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SIXTY-FIFTH ANNUAL REPORT



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COVER: Mother and child.

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**The 100th Class of the Frontier School
of Midwifery and Family Nursing
Commencement Ceremonies
August 11, 1990**

Peggy Burkhardt delivered the following keynote address to the 100th Class of the Frontier School of Midwifery and Family Nursing. Peggy's extensive nursing education began with a bachelors of science in nursing from Georgetown University. She then earned her FNP/ Masters of Science in Nursing from the University of Rochester and an MA in theology from the University of Dayton. She is currently enrolled in a Ph.D. nursing program at the University of Miami, with a focus on cultural nursing. Peggy is completing her dissertation which focuses on exploring and understanding the spirituality among women in Appalachia.

Peggy has worked as an FNP in an inner-city health center in Rochester, New York and in a community-based health center in Cabin Creek, West Virginia. She is currently assistant professor of nursing at the University of Charleston in West Virginia.

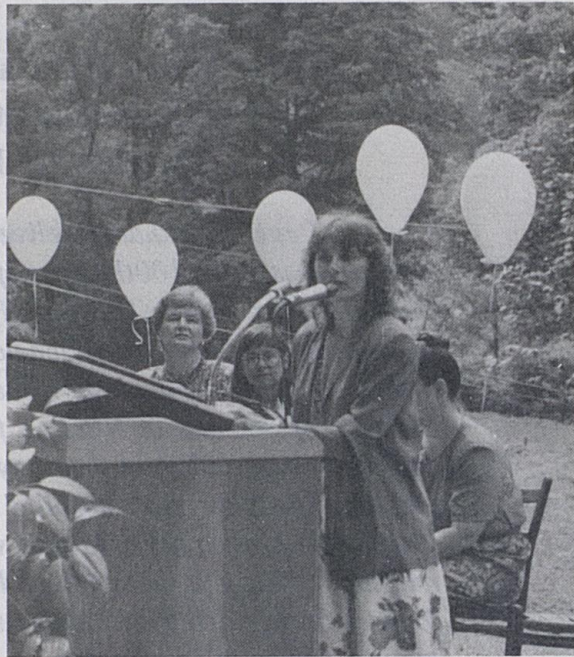
I am honored to have been invited to share this time and occasion with you. Events such as graduations are indeed markers or milestones upon one's life journey, and it is good to pause and reflect for a moment on what this marker means for each of you in your individual journeys and for all of you in your collective journey. I join with you in honoring this moment by sharing with you some of my own thoughts as well as words of other people from nursing and other disciplines.

Because we are all gathered here, in this time and place, we are all connected - a connection which flows from our relationships with those who are graduating. The specific life journey of each of you graduates brought you to this place and this program where you have become connected in a unique way with each other, with your faculty, with those persons whom we call patients, and with this environment. The lives of all of you have changed through these connections. Your presence in any situation cannot help but affect that situation in a way that would not have been possible had you not been there. It is no great insight for me to say that what you have gained through this experience goes

beyond academic knowledge and skills - as important as those are in your expanding professional roles. It is who and how you have been with, and for each other, that has helped to shape both your learning and who you are now that is different from who you were when you started the program. It is important to acknowledge the gift you have been for one another.

Jean Watson (1989), a nursing scholar who is dean at the University of Colorado School of Nursing, speaks of

caring moments of being. These are moments in which the human self and human spirit are fully engaged in caring and healing and which involve being with others in ways that acknowledge our interconnectedness. Such moments of being with another can be part of nursing's most routine and common activities. Whatever one is doing - taking a history, timing contractions, doing health teaching or counseling and the like - it is the intentionality with which one is with a person, that is, the intention of being with the person in a healing way in that moment of doing, that brings and constitutes the healing and caring presence. What we are about as nurses is sacred work. It is not sacred in the sense of church or religion, but in a way that acknowledges the sacredness of what is here in this moment - the person (both self and other), the person's story (both self and other), joy, suffering, birthing, and dying - however these are experienced by oneself and the other. It is in being present to each moment that we open ourselves to the possibility of transformation that comes through connections with others. We are changed by those for whom we care as much as, and sometimes more than they are changed by us! Marilyn Krysl, a poet who was an artist in residence (1987-1989) in the Center for Human Caring at the University of Colorado School of Nursing, illustrates the transforming power of acknowledging the sacredness of the moment in her poem "Sunshine Acres Living Center,"



Speaker Peggy Burkhardt

which I would like to read for you.

In this poem both the nurses and Mr. Polanski are transformed through an encounter, and in the process there was a birthing of a new way of being with each other, a new awareness of their connectedness. In a way we are all midwives for each other - needing to know when to wait and when to act and how to best facilitate the process of birth - whether that be the birth of a baby, or of a new sense of self, or of incorporation of a chronic health concern into one's lifestyle, or of a choice such as eating more healthfully, stopping smoking, saying yes to chemotherapy, or letting go into death. So much of what we do in our lives is birthing, like getting up in the morning, or going through the gestation and labor of an educational program, or the process of gaining new insights into oneself... Each moment has an element of birth - newness of life that has not been before, and of death - letting go of what has been. In all of these situations it is good to remember that being with



100th Graduating Class

another is as important as doing for that person, and that we are each transformed in the process. I find it helpful to remind myself at times that without those persons we call patients, there would be no meaning to my being a nurse and that who I am has been shaped in part through my connections with them.

In our roles as nurses, nurse practitioners, nurse-midwives, we are with people in many different ways and on many different levels.

