medical-Surgical and Psychiatric-Mental Health Nursing. As defined by the faculty, the clinical specialist:
1. Demonstrates expert and direct nursing in the care of selected client(s) at prescribed periods in a variety of settings within the institution and community.
2. Counsels, guides, and serves as a resource person for nursing associates assigned to client(s) under her management.
3. Collaborates and consults with nursing colleagues and other clinical associates in behalf of certain client(s) and their plan of total care.
4. Innovates, initiates change, and sets the subsequent standards relevant to nursing in a given setting.
5. Contributes to the expansion of nursing knowledge by: (1) formulating concepts and identifying problems that require the application of systematic methods; and, (2) evaluating the usefulness of selected conceptual models for the practice of nursing.

The master’s programs were planned to enable graduate students to:
1. Acquire increasing competence in formulating and analyzing nursing diagnoses, developing plans of action, instituting needed intervention and in evaluating progress of the client.
2. Acquire advanced knowledge and skills in a specialized area of nursing and related disciplines.
3. Foster an attitude of continued independent and scholarly study of nursing by developing beginning competence in research.
4. Extrapolate the major issues confronting nursing and related health professions.

Students applying for admission to the graduate program were required to have earned a bachelor’s degree from an approved college or university and completed an undergraduate program equivalent to that offered at the University of Nebraska.
The graduate faculty in these beginning years was small. Jeannene Kenney RN, Ph.D. (later Mrs. Ralph Boosingher), taught the Medical-Surgical component, and Marjorie Hook '40, RN, Ed.D. (later Mrs. John Gedgoud) taught Psychiatric-Mental Health. Martha Brown, RN, Ph.D., Director of the Nursing Care Research Center, taught the research component of the program and a gerontologic nursing course. Dean Boyle taught a course titled Dimensions of Professional Nursing.10

Post-Master’s courses in teaching were offered for the first time in Spring, 1972, and were taught by Melba Leichsenring, RN, Ed.D. These courses were not an integral part of the master’s program based on the faculty’s belief that a professional practitioner must complete the clinical specialization requirements before preparing for teaching and administration of nursing services.11 Post-Master’s courses in nursing service administration were offered in 1973-74 under Nancy Dodge, RN, Ed.D., who was Chief Nurse of the Nebraska Psychiatric Institute and an Associate Professor in the College of Nursing.12

The Nursing Care Research Center (NCRC) was closely aligned with the graduate program due to the emphasis on research in the master’s degree curriculum. Master’s students were required to plan and conduct a research project under the guidance of a faculty member. Assistance was provided by the NCRC which was established in 1968 as the first state supported nursing research center in the nation under the leadership of Dr. Martha Brown. Dr. Brown came to the University in 1968 from the Washington University School of Nursing in St. Louis, where she had served as Dean and Professor of Nursing for seven years. Dr. Brown taught the nursing research courses, advised students in their research activity, and continued her own research focused on gerontologic clients. She served as Chairman of the Graduate Committee from 1970-74 and performed many of the administrative duties of the Chairman of the Graduate Program, although she never officially held the latter title. Dr. Brown’s educational and experiential background put both the graduate program and the NCRC activities on firm footing in the early 1970’s.

As the graduate student enrollment increased and administrative duties became more time consuming, Dean Boyle recruited Sr. Patricia J. Miller, RN, Ph.D. to serve as Chairman of the program. Dr. Miller had earned a diploma in nursing from St. Joseph Hospital in Omaha and degrees from Creighton University (BSN), Catholic University (MSN), and the University of Iowa (Ph.D.). A native Nebraskan, she returned to her home state in 1974 with considerable
experience in nursing; she had taught at St. Joseph’s Hospital in Omaha, St. Joseph’s Hospital in Ottumwa, Iowa, the University of Iowa, and Marycrest College in Iowa. Dr. Miller’s affiliation with the Congregation of the Sisters of Humility of Mary, based in Davenport, Iowa, caused some concern for students enrolled in the master’s program in 1974. “What do we call her — Sister or Doctor?” Had she been attired in the habit of a nun the answer would have been simple, but she had adopted lay dress, as had other religious orders. The problem was quickly solved when a courageous student asked the question; Dr. Miller replied that she answered to either title. On informal occasions she soon became “Sister Pat.”

Two additional nursing majors were developed soon after Dr. Miller’s arrival. The Maternal-Child Nursing major, chaired by Dr. Janice Rustia, admitted students in the fall of 1975; the Community Health Nursing major admitted its first students in the fall of 1976 under the leadership of Dr. Marjorie Corrigan.13

A review of the master’s program in 1975 resulted in a revision of objectives and program content. The faculty recognized the great need for prepared teachers and administrators and voted to include this preparation in the master’s program, rather than at the post-master’s level. Students admitted in 1977 could choose courses to prepare them for roles in nursing service administration, teaching in schools of nursing, or clinical specialization.14 Enrollment continued to increase and in 1977 total enrollment was 98 (39 full-time, 59 part-time.) The typical student was a 25- to 29-year-old married woman with no children, who was employed as a teacher in a school of nursing.15 Twelve faculty members were teaching in the graduate program; faculty members were becoming more involved in research related to their own interests under the tutelage of Dr. Brown and Dr. Miller.

**The Undergraduate Program**

The four-year BSN program was well established when Dr. Boyle arrived in 1967. The reputation of the School for providing a quality education in nursing was well known; the number of qualified applicants greatly exceeded the number who could be admitted, due to physical limitations and available faculty. The number of students admitted had increased from 28 in 1964 to 55 in 1967; in 1968, eighty sophomore students, the maximum number possible, were admitted.16 The students, clad in the new blue and white pin-stripe wash and wear uniform went through the traditional courses toward the BSN. Nearly all clinical experiences were located at University Hospital, although nursing homes were utilized for some Fundamen-
Faculty member Clare Fleming with student and patient, 1968

New addition, University Hospital, 1969

Patient room, University Hospital, 1969
tals and Medical-Surgical experiences and the Omaha/Douglas County Visiting Nurses’ Association provided public health nursing clinical experiences.

The students were generally satisfied with the educational program and shared their comments and suggestions when Dr. Boyle met with seniors in the Spring of 1968. Students felt the sophomore year was one of pressure and fear; once they survived that year the remainder of the program was less difficult, and the experiences were interesting. The basic sciences received high marks as did Maternal-Child Nursing, Psychiatric Nursing, Advanced Clinical Nursing, and Team Leadership. Students in the Advanced Clinical and Team Leadership courses felt they were treated as co-workers or colleagues by their instructors and were encouraged to be independent; the attitude of the instructors helped them gain confidence in their ability to practice nursing.¹⁷

Students commented negatively about experiences in the outpatient department — they disliked being “forced” to sit and talk to patients for hours and objected to several students being “herded” into an examining room with a doctor and patient. Students requested more experience in the operating room and recovery room, increased emphasis on patient referrals, fewer written papers in the senior year, and agreement from instructors as to what was important on the nursing care plan. Students also told Dr. Boyle that they needed experience on the night shift so they would know how to function as graduate nurses; the shift most hated by hundreds of their predecessors was now being requested!¹⁸

These students emphasized that they should have more input into faculty decisions and wanted representation on the curriculum committee. While they were anxious to share their suggestions with the new Director, they were rational and professional in their approach. There was no sign of student unrest, sit-ins or demands for curricular change which plagued university administrators throughout the country in the sixties; thus the School approached the 1970’s in relative calm.

The ever present shortage (or maldistribution) of nurses, as well as other health care personnel, was of great concern to the state in the late 1960’s. A Medical Center study revealed that Nebraska’s hospitals and nursing homes could hire 419 nurses if they were available. By 1978, the study estimated, the state would be short about 2,000 nurses. The eleven diploma programs and three degree programs in the state could not meet the projected needs created by additional hospital beds, new nursing homes, and expanded roles for nurses. The report recommended increased admissions to the BSN
program and the development of an associate degree program (ASN) to attract students interested in a shorter program leading to licensure.\(^\text{19}\)

The addition to University Hospital completed in 1969 increased the bed capacity to 285 and provided excellent clinical facilities for all of the health profession schools, but compounded the nursing shortage. Nursing students who had completed their basic nursing courses were hired as assistant nurses and worked under the supervision of registered nurses. Their contribution to patient care was greatly appreciated, and they in turn benefited from the added clinical experience.

**A Rural Experience**

Rural areas of Nebraska felt the nursing shortage more acutely than metropolitan areas in the 60's and 70's; while many University students came from rural communities, few recent graduates were employed outside the Omaha area. All student experiences were centered in Omaha; it was thought unlikely that graduates would seek work in areas where they had no experience.

In 1971 the College designed a project to expose students to health care and nursing in a rural community. Ogallala (population 4,900), 360 miles west of Omaha, was chosen for the pilot project. Arrangements were made through the Chamber of Commerce, and the community responded positively. Senior students Kathy McIntyre, Jacquelyn Holterf, Joan Nyland, and Marilyn Stuhr were selected for a four-week summer course taught by Joyce Lowder, RN, MSN.

The students lived in an apartment provided free of charge, but were otherwise responsible for their own expenses. Learning experiences included work and observations at the Community Hospital, physicians’ offices, mental health clinic, sheltered workshop, and nursing home. They also assisted with 4-H educational programs related to health. All was not work, however. Participation in activities such as the Optimist Club and invitations to other social activities provided first hand knowledge of life in a small town. Extra-curricular activities included trips to Lake McConaughy, Ash Hollow, and Ogallala’s famous Front Street.

The pilot project was declared an overwhelming success and a three-credit elective course in Rural Community Nursing was established for senior students. Two University graduates living in Ogallala served as faculty; Sharon Bonham Holyoke '66 and Marcia Kuper Yochum '68 arranged and supervised classroom and clinical experiences for students, who lived in private homes for the six-week period.
Students from the College of Pharmacy joined the nursing students in 1973 and 1974; when Broken Bow, 250 miles from Omaha, was utilized for the course in 1974, medical and dental students participated. Thus, all of the health professions schools were making an attempt to acquaint some of their students with rural health care. While there was no assurance that this would entice graduates to work in smaller communities, it was a step in that direction.