Whatever the particular situation is, it is important to remember that the human person is a unitary being in which body, mind, and spirit are different manifestations of who the person is. Although a particular nursing act may appear to focus on physical care or emotional support or spiritual unfolding, there is a oneness both within the person and within our connectedness with each other which gives our acts meaning on many different levels. These various levels of meaning are illustrated well in



Kim McQuoid - Winner
Helen E. Browne Award

another poem by Marilyn Krysl. In honor of this sacred moment in the journey of each person here and especially for Noreen, Heidi, Nancy, Al, Linda, Debbie, Michele, Kate, Kim, Randall, and Paula, I would like to conclude by reading Marilyn Krysl's poem "Midwife."

"...and may each walk out across the fields of the planets into the spaces between the furthest stars."
(Krysl, 1989, p. 42)

-by Peggy Burkhardt RN, FNP, PHD (C)

References

Krysl, M. (1989). *Midwife and Other Poems on Caring*. NY: National League for Nursing.

Watson, J. (1989). Introduction. *Midwife and Other Poems on Caring*. NY: National League for Nursing, vii-viii.

Skyler Vicente's Birthing

The following is excerpted from a birth journal kept by then mom-to-be Kathy Tobar. She chronicals her birthing experience with son Skyler, from first labor pains to returning home to the hospital.

Tuesday Feb. 20, 1990

I woke up around 12:30 a.m. with mild cramps. I timed 7 or 8 of them, and they were exactly 5 minutes apart. I awoke my husband Carlos, and we timed 7 or 8 more, and they were like clockwork, although mild. All the midwives and friends had told us over and over to head for the birthing center at the first sign, because of our son Kasey's speedy entry. So although we were comfy and cozy in bed with only mild cramps, we got right up at 2:00 a.m. "Kids", we called, "time to get up!" Sleepy eyed the kids began appearing and realized what we were doing. Our homework had been done well. All the bags were packed in the car, and we had a full tank of gas. We puttered around the house a bit, packing fruit and drinks and last minute coloring books. About ready to go, I said that we should time the contractions as they seemed weaker. Still right on 5 minutes. Our son Bert said he sort of wanted to stay and keep his perfect school attendance record. Well, that would be OK, I thought and the Bronco wouldn't be so crowded. So he stayed with friends.

It was a gorgeous night. The stars were out and when we turned onto 80 E. from Somerset, a beautiful 4th quarter crescent moon rose from the east. The rest of our trip was eastward, and we followed that hanging crescent all the way. Maria and I watched the clock and the contractions were still exactly 5 minutes. Kasey fell asleep. I asked Carlos to watch for any driving mistakes I might make during contractions, but the pains remained mild enough and the two hour trip was made without incident. I drove fast at first, not knowing what the labor might do, but on past London I slowed down, so as not to arrive at Mary Breckinridge Hospital too early.

We arrived in Hyden at 5:00 a.m., we parked, and I got out to walk and jog walk in the crisp mountain air, hoping to break my water.

Finally at 5:30a.m. we went on in, and I was put on a machine

that recorded the baby's heartbeat and my contractions. Kasey liked the squiggly needle. The nurse said that baby was fine and my contractions were still 5 minutes apart. We were put in a birthing room and got settled. Carlos and I worried as we noticed the contractions slowing down to 15 minutes and were very irregular. The nurse said they had already sent 3 women home with false labor pains. We tried walking around the halls. We sat in the room and watched the clock, until my midwife Betsy came in. It was good to see her. We told her about the contractions. She said, "How much sleep did you get?" We told her not much and she said, "Ok - I'm going to order you a breakfast, then I want you to get in the jacuzzi for a bit, then I want you and Carlos to get some sleep in this room. We'll pull the shades and give the kids another room." She told us that the mind played a big role in labor, and that we had to relax and stop watching the clock, and let your body know you are here. The jacuzzi felt wonderful and relaxing. We only slept for about an hour, because the pains became too uncomfortable in bed. As they got stronger, I walked around the room, hugged Carlos, drank lots of Gatorade and used the bathroom often. Betsy checked on us about 12:30p.m. and said, "So you want me to check you out of curiosity?" I said sure. She said, "Oh, you're about 4 cms. dilated, we're gonna have a baby! Probably around 4 o'clock."

Kasey and Maria kept checking in. They had been up and down the elevator and watching school kids at recess, and watching T.V. and coloring in another room. Betsy ordered lunch for me, and took the kids to Druther's. I ate some, although I had to push the tray away twice as the contractions were getting somewhat intense. I kept drinking a lot. One pleasant nurse began checking the baby's heartbeat every 30 minutes. Things moved faster and I had more trouble getting relief in my lower back. Betsy had me try leaning over a bean bag and pillows, but it felt uncomfortable on my knees or having anything touch my stomach. Betsy laughed and said "that tight stomach with the water not broken doesn't want any pressure!"

The pains got pretty serious and close together, and I wandered around grunting and blowing and trying to stay relaxed. Soon I could feel the baby moving and things got all electric. I heard Betsy say "This baby means business!" Kasey came in and I told him if he wanted to see the baby be born, to go get Maria and hurry back.