A major drawback to the course was the requirement to be off-campus for six weeks; many students were unable to arrange this absence due to family, work, or other course responsibilities. A theory only course, Rural Community Awareness, was offered for
these students. These two courses were offered as electives until the
generic baccalaureate program was phased out in 1976; 70 percent of
the 1976 nursing graduates had participated in one of the rural
courses.

Dr. Boyle was faced with a recommendation to increase
enrollments and begin a new program, a building which was already
crowded, and a critical need for more faculty prepared at the
master’s and doctoral levels. Less than 50 percent of the faculty had
master’s degrees and only Dr. Boyle and Dr. Hook held doctoral
degrees in 1967. Recruitment of faculty and advanced preparation of
current faculty became a high priority.

The Associate Degree Program

Associate degree (ASN) programs in nursing were first established
in 1952; by 1967 there were 281 state-approved programs in 45 states,
Puerto Rico, Guam, and the American Virgin Islands. However, no
associate degree programs were offered in Nebraska and none were
being planned. Dr. Boyle felt the lag in the development of these pro-
grams was due in part to the relatively slow increase in numbers of
junior colleges, the lack of adequate clinical facilities outside the
metropolitan areas, and an inadequate supply of prepared faculty.
Dr. Boyle suggested that leadership in developing associate programs
should come from the University.¹⁰

While the majority of associate programs were offered by junior or
community colleges, 70 were located in senior colleges and univer-
sities; five senior colleges or universities offered both associate and
baccalaureate programs in 1968.¹¹ The purpose of ASN programs
was to educate students at the technical or semi-professional level;
graduates were eligible for licensure as registered nurses and were
prepared to give nursing care as staff nurses, usually in hospitals. A
typical ASN program was two years in length and combined nursing
theory and practice with general education courses in the arts and
sciences (50-50 distribution of nursing and non-nursing courses). The
ASN program was considered complete in itself and was not the first
step toward the baccalaureate degree; if a graduate later chose to
earn a baccalaureate degree (BSN) some credits could be applied at
the discretion of the college or university.¹²

Associate degree programs were particularly attractive to students
who wanted to complete a nursing program in a relatively short time,
and wanted both nursing education and college studies. Students
were often older than traditional students, were married, and had
family responsibilities; some were mature men and women seeking
preparation for a career change.
Planning for the ASN program at the University began in September, 1969, with the appointment of Lois Merrill, RN, MSN as Associate Dean. Following approval by the Executive Committee of the School of Nursing, the Board of Regents, and the Nebraska Board of Nursing, reasonable assurance of accreditation by the National League for Nursing (NLN) was received in March, 1970. The first faculty, Rogene Anderson and Linda Perrin, were appointed in February and March and additional faculty were appointed in the summer months. The associate program, as described in the 1970-71 Bulletin, initially included 34 credits of general education courses and 41 credits of nursing courses, and required four semesters and one summer session of full-time study:

### FIRST YEAR

<table>
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<tr>
<th>Fall Semester</th>
<th>Credits</th>
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<tbody>
<tr>
<td>Biol 102 ...... Principles of Biology ...............</td>
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<tr>
<td>Engl 111 ...... Elementary English Composition ...</td>
<td>3</td>
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<tr>
<td>Psych 101 ...... Introduction to Psychology .......</td>
<td>3</td>
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<tr>
<td>Nurs 102 ...... Introduction to Nursing ............</td>
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<th>Spring Semester</th>
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<tbody>
<tr>
<td>Biol 244 ...... Biology of Microorganisms ..........</td>
<td>4</td>
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<tr>
<td>Biol 275 ...... Physiology and Anatomy of Man ......</td>
<td>5</td>
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<td>Nurs 112 ...... Fundamentals of Nursing I ...........</td>
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<th>Summer Session</th>
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<tbody>
<tr>
<td>Nurs 202 ...... Fundamentals of Nursing II ...........</td>
<td>7</td>
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<tr>
<td>(10-week session)</td>
<td></td>
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<tr>
<td>Nurs 210 ...... Normal Nutrition .....................</td>
<td>2</td>
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<tr>
<td>(5-week session)</td>
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<tr>
<td>Elective</td>
<td>3</td>
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<td>(5-week session)</td>
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### SECOND YEAR

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<tr>
<td>Engl 112 ...... Intermediate English Composition ...</td>
<td>3</td>
</tr>
<tr>
<td>Nurs 212 ...... Advanced Nursing I ...................</td>
<td>10</td>
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</table>
Spring Semester
Nurs 222 .... Advanced Nursing II ......... 11
Nurs 230 .... Nursing and Society ............. 1
Elective ................................. 3
............................................. 15

Students completing the 75 credit hours with a cumulative grade point average of 2.0 (4 point scale) were awarded the Associate of Science in Nursing (ASN) degree. The program was specifically designed to prepare men and women for meeting nursing care needs of patients and families who have common preventive, therapeutic, and rehabilitative needs.

As expected, the first students admitted in the fall of 1970 were generally older women, licensed practical nurses, and students from the middle half of their high school class. Hospitals utilized for clinical experience for the program included Archbishop Bergan Mercy Hospital, Bishop Clarkson Hospital, Douglas County Hospital, Lutheran Medical Center, University of Nebraska Hospital, and Veterans Administration Hospital. Nursery schools, homes for the aged, and senior citizen federal housing units were also used as clinical facilities.

The students were attired in a yellow and white pin-stripe uniform to distinguish them from BSN students. With a few exceptions, major clinical laboratory resources were those also used by the baccalaureate program, so the problem of identification was a real one. BSN students were sometimes referred to as "the blue students"; the ASN students were the "yellows." Faculty of both programs explained and interpreted course objectives and skill levels of students to agency personnel, who eventually adapted to working with students and faculty of both the two-year and four-year programs.

Regina Barentson, who had served as Associate Director from 1962 to 1966, Acting Director from 1966 to 1967, and as Associate Dean from 1969 to 1970, resigned in 1970. In recognition of her service to the School, she was named an Honorary Member of the Alumni Association in 1970. Jane Carney, RN, MA, was named Associate Dean and the administrative head of the baccalaureate program in 1970. Miss Carney was an energetic, extroverted woman who quickly won the friendship of students and faculty alike. Her gregarious personality was in direct contrast to the reserved demeanor of Dean Boyle, and they complemented each other.

School to College and Accreditation

As the School was preparing for the graduation of the first ASN students, two events added to the festivities. The Chancellor had
recommended that the School be given the status of a College; the Board of Regents approved the change, and in 1972 the School became the College of Nursing. The College of Pharmacy, which had been based at the Lincoln campus, was aligned with the Medical Center in 1972; there were now three health professions colleges on the campus.

The College was also notified in 1972 that the four-year BSN program had received continuing accreditation from the National League for Nursing. The ASN and MSN programs were initially accredited by the NLN at this time.

The Articulated Programs

The associate degree program was initially planned as a terminal program. Concerted efforts were made to counsel potential students into the undergraduate program consistent with their educational and career goals; however, it soon became apparent that many students in the associate program wanted to obtain their baccalaureate degree. They could not transfer from one undergraduate program to another without loss of time and credit, and graduates of the associate program who decided to earn the baccalaureate degree were required to complete 41 credits more than students who initially entered the BSN program. The academic ability of most of the ASN students differed little from those entering the BSN program. The students were saying: "Why will it take us three more years to get our degree; why can't we get it in two more years?"26

Could a nursing curriculum be designed so that the associate, baccalaureate, and master's programs would articulate with each other? Faculty examined their beliefs about nursing education, the rights of the learner, the abilities and educational goals of the students, and the obligation of the university. The following statement of beliefs was made explicit:

1. Individuals who are beginning their education in any given discipline should have the right to progress within that discipline to the limits of their ability.
2. Progression within a discipline’s educational sequence should be reasonably economic in terms of time and money.
3. Courses should be so designed that the student is able to progress at his own rate, and the program should be sufficiently flexible to permit the student to extend the courses over a longer period of time if he so desires.
4. Lower division courses in a discipline should be the basis for continuation in upper division courses; these in turn should be the basis for graduate study.
5. Any discipline should offer opportunity at the undergraduate level for the student to elect to pursue special interests within the discipline.\textsuperscript{27}

The idea of developing articulated programs was discussed with students, other departments of the University, and nursing service personnel – all supported the concept and the faculty moved forward in 1972 with the following statement of purpose:

To develop a curriculum sequence in nursing (and develop or provide the needed instructional materials) that will enable all beginning students in nursing at the University of Nebraska to enroll in the Associate Degree Program and permit those who are academically able and personally motivated to progress without loss of time or credit through the lower and upper division courses and the Master’s Program. Students from other schools will be admitted by transfer credit for advanced placement to the appropriate curriculum level. Students will be able to terminate their educational preparation at the completion of the requirements for the Associate Degree, the Baccalaureate Degree or the Master’s Degree.\textsuperscript{28}

Funding for the five year curriculum project was obtained from the Division of Nursing of the U.S. Public Health Service. Melba Leichsenring, RN, Ph.D. served as Director of the Project. Outside consultation was provided by Dr. Myrtle Aydelotte, Director of Nursing Service at the University of Iowa Hospitals and Clinics; Miss Georgeen DeChow, Chairman of Nursing at Manatee Junior College; Dr. Elizabeth Giblin, Director of Medical-Surgical Nursing at the University of Washington; and Mrs. Verle Waters Tabor, Curriculum Coordinator of the Cooperative Graduate Education in Nursing Project in California and Nevada.\textsuperscript{29}

Conferences were held for faculty, the consultants, and selected nursing service personnel. Task forces were formed to develop the conceptual framework and to develop statements of the abilities of the graduates of each of the programs. These differentiation statements facilitated selection of content which was different for each program and demonstrated a progression through the programs which would facilitate articulation. The statements also clarified the differences in preparation and ability of the graduates of the three programs for employers.\textsuperscript{30}

It was the consensus of all involved that the associate degree program, which now totaled 73 credits, would provide an adequate base for an upper division baccalaureate program with the addition of a course in chemistry. To provide for articulation, the four year bac-
calaureate program was discontinued; the last class accepted into this program entered in June 1973 and was graduated in 1976. All students entering the nursing program in the fall of 1973 entered the first step of the career ladder — the two year associate degree program.