My water broke and my body seemed to take over. I grabbed a

smooth wooden hand-rail that felt good to hold on to. Carlos used a cool washcloth on my head and it gave me something to focus on. Maria gave me a pillow. All I could do was push as easy as my body would allow and then pant when Betsy said "Easy or Pant". She told me I was doing great, which steadied my confidence. Brace, push, pant and look at the nice, pastel Indian design going around the top of the walls! The next thing I heard was a wonderful cry. Betsy had him on my chest. "It's a boy! Look at his hair!" My



Skyler Vicente with midwife Betsy.

thoughts were two way. First relief and then overflowing excitement. I laid back exhausted staring at our new son Skyler. He was gorgeous. Long dark hair and nice skin. He was doing a soft "ah-hh" cry as I cuddled. I felt so mellow as I got to hold him. Maria and Kasey came around and the room felt so happy. The nurse who had checked heartbeats said, "I've stayed overtime. I just had to see!" We thanked her and she left. I was pretty spacey by this time, but was aware that Carlos was cutting the cord. The new nurse wrapped Skyler up and put on his hat. Eventually, we moved to our room, brought in cots and settled in. Skyler was weighed while I ate dinner. He was 7 pounds and 9 ounces and 19 inches long. We ordered a pizza from town and the kids watched TV. Skyler nursed and slept. The kids watched part of the Wizard of Oz before they went off to sleep in another room. Between vital sign checks, I slept pretty well. I felt so at home, that I even felt OK when they took Skyler, and it was totally my choice. I told the nurse to bring him back if he wanted to nurse and he always did. I think Carlos slept, too, although we looked at each other when we heard a baby cry down the hall once. At 5:00 a.m. they rolled Skyler into our room in his little bed and he was sound asleep. I took a hot shower and ate breakfast. Maria and Kasey staggered in and Kasey said he was hungry. Betsy said, "I'll see if I can

get you some cereal!" And she brought back 3 cereals. They checked Skyler's blood twice. I couldn't believe they were able to discharge us so early. Five or six different people had to be seen. The birth certificate lady, a water test explained, a student nurse with school questions, a nice big pack of baby diapers and samples, etc.! And of course a bunch of nurses googling over Skyler! Carlos and the kids packed bags and took them to the car. We hugged our midwife Betsy goodbye and took her photo with Skyler. I was wheeled down to the hospital entrance. They were wheeling in a very pregnant girl. I thought, "I'm glad I'm through!" We left about 9:00 a.m. on Feb. 21st, staying only 28 hrs. The drive home was fine. Skyler has been a delight ever since and we all love him very much!

-by Kathy Tobar

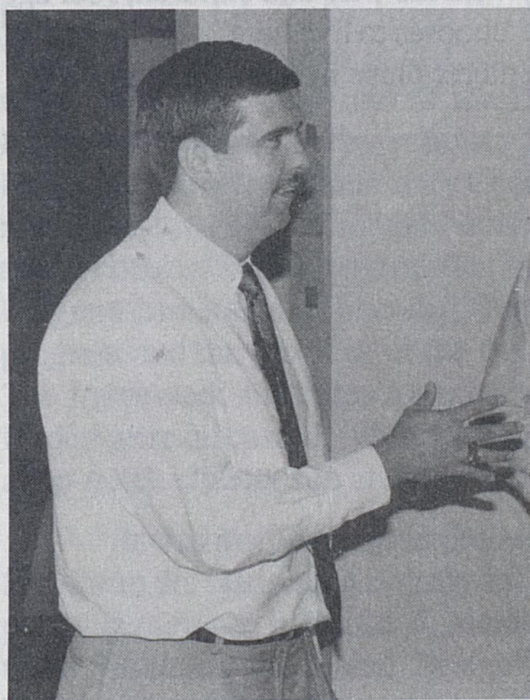
ANNOUNCEMENT

The FNS Washington Committee has sent a gift in honor of Mrs. E. Felix Kloman's 85th birthday. Olivia Kloman, a dear friend of our work since 1968, has served as secretary and chairman of the Washington Committee and is still a staunch supporter, as well as an Honorary Trustee of the Service. She is the mother of courier '84, Olivia "Cis" Chappell, and the grandmother of courier '83, Stephen L. Thomas, Jr.

Meet the Board of Governors

The FNS Board of Governors is responsible for establishing the policies by which FNS is governed, as well as approving the annual budget and overseeing expenditures. Each member of the board brings unique gifts and a personal history of involvement with FNS to his or her position of leadership; and each has a key role to play in the governance of the Service. This is another in our series of profiles on the members of the Board of Governors.

W. Fred Brashear II



W. Fred Brashear II

W. Fred Brashear II's relationship with the Frontier Nursing Service started at birth. Fred was a FNS baby delivered at the old Hyden Hospital supplanted in 1975 by the Mary Breckinridge Hospital. He grew up in what is now known as Bolton House, which is currently used for FNS faculty housing. His parents sold the home to FNS more than twenty years ago during Fred's early teen years and moved to nearby Hurts Creek. He graduated from Leslie County High and Georgetown College at Georgetown Kentucky and returned to Leslie County.

Fred has been the President of the Hyden Citizens Bank for the past eight years. He started working for his father at the bank at the age of fourteen as a janitor. He says, "I learned banking from the bottom up". He and his wife Rhonda, who works as a loan officer at the bank, are both very involved in civic affairs. In addition to being Treasurer of the FNS

Board of Governors, Fred also serves as Chairman of FNS's subsidiary corporation, the Mary Breckinridge Hospital Healthcare Board of Directors.

Fred feels that FNS has contributed much to Leslie County both in quality of life and on an economic basis. "FNS provided health care to the area when no one else would." He added that FNS has always been a major, steady source of employment for Leslie County. He feels the scope of FNS's contribution often goes largely unappreciated.

A bright future is what Fred feels is in store for FNS. He thinks that FNS is starting to focus on what they can do well, on a health care and education basis. Involvement with other health care institutes is inevitable for survival but he feels that FNS is staying true to Mary Breckinridge's vision.

Fred lives in Leslie County with his wife and children, Joel age 10 and Rachael age six, because he "chooses to live here". He invites all to visit what he believes to be "the nicest place in the world to live".

-by Meriwether Wash

BEYOND THE MOUNTAINS

We were tremendously pleased to have Bridget Gallagher of London, England visit us at Wendover. Bridget was a nurse-midwife at FNS from 1952 to 1960. She delivered numerous babies, most of them at home! Cari Michaels, immediate past Wendover Coordinator, will be visiting Bridget in England this fall.

It was a source of special happiness, at our annual meeting at Wendover, that Mrs. Stanleigh Swan, National President of the Daughters of Colonial Wars, was able to attend. Mrs. Swan was accompanied by Stacia Kauffman of Lexington, Kentucky.

A meeting of the Community-Based Nurse-Midwifery Council was held at the home of Eunice "Kitty" Ernst in Perkiomenville, Pennsylvania, July 2. Dr. Joyce Fitzpatrick, Dean of the Frances Payne Bolton School of Nursing at Case Western Reserve University; Dr. Claire Andrews, Chairman of the Department of Community Health Nursing of the Frances Payne Bolton School of Nursing; Dr. Ruth Lubic, Executive Director of Maternity Center of New York; Dr. Judith Treistman, President of the Frontier Nursing Health and Education Corporation, School of Midwifery and Family Nursing, FNS; Kitty Ernst, CNEP Program Director and I attended. Particular aspects of this exciting new program and the progress of the first class of students were reviewed. The framework and dates for transitioning administration of CNEP to Hyden were discussed. With the help of her husband, Kitty has created a top-notch clinical site at her home!

It was my privilege to present the work of the Frontier Nursing Service to the National Academy for State Health Policy at their annual policy conference in Portland, Maine, August 14. The conference was titled "Building the Grand Design". The state politics of improving health access and cost control was one topic discussed. Several problems with improving access to care in our country were identified. First, the United States does not have reliable cost figures regarding what citizens and the government actually spend on health care. Rural and urban areas have been hard hit by low reimbursement levels. Close to 700 hospitals have closed in the 1980's. Although improvements have been made in the Medicaid coverage for pregnant women and children, 30 to 40 mil-

lion people remain uninsured, the majority of which are women and children. Although many of these women work, and are considered middle class, they are often unable to obtain insurance. Businesses want future insulation against the large, unpredictable cost increases of health care delivery. Although 72% to 73% of Americans polled favor a national health plan, there is not that unity of agreement on the design. What is the answer? I believe the FNS demonstration model of family centered care, utilizing nurse-midwives and practitioners backed up by excellent physicians and health care facilities, is a part of the solution.

The most recent write-up of the FNS is in APPALACHIA, the Journal of the Appalachian Regional Commission, Spring 1990. The article by Billie Grier is an accurate story of the Frontier Nursing Service and Mary Breckinridge. The article is illustrated with the beautiful 1930 photographs of Mrs. Jefferson Patterson, nee' Marvin Breckinridge.

SAYINGS OF THE CHILDREN

The Hyden Citizens Bank has a lovely aquarium in the lobby. I was in the cashiers line this summer behind a little blonde boy who appeared to be four years old. "Granny", he said, pointing to a goldfish, "Look at this beautiful catfish!" "Honey, that's a gold fish." "No", he said gravely, "That's a catfish." Granny patiently described the difference between a goldfish and a catfish. As they left the bank, he gave a little wave and whispered, "Goodbye, catfish!" Beauty is in the eye of the beholder.

-by Deanna Severance

Letter From a Friend

The following letter, written to Deanna Severance, Director and CEO of the Frontier Nursing Service, is from Mrs. Henry Ledford (Georgia), of Clay County, Kentucky, a part of FNS' service area. Mrs. Ledford is a trustee of the Frontier Nursing Service and serves on the clinic advisory committee of FNS's Community Health Center.

8-14-90

Deanna,

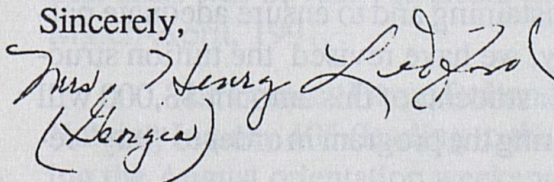
We haven't met. I am a trustee, but because of several factors, have not been attending the meetings, which I enjoy and I appreciate the dedicated people who do. I appreciated and agreed with your article (Spring 1990 Quarterly Bulletin - FNS FUTURES: The Past as a Vision of the Future, pg.1). With so many drug addicted mothers giving birth and drug abuse commonplace where will our educators, health professionals, politicians and home makers come from. There are those too that never use drugs and yet do not enrich children's minds nor push them to open books that make for higher goals and ideas. We could hope that there would be enough of "those persons" to make a difference in their future, our community and in our state and nation. Dedicated nurses in our communities have surely made a difference in our area.

I would like, sometime, to read your views on caring for the elderly in the home. I care for my 99 year old aunt, and 102 year old mother-in-law. This is nothing dull; it is a challenge, hard work, and an accomplishment along with its enjoyment.

I only wish everyone could know the impact that F.N.S. has had on our area. I hope that the progress will continue through every contact - in homes, businesses, schools, and through dedicated officials.

Continued blessings in your work.

Sincerely,

A handwritten signature in cursive script that reads "Mrs. Henry Ledford" with "(Georgia)" written below it in a smaller, simpler script.