The new baccalaureate program, designed to be completed in two years, was much different than the old program and required the most time for planning. Only registered nurses were admitted to the second step of the career ladder. Graduates of the University’s ASN program as well as graduates of other ASN and diploma programs could now enroll in a program which would be suited to their needs and interests. Credits required for the BSN program totaled 60/61 and included: required nursing courses, 18/19 credits; nursing electives, 12 credits; required non-nursing courses, 18 credits; and non-nursing electives, 12 credits.

### THIRD YEAR

<table>
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<th>Credits</th>
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<td>Statistics</td>
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<td>Related Social Science</td>
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### FOURTH YEAR

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The baccalaureate program included core courses in Health Maintenance Nursing, which focused on wellness and prevention of illness; Health Reintegration Nursing, which focused on acute complex illnesses and long-term care; and Quality Assurance of Nursing Care. Support courses in the natural and social sciences were selected utilizing the conceptual framework and differentiation statements to support their inclusion.

An exciting feature of the new baccalaureate program was the development of elective courses in nursing. Electives to be offered were chosen on the basis of the needs of Nebraska, requests from faculty, students, alumni and nursing service personnel, and the ability of the College to provide the necessary learning experiences. The electives offered in 1976 and 1977 were:

Care of the High Risk Client in the Emergency Room, Operating Room, and Recovery Room
Care of the High Risk Client with Interferences in Cardiopulmonary Adaptation
Community Health Nursing
Perinatal Care
Nursing in a Rural Community
Nursing Administration of Small Hospitals and Nursing Homes
Care of the Handicapped Child
Community Mental Health Nursing
Child Mental Health Nursing
Care of the Older Person
Directed Study
Nursing Care of the Client During the Diagnostic Process
School Nursing

A School Nurse-Health Educator Program, developed with the University of Nebraska at Omaha, was designed to provide those students concentrating their studies in school nursing the opportunity to become teacher-certified health educators in grades 7 through 12. This program required an additional 20 to 25 semester credits and led to a Bachelor of Science in Education and the Bachelor of Science in Nursing.

While the ASN program was prescribed and regimented in order to meet State Board of Nursing requirements, the BSN program was somewhat more flexible. Faculty had the freedom to plan courses and clinical experiences to meet students’ needs. Students also had the freedom, within limits, to select courses which they felt best met their educational and career goals. The baccalaureate students were a diverse group; some had just finished the ASN program, while others had several years of nursing work experience in a variety of settings.
Faculty members had to adapt to this heterogeneous group and did so with relative ease, although it was sometimes uncomfortable to have a student in class or clinical who had more experience in that area than the faculty member. Faculty members soon realized that this diversity was beneficial and stimulating and saw it as a positive rather than a negative factor.

The articulated career ladder program was the only one of its kind in the nation. The College had designed and implemented an innovative nursing program which allowed students to stop their education at the ASN, BSN, or MSN level, to proceed through the programs at their own pace, and to select upper division courses which best met their interests and needs. Approximately 40 percent of the students graduating from the ASN program in 1975 and 1976 went directly into the BSN program. The articulated programs were fully accredited by the NLN in 1977.

The Lincoln Division

In the midst of the planning of the articulated programs the Board of Regents asked the College of Nursing to determine the feasibility of establishing a nursing program on the Lincoln campus. Following discussions with the State Board of Nursing and administrators of Lincoln hospitals, Dean Boyle surveyed the educational preparation of all registered nurses living in Lancaster County. Dean Boyle sug-
gested that clinical facilities in Lincoln were limited, since two of the five hospitals were offering their own diploma programs; recruitment of faculty prepared at the master's level in nursing would also be difficult. Dean Boyle did, however, submit a proposal for establishing the ASN program on the Lincoln campus; this proposal was rejected by the Regents, who asked that a plan be submitted for a BSN program.  

As in the first proposal, the Dean stressed the nationwide shortage of qualified faculty, the need for competitive salaries, and the desirability of teaching upper division sciences and nursing on the Medical Center campus. The proposal for the articulated ASN/BSN programs was eventually accepted by the Regents in 1972, and in the fall of 1974, 32 students entered the Lincoln Division ASN program.

With Lois Merrill as Associate Dean, five nursing faculty, and the Director of the Learning Center, the College was opened in Fairfield Hall, a former dormitory in Selleck Quadrangle. Clinical facilities included St. Elizabeth Community Health Center, Lincoln General Hospital, the Veterans Administration Hospital, and the Lincoln Regional Center.

The BSN program was implemented in 1976. Clinical experiences at Bryan Memorial Hospital, the Lincoln-Lancaster County Day Treatment Center, the Lincoln-Lancaster County Health Depart-
ment, and the Madonna Professional Care Center were added. The first baccalaureate class of 35 students was graduated from the Lincoln Division in May, 1978.36

The coordination of programs on two campuses 45 miles apart was no easy task. Faculty communication was aided, however, by telephone conferences and a great deal of inter-state highway driving. Some Omaha-based faculty commuted to Lincoln to assist with courses.