Mrs. Henry Ledford (Georgia)

School Notes

Precertification Program

There is a very great need for certified nurse-midwives all over the nation. We have restructured the Precertification program in response to the need because we recognize that there is a large pool of foreign-trained nurse-midwives whose skills are going unused. Our school currently has the only viable program designed and accredited specifically to prepare these nurse-midwives to sit for the national certifying examination given by the American College of Nurse-Midwifery. A Precertification Faculty Workshop was held at the School August 19-21, attended by Midwifery Service Directors from Baylor Hospital (Houston, Texas), Boston City Hospital, Cook County Hospital (Chicago, Illinois), Ramsey Clinic (St. Paul, Minnesota), Tampa General Hospital, Jackson Memorial Hospital (Miami) and Parkland Memorial Hospital (Dallas, Texas). The workshop was an enormous suc-



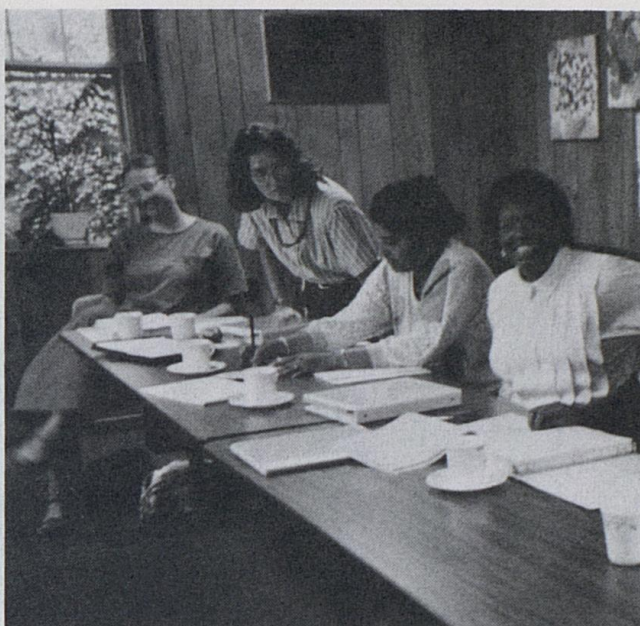
Arrival of Midwifery Service Directors to the Precertification Faculty Workshop.

cess, with all participants committing their facilities as training sites and agreeing to serve as off-campus faculty.

With this new structure, which parallels the community-based BSN-MSN program (CNEP), we anticipate admitting two classes per year, one starting in October and one in April of each year

and including approximately 20 students in each class. In order to make the Precertification Program self-sustaining and to ensure adequate participation of our off-campus faculty, we have revised the tuition structure: the cost will now be \$8,000 per student; of this amount \$3,000 will be returned to the institution sponsoring the program in order to "buy" re-

leased time for faculty. We have worked out a proportionate ratio of faculty time, e.g. one student requires 20% released time, two students require 40% and five students would need one FTE. Such an arrangement will make certain that our students are receiving the kind of educational experience that sustains the reputation of FSMFN while it demonstrates the value we place on quality in-



Midwifery Service Directors enjoy Workshop.

struction. Most of the students in the Precertification program are sponsored by their employers, who pay the tuition through a combination of reimbursement and loan plans.

CNEP On the weekend of August 21-23 forty-two students (the second class of the Pilot Program of CNEP) came to Perkiomenville, Pa. for orientation. It was a most exciting weekend, with a great diversity of students, enormous energy and motivation. There are now 83 students in the program, coming from states all over the country, from Alaska to Florida, from California to Vermont! One of the highlights of the weekend was the spontaneous formation of a very fine choral group, singing old British midwives ditties as well as inspiring anthems. They were so good that we hope to make a professional audio tape for distribution!

The first class is passing through Level III in groups of 8-12 and entering the clinical practice. It is anticipated that some students of the first class will be ready to sit for the national certifying examination in March-April, 1991.

The Frances Payne Bolton School of Nursing (CWRU) offered Nursing Inquiry 405 (leading to the MSN degree) immediately following the August orientation weekend, and 30 students attended. The in-



Team work exercise during CNEP weekend in Perkiomenville, Pa.

tensive format suited the students well, and the instructor rated their performance as excellent.

We are gearing up to admit the first CNEP class to Hyden in August, 1991. In preparation, we are revising our Student Affairs office, computerizing records and the operation of financial aid programs. There are some new office staff coming on

board, and I hope you will have the opportunity to meet them all.

Pilot Program in Rural Nurse-Midwifery Education (University of New Mexico). Dr. Nancy Clark reports that there are eleven students in the class, six of whom are being supported by the Public Health Service. Eighteen thousand dollars was awarded by the Division of Nursing in the form of student traineeships and this has been distributed among the remaining unfunded students.

-by Judith Treistman

Field Notes

Our spring working at Wendover started a wealth of changes at the Frontier Nursing Service headquarters. After coming together and digging into the first layer of debris and overgrowth that covered the Wendover grounds, the people of Leslie County have returned to Wendover to reminisce with friends and relatives and continue its restoration.

Our new Wendover maintenance staff has been busy repairing stone retaining walls and clearing out kudzu vine. A group of Leslie County residents have formed a Garden Club and spend time planting and weeding out flower beds. The Wendover gardens have sprung into life once again. The couriers have pitched in to help the gardeners and clean up the litter along the road. It is amazing what can be accomplished in such a short period of time!

All our efforts at Wendover have only increased our numbers of visitors. The guest who came perhaps the furthest distance had been an FNS midwife in 1960 and took her first opportunity to come back and visit those she had cared for. Bridget Gallagher came to Wendover from London, England this past spring. She spent several days catching up on the news of the families near the Brutus Clinic where she had worked from 1952-1960. The couriers enjoyed hearing her stories and some were able to experience first-hand the kind of problems our early nurses must have encountered as they took a memorable ride down Hell-For-Certain creek. I think they are grateful for the few paved roads we have now!

The Frontier Nursing Service continues to be a favorite field trip for nursing colleges around Kentucky and in other states. We have had tour groups from Canton, Ohio, Carroll College in Wisconsin, the University of Louisville and Lees College in Jackson, Kentucky. Most of the faculty members escorting these groups have been here year after year and continue to include us as part of their school curriculum.

We held the annual Old Timers dinner on May 19th. The former Wendover office workers once again gathered for a traditional dinner of turkey hash, spoon bread and black bottom pie as they reminisced about days gone by. They graciously contributed toward a new supply of

garden tools for Wendover and an ice machine for the Big House kitchen. We are so grateful for their dedication to Wendover.

On June 15th we held the first annual "Community Service Awards Banquet". The evening of the Board of Governors meeting more than sixty of FNS's friends gathered with the board members in the Wendover Big House. Awards were presented to community members who have been supportive of the works of the Frontier Nursing Service. This tradition will be repeated as part of the Board meeting each spring.

I am sorry to say that it is time for me to say good-bye. I will soon return to Minneapolis, MN . It has been wonderful to be a part of the Frontier Nursing Service and I will miss Wendover and all the people I have met. However, I leave knowing Wendover will be in good hands. Susan Hudgins from Boxboro, MA has joined us and will be assuming responsibility for Wendover and the courier program. She is enthusiastically carrying on the current Wendover projects and is making plans for numerous other improvements she will soon be beginning. It has been inspirational to work for an organization started so many years ago by a woman so ahead of her time. As so many have said before, the Frontier Nursing Service goes on and on, and as it changes, it continues to serve a vital role in the health and well-being of the people. I have been honored to be a part of such a service.

-by Cari Michaels

Courier News

The courier job is somewhat different than it had been. Couriers are once again assisting the midwives deliver babies and offering comfort to the patient by talking with her, giving back rubs, running errands and doing whatever is needed. They are so excited to be a part of the delivery process! The couriers are spending more time at the Kate Ireland Women's Health Care Center. They also continue to tutor and deliver supplies to clinics and work at Wendover. We especially need couriers interested in being literacy volunteers while they are here. Our county literacy program is starting some new projects that can use people who have an interest in teaching people of all ages in both individual and

group settings.

Worthy Tuttle Trufant 1965 wrote to update us on her activities. She writes about the midwife-attended birth of her son. She is now a nephrology social worker for 23 northern Michigan counties. She is thankful for her courier experience which she says motivated her to work in the healthcare system.

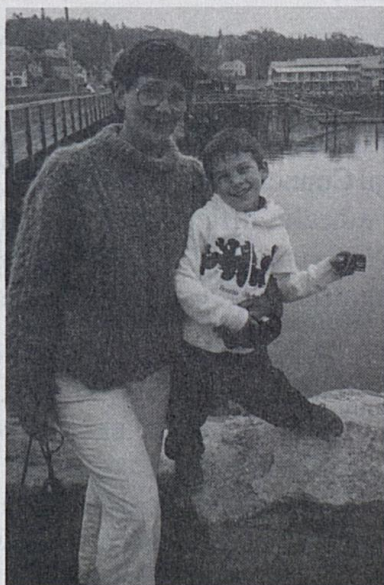
Barbara West 1988 writes "thanks to my experience at FNS I'll be starting my training to become a midwife this fall in Yale's 3-year MSN program. The three births I was able to attend in Kentucky led me to be a real labor support person at four births this past summer in California where I was working in a prenatal clinic for low-income women.

James Parton 1920's sends an announcement of his marriage to Ruth Dawkins on July 20, 1990.

Dr. Horace F. Henriques, III married Kathleen Rosenauer on June 9, 1990 in Tahoe City, California. Dr. Henriques is a Trustee and was a volunteer during the summer of 1970. The couple will reside in Washington, D.C.

-by Cari Michaels

Welcome



Susie Hudgins with grandson.

Susie Hudgins wanted to become a courier in her late teens but marriage and three children put these plans on hold. But 28 years later Susie came to Wendover as a courier. She came for six weeks and stayed for four months. She fell in love with Wendover and accepted the job as Courier Coordinator and Wendover Manager when Cari announced her plans to leave. Susie wants to continue the restoration of the Wendover buildings and grounds and enjoys the many hats that her position requires her to wear.

IN MEMORIAM

These friends have departed this life in recent months. We wish to express our sympathies to their families, and our gratitude for their interest in our work.

Miss Margaret Oetjen
Chicago, Il.

FNS staff nurse in the 1930's.

Mrs. Earl E. Keen
Hyden, Ky.

Long-time Hyden businesswoman and member of the Mary Breckinridge Hospital Auxiliary.

Mrs. Robert A. Stevenson
Acton, Ma.

Mother of Susan Hudgins, Coordinator of the Courier/Volunteer Program at Wendover. Mrs. Stevenson was a loyal supporter of FNS since her interest in our work began in 1964.

Mrs. Samuel Newson
Chocorua, N.H.

Courier (1930's), Sylvia Bowditch, who continued her interest in FNS through the years.

Dr. Louis M. Hellman
Washington, D.C.

We are sorry to report the passing of this friend and humanitarian. Dr. Hellman honored the FNS by serving on its National Medical Council from 1966 to 1987. He spent many years in Government service as a health official and was an advocate of the wider use of nurse-midwives, even visiting Wendover upon occasion. In 1976, Dr. Hellman received the Distinguished Service Award of the American College of Obstetrics and Gynecology.

Mrs. R. Latane Montague
Alexander, Va.

Frances Breckinridge Wilson Montague, whose family ties to FNS have always been strong, was a former member of our Washington Committee.

Mrs. George J. Mead
West Hartford, Ct.

Mrs. Mead, one of our most ardent and faithful supporters since 1941, chaired the FNS Hartford Committee in the early 60's. She was a special friend of Mary Breckinridge who often stayed with Mrs. Mead during visits to Hartford for speaking engagements.

By including FNS in their Wills, the following friends have made a continuing affirmation of interest and belief in the work of Frontier Nursing Service. These bequests are added to FNS Endowment Funds so that we may continue to care for mothers and babies in years to come. We extend our deepest gratitude to them for their years of loyalty and support.

Mr. David D. Knox
Stonington, Ct.

Mrs. Winifred Moon
Waverly, Oh.