A New Building

The building which had housed the College since 1957 was bursting at the seams by the early 1970’s. This building, originally designed as a dormitory, also contained classrooms, a Nursing Arts lab, and office space for 10 faculty. Students now lived at home, in apartments, or in a dormitory on the Duchesne Academy campus, and the building had been remodeled in an attempt to meet increasing enrollments. Rooms formerly occupied by students were converted to faculty offices, and were often shared by three faculty. Every bit of available space was utilized; one faculty office could be reached only by going through a women’s restroom. With 359 students and 62 faculty in 1972, this building (planned for a total enrollment of between 100 and 150) was clearly inadequate to serve the functions of the College.37

The Chancellor of the Medical Center, the President of the University, and the Board of Regents gave first priority to a new nursing building. In 1971 the Nebraska Legislature appropriated $54,000 for preliminary architectural drawings. The $3.7-million building was funded with state monies appropriated by the Legislature, a federal grant from the Division of Nursing of the U.S. Public Health Service, a donation from the Nursing Alumni Association, and private donations from alumni and friends of the College.

Located on the southeast corner of 42nd Street and Dewey Avenue, this five-story building was both attractive and functional. It was designed to accommodate 700 students and 100 faculty. The largest classroom, Cooper Auditorium on level one, seats 255; the auditorium can be divided into sections to accommodate smaller groups. Level two contains classrooms, a multi-purpose lounge called the Commons, and the Charlotte Burgess Administrative Suite with the offices of the Dean and Student Affairs Advisor. Level three houses the Learning Resource Center and the Child-Adult Education Center; level four contains small classroom/seminar rooms and faculty offices. Level five contains seminar rooms, faculty offices, a
graduate student study room, and the Nursing Care Research Center. The Nursing Research Laboratory, with its data analysis center, offices, conference rooms, and wet laboratory provided a facility that had never before been exclusively available to nursing. Faculty members were becoming more active in nursing research, and the Research Center was now able to provide the necessary encouragement, consultation and support services.
The electronic capabilities of the building improved communication with the Lincoln campus. Two-way television transmission was available for classes as well as faculty conferences and meetings. Classes taught on either campus could be attended by students on both campuses; this greatly increased the availability of classes and more efficient use of faculty. Commuting between Lincoln and Omaha also decreased, a savings of both money and time. Closed circuit television allowed transmission of audiovisual materials from the Learning Center to classrooms.

Dean Boyle and Miss Carney were cognizant of the importance of retaining some of the history of the College and encouraged the naming of conference rooms on levels four and five in honor of Irma Kyle Kramer and Myra Tucker.

Faculty and students eagerly awaited the opening of the building in January, 1976, and no one was disappointed. The spaciousness, colorful decor, and the presence of live greenery brightened the Nebraska winter. Faculty were especially pleased to move into private offices. No longer would they look for an empty room to have a conference with a student or ask their office-mates to vacate the room so a conference could take place there. Bookcases and file drawers were a luxury never before experienced by some faculty.

The building was not without its drawbacks, however. An unwritten policy prohibited eating or drinking in areas which were carpeted,
and those who were accustomed to taking soft drinks or coffee into classrooms were reprimanded by administrators and faculty members. Few would risk having Dean Boyle see them “eating or drinking on the carpet.” Why such a restrictive policy? Dean Boyle was proud of the building and protective of its cleanliness and beauty. The policy was made more explicit by signs in many areas prohibiting eating, drinking, and smoking; the rules were strictly followed during Dr. Boyle’s tenure as Dean.

The official dedication of the College of Nursing building was held on January 31, 1976. An Educational Conference on the Articulated Programs was planned for January 29 and 30 in response to requests for information from throughout the U.S. Although Dr. Leichsenring, Dr. Boyle, and other faculty members were anxious to provide consultation, it soon became difficult to respond to each request. Associate and baccalaureate programs that were agency members of the NLN were invited to send representatives to the conference and dedication; 193 nurse educators from 27 states attended and received information about this innovative nursing program.38

Special guests of the College at the dedication were six alumnae who had graduated before 1926: Talma Bassett Allen ’21, Frieda H. Dieterichs ’23, Esther Daggett Schroeder ’24, Helen E. Erikson ’25, Alice Amen Heinz ’25, and Mary A. Godfrey ’25. Another alumna, Dr. Gladys Sorensen ’45, Dean of Nursing at the University of Arizona, was the guest speaker and received the Distinguished Service to Nursing Award from the College of Nursing. Dr. Sorensen had also participated in a review of the nursing programs at the request of the faculty and the Chancellor; other reviewers were Dr. Dorothy Ozimek of the NLN, and Mrs. Verle Waters Tabor from the University of California, San Francisco. The report submitted by the three reviewers emphasized the soundness of the associate program as a base for the baccalaureate program, the explicit articulation between programs, and the suitability of the programs as preparation for graduate study in nursing.39

The College of Pharmacy also moved to a new building in 1976. Located to the south of the College of Nursing, it was architecturally compatible with the brick nursing building and afforded the Pharmacy College the space needed for its educational and research programs.