MEMORIAL GIFTS

We wish to express our deep appreciation to these friends, who have shown their love and respect for the individuals named below by making supporting contributions in their memory to the work of the Frontier Nursing Service:

Mr. Eddie J. Moore

Mrs. Nancy Moore
Mr. and Mrs. J.G. Morgan

Mr. Grant E. Beverly

Katharyn Z. Beverly

Mrs. Joan Malley Bemis

Mrs. Spencer S. Furbush
Mrs. Jean R. Latchaw

E. G. Garrard

Lucie G. Kramer

Tina Stallard

Mr. and Mrs. Bruce Stallard

Claire R. Yonan

Wilbur E. Yonan

Helen Blakeslee Russell

Mr. Alan B. Palmer

Edith Verbeck Wood

Wendy Parker-Wood

Betty Childers

Valerie Arcement

Mrs. Norville White

Mrs. E. Howard Goodwin

Mr. Jerome A. Thomas

Mary La Bach Kerr

Mrs. James F. Ramey

Ms. Arte M. Ramey

Mr. Robert W. Rouse

Mr. & Mrs. John H. Kerr, Jr.

Attie Blevins

Linnea Young

Mrs. Horace Fishwick

Miss Ruth Blevins

Mrs. Elizabeth Ann May

Miss Gala Sampliner

Willetta DeLong Tucker Klaren

Mr. and Mrs. Omer Bloyd

Alberta B. Keen

Mrs. Forest F. Campbell

Mrs. Elbert Kuhn

Mr. and Mrs. Henry Ledford

Ms. Louise Wethington

Mr. and Mrs. Perle Asher

Mr. and Mrs. Patrick Quinn

Frances Breckinridge Wilson Montague

Ms. Bessie Mae Brown

Mrs. Paul Vernon Cox

Mr. & Mrs. H. Bartholomew Cox

Mrs. Robert G. Hawley

Mr. & Mrs. Charles R. Hooff, Jr.

Mrs. David B. Karrick, Sr.

Mr. and Mrs. Ronald J. Lang

Mr. and Mrs. John F. Souder, II

Mr. Alexander Wellford

Mrs. John L. Grandin

Mrs. Jefferson Patterson

Mrs. Smith Paul

Mr. and Mrs. C. Stanley Dees

Mr. & Mrs. Otis H. Johnson, Jr.

Mr. & Mrs. Seddon Bruce Sadtler

Lt. Col. & Mrs. Andrew S. Horton

Mercedes M. Gravatt

STAFF OPPORTUNITIES

Because text for the *Bulletin* must go to the printer several weeks before publication, it is not possible for any issue to contain an up-to-date list of job opportunities. Instead, we list types of positions that are most likely to be available and invite anyone qualified and interested to write for current information.

FNS Staff: Openings may occur from time to time in both the professional and technical staffs, with opportunities for certified nurse-midwives, family nurse practitioners, registered nurses, family practice physicians, laboratory technicians, X-ray technicians, and others. For current information, write Eva Morgan, Human Resource Manager, Wendover, KY 41775 (Phone 606-672-2317).

Couriers and Volunteers: This program has an ongoing need for all types of people, with all types of skills. The program is not limited to those interested in a health career. It encourages applications from anyone who is willing to volunteer for a 6- to 8-week minimum period and would like to be exposed to the work of the Frontier Nursing Service. ("You tell us what you can do, and we'll find a job for you.") For current information, write Susie Hudgins, Coordinator of Wendover and the Courier/Volunteer Program, Wendover, Kentucky 41775 (phone 606-672-2318).

Frontier Nursing Service:

A National Demonstration Model for Family Centered Care

In February of 1910, Mary Breckinridge had completed her nurses training, taken the state examination, and was ready for the service which she had prepared herself to render. She had her first service opportunity when she was accepted as a volunteer with the American Committee for Devasted France. It was then she was introduced to British trained midwives. In France midwives were not nurses. In America nurses were not midwives. In England trained women were both nurses and midwives. It grew upon Mary Breckinridge that nurse-midwifery was the logical response to the needs of the young child in rural America. Hence, Mary Breckinridge came to the mountains of Eastern Kentucky in 1923 driven by a need to improve the lives of children. That summer she chose Leslie County as the future site of the Frontier Nursing Service. Later that year she entered the British Hospital for Mothers and Babies. In mid-August 1924, Mary went to Scotland to make a study of the Highlands and Islands Medical and Nursing Service. FNS is an adaptation of the methods used in the Highlands and Islands work.

The way in which the Highlands and Islands Medical and Nursing Service was financed and operated was characteristic of the British philanthropy in that age—private enterprise aided by government grants to bridge the gap between what could be handled by local efforts and the magnitude of the job to be done. The operation provided for nursing districts staffed by qualified nurses who were midwives as well. In an area with several nursing centers, a medical center was located and staffed by a physician with some training in obstetrics and pediatrics. Rural hospitals were set up to serve even larger areas, and transport for patients was arranged out of Highlands and Islands funds.

Upon returning to Eastern Kentucky, Mary went about her work of forming a committee to back her up. On May 28, 1925, the Kentucky Committee for Mothers and Babies held its first meeting in the Assembly

Room at the Capitol Hotel in Frankfort, Kentucky. In 1928, the Frontier Nursing Service was incorporated. This year FNS is 65 years old!

Mary Breckinridge died May 16, 1965. Yet, remarkably, the purpose, philosophy, and structure of FNS have remained fairly constant. Progress in our educational program, support of research efforts, and interest in promoting the FNS method of health care have enhanced developments within the Service and have increased its importance as a model.