The Off-Campus Baccalaureate Program

The College of Nursing moved west with its BSN program in the late 1970’s. No baccalaureate programs were available outside the Omaha/Lincoln area. Many RNs in communities throughout the
state were anxious to pursue the BSN degree but were unable to attend classes on the UN-L or Medical Center campus; family, community and employment responsibilities prevented these nurses from enrolling as traditional students. The administration and faculty of the College recognized the need and the challenge.40

The Off-Campus Program was funded by the W.K. Kellogg Foundation of Battle Creek, Michigan, and implemented in 1977 after two years of planning. Dean Boyle and Associate Dean Jane Carney were primarily responsible for establishing this program; both spent many hours interviewing prospective students in their home communities, arranging contracts with colleges and clinical agencies, and interpreting the program to Nebraska citizens.41

Students entering the Off-Campus Program met the same requirements as those on campus. The program could be completed in four years of part-time study. Non-nursing courses were provided by state and community colleges, and the College of Nursing provided the nursing and upper-division science courses.

The delivery of courses was the major challenge. Lectures were video or audio-taped and placed in cooperating agencies accessible to students, who viewed them independently. The students met as a group weekly for a telephone conference with faculty teaching the courses. The major difference between on-campus and off-campus nursing courses was the sequence of clinical experiences. On-campus clinical experiences were concurrent with the theory portion of a course; in an off-campus course, the clinical component was accomplished in a summer session after completion of the theory. Faculty traveled to the out-state communities to supervise clinical practice; this travel was done weekly for communities close to

Dedication speaker, Dr. Gladys Sorensen

College of Nursing Dedication, 1976: (Back row, l to r) Alice Amen Heinz, Frieda Dieterichs, Dean Boyle, Esther Daggett Schroeder; (Front row, l to r) Mary Godfrey, Helen Erikson, Talma Bassett Allen

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Omaha/Lincoln; when clinical was planned in communities beyond a reasonable driving distance, the faculty lived in the community for the five or six week summer clinical session.

The first off-campus centers were located in the Scottsbluff/Chadron area (Western) and the Grand Island/Kearney/Hastings area (Mid-state). In the Western area, Nebraska Western College and Chadron State College provided non-nursing courses and space for equipment and teaching; West Nebraska General Hospital was utilized for clinical practice. In the Mid-state area, cooperating agencies included Kearney State College, St. Francis Hospital and the Veterans Administration Hospital in Grand Island, and Mary Lanning Hospital and the Regional Center in Hastings.42

The program in 1986 was offered in six geographic areas:
Western: Scottsbluff—Chadron
Mid-state: Kearney—Grand Island—Hastings—North Platte
Northeast: Norfolk—Wayne—O’Neil
South Central: Geneva—Hebron—Fairbury
Southeast: Falls City—Auburn
North Central: Valentine—Ainsworth.

Agreements exist with all community colleges, except those in the Omaha and Lincoln metropolitan areas, and with four State colleges.

The early success of the program was due in great measure to the commitment and effort of Miss Carney, who had served as Associate
Dean since 1970 and Director of the Off-Campus Program since 1976. Miss Carney left the College in 1979 to serve as a consultant for career ladder programs with the NLN.

Ann Van Hoff, RN, MSN, was named Director in June, 1978. Lincoln and Omaha faculty shared the responsibility for teaching nursing courses. Despite the logistics of administering the program and the increased workload and travel for faculty, the College is committed to maintaining this program.

Many RNs have earned baccalaureate degrees through this program; in June, 1980, Nancy Mitchell of Hastings was the first to earn the degree entirely through off-campus study.

The program has provided outstate RNs an opportunity to earn the baccalaureate degree and become better prepared professionals; it has demonstrated that the University, state colleges, community colleges, and health care agencies can provide educational services cooperatively and without duplication. While meeting the needs of individual nurses and health care agencies, the College of Nursing and University have also benefited. Faculty have developed new teaching skills; the association with students and other professionals in smaller communities has given faculty new insights into health care needs and the practice of nursing in Nebraska; and the image of the University has been enhanced.

Summary

Dr. Boyle led the College of Nursing through a period of tremendous growth and change during her 12 years as Dean. An innovative career ladder program which included ASN, BSN, and MSN programs was developed to meet the increasing need for registered nurses with different and distinctive educational preparation. Student enrollment increased from 79 in 1967 to 722 in 1979. The recruitment of qualified students, a major concern for previous directors, was not a problem; in fact, many prospective students were denied admission each year due to the large number of applicants. Selection criteria remained very competitive and, as had been true since its beginning, the College was able to admit only the best candidates.

The College had become a collegiate school in every sense of the term. Classes and clinical experiences were scheduled like other college courses with regular summer and holiday vacations. One hour of credit was given for three hours of clinical laboratory experience — a radical change from 1920 when no credit was given for 48 hours of work in the hospital. Clinical experiences were planned exclusively
for learning and students no longer supplied nursing services for the hospital. Students paid regular University tuition and fees.

The collegiate atmosphere changed student life considerably. Students no longer were cloistered in a dormitory and dependent on the College for their lifestyles. Many had family and job responsibilities. Since they no longer lived together, class cohesiveness was sometimes limited. Class size and varying schedules prevented students from knowing all their classmates. The College did encourage class and school activities, with limited success. The Student Council was re-activated and classes continued to elect class officers, but gone were the teas, holiday parties, dances, and picnics of the Burgess and Kyle eras.

Students became involved in operational activities of the College through representation on College committees. They freely expressed their opinions on everything from the school uniform to curriculum. Student participation in campus-wide activities resulted in the election of second year student Christine Baker as President of the UNMC Student Senate in January, 1976.

Nursing Student Will Join N.U. Regents on Saturday

The University of Nebraska Board of Regents, which got its first woman member in 1974, will get its second Saturday.

Christine Baker, a second-year nursing student, will join the board as a nonvoting student member from the Medical Center.

Miss Baker, whose parents, Mr. and Mrs. Bernard Baker have a farm near Trenton, Neb., was sworn in Tuesday as president of the student senate at the Medical Center.

Student senate presidents on each N.U. campus automatically become nonvoting members of the board of regents.

Miss Baker defeated three other candidates in a student election. She will succeed Dr. Timothy Chappell, a graduate student, as the Medical Center's student regent.

She said that, even without a vote, student regents "have done some good" because the nonvoting members of the board "are listening to them."

"And students," she added, "need some kind of voice."

She said she will start her one-year term on the board "sitting back and listening."

Mrs. Camille Elliott of Scottsbluff was the first woman regent. She was appointed by Gov. J. J. Exon to succeed her husband, J. G. Elliott, after he died in April 1974.

Mrs. Elliott served nine months as a voting member of the board.
A more normal college life facilitated student participation in activities unrelated to nursing. Many students maintained their ties to the UN-L campus by spending weekends commuting to Lincoln. In 1971 and 1972 nursing students Becke Wagner and Barbara Allen reigned as the UN-L Homecoming Queen.

The faculty also benefited from the collegiate atmosphere. When Dr. Boyle arrived in 1967, faculty members were on 12-month appointments; the adoption of the University schedule for classes facilitated 10-month teaching schedules similar to other college professors. Faculty were able to spend the summer months working in other jobs, or continuing their own education.

Dr. Boyle was successful in recruiting more faculty with master’s and doctoral degrees and facilitating better preparation of those already on the teaching staff. Faculty members who did not hold master’s degrees were encouraged to return to school. In 1979, when Dr. Boyle announced her retirement, 83 percent of the 100 faculty were prepared at the master’s and doctoral level.

In the 1970’s four alumnae with long service to the University retired. Miss Frieda Dieterichs ’23, had spent most of her career on the campus and retired from her position as Director of the Hattie B. Monroe home in 1970. Velma Sexsmith Mason ’31, who had worked since 1941 as a head nurse and supervisor in the hospital, retired in 1972. She had been active in the Alumni Association, serving on many committees, as editor of the Nurse Reporter, and as President for several terms. She maintained contact with many alumni following her retirement and was a primary source for the Class News Section of the Reporter for many years.

Miss Lola Williams ’34, Assistant Professor of Medical-Surgical Nursing since 1946, retired in 1976 after 30 years of service to the College. Miss Clare Fleming ’36, Associate Professor of Medical-Surgical Nursing and Assistant Director of the School in the 1950’s, had joined the staff of the hospital in 1943. She retired in 1977 after 34 years of service to the hospital and College. Each of these women left her mark on the hospital and College, and all are remembered for their contributions to nursing at the University.

A significant event of the 70’s was the establishment of Gamma Pi Chapter of Sigma Theta Tau, National Nursing Honorary society; Gamma Pi was chartered on April 16, 1978 as the 86th chapter of the society.

The College moved into the mainstream of nursing research under the direction of Dr. Boyle, Dr. Brown, and Dr. Miller during the 70’s. Recruitment of doctorally prepared researchers strengthened the research component of the graduate program. Nursing faculty became involved in their own research activities and were presenting
their research findings at national meetings and through publications in refereed journals. While not yet reaching the level of some other nursing colleges, the University had made great progress in the 10 years after the opening of the Nursing Care Research Center.

As the College approached the 1980's the state and nation were still experiencing a shortage of nurses. University graduates of all programs were assured of jobs in nearly any part of the country. The health care industry was still growing and consuming a large part of the Gross National Product, public concern over the cost of health care was growing, and a renewed interest in prevention and health maintenance was heard.

The winds of change were blowing softly as Dr. Boyle retired from the College and from nursing in July, 1979. For Dr. Boyle, retirement meant a move to Mesa, Arizona, and time to pursue her interest in writing, religious studies, and traveling. She had given much to the College of Nursing and University and was named Professor Emeritus upon her retirement. She was further honored with the Distinguished Service to Nursing Award from the College on May 25, 1980.

The friendships Dr. Boyle established in Nebraska have been maintained through correspondence and visits. A prized possession of Dr. Boyle's is a quilt presented to her as a memento of her years as Dean. Faculty members Jeanenne Boosingher and Joyce Lowder asked faculty and other professional colleagues to make individual quilt blocks depicting significant events of her tenure. The finished quilt was given to this remarkable woman with love, appreciation, and deep respect for her contributions to nursing at the University. In 1986, Dr. Boyle returned the quilt to the College for permanent display in the conference room on level four, Omaha Division.

[Image: Quilt presented to Dean Boyle, 1979]