Current Structure

The Frontier Nursing Service is now organized into a parent holding company, **FNS, Inc.** with four subsidiary corporations: **Mary Breckinridge Healthcare Inc.**, which includes the district clinics, the Kate Ireland Women's Health Care Clinic, the hospital, and the home health agency; **Frontier Nursing Health and Education Inc.**, which is the school of midwifery and family nursing; **Frontier Nursing Real Estate Inc.**, which holds all assets and properties; and **Frontier Nursing Service Inc.**, our foundation. Each subsidiary corporation is governed by a Board of Directors with final governance resting with the FNS Board of Governors, chaired by Miss Kate Ireland.

Changing Circumstances

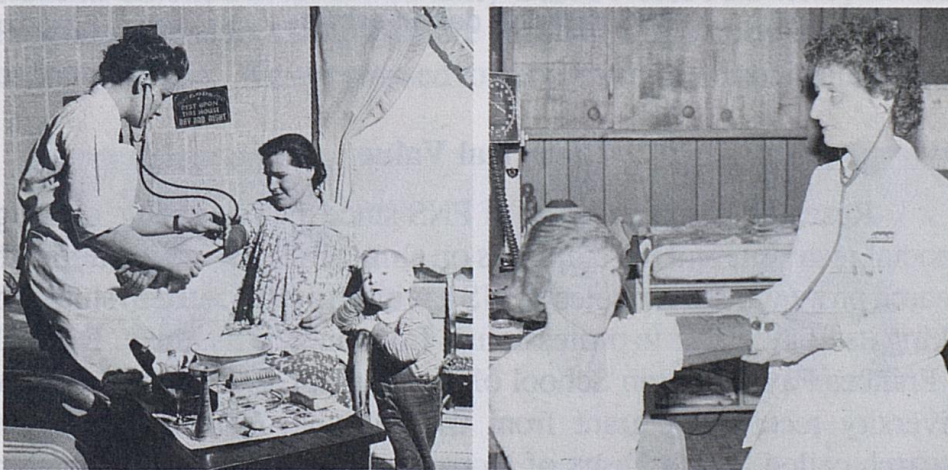
Helen Browne, who remained director until her retirement in 1975, and her successors, Dr. W. B. Rogers Beasley, director until June 1980, Elaine Pendleton, David Hatfield, and now me, face a host of problems and circumstances vastly different from those of the early days. The world of health care has changed drastically, beginning in the 1950s with Medicare and continuing into the 1960s with the Johnson administration's War on Poverty, the Medicaid program, and so forth.

The hospital and home health agency were certified for reimbursement by Medicare/Medicaid in 1966, the first time FNS received extensive governmental support. Increases in funds and programs have resulted in an expansion of services which neither the organization nor its patients could otherwise afford. As in the past, every patient is treated regardless of financial circumstances. Philanthropic support continues

to play a major role in our ability to meet operating expenses.

Home health agency nurses are now responsible for providing care for home-bound patients, and district nurses no longer visit in homes. This change, primarily a result of financial strains and government regulations, has restricted preventive health care education to clinical or classroom settings. It has also prevented home visits by the nurse-midwives. Home deliveries are now rare exceptions because of reimbursement restrictions. Other nursing duties traditionally performed by nurse-midwives are now performed by family nurse practitioners. Reimbursement for services delivered to our homebound elderly and clinic services delivered by our wonderful family nurse practitioners are welcome additions. As you look at the pictures scattered throughout this article, can you identify those from yesterday versus today? Although there have been welcome technological advances in areas of pharmaceutical drugs and equipment, basically, the Frontier Nursing Service works today as then.

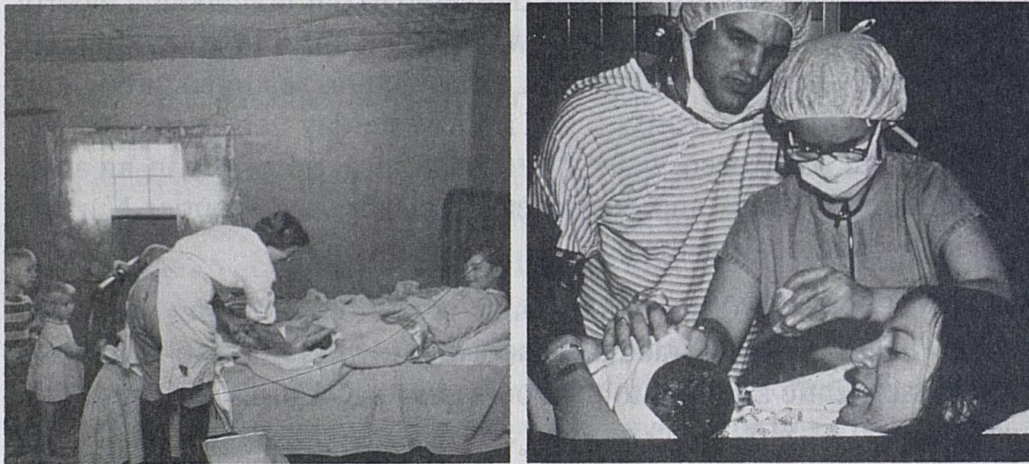
In June 1970 the family nurse practitioner training was combined with the Frontier Graduate School of Midwifery. This change gave official academic sanction to the course in rural district nursing which was a dream of Mrs. Breckinridge. Since 1939, the school has trained



FNS patients get blood pressure checked.

401 nurse-midwives, 3 family nurse associates, 72 family nurses, and 220 family nurse midwives, a total of 696 graduates. On Saturday we graduated our last class of family nurse practitioners, for the time being. Why? The American Nurses Association, which is currently the only

certifying body for family nurse practitioners, has made the criteria for entry level into a Family Nursing program a master of science degree in nursing! You can imagine the impact this has on rural America. Nurses with diplomas and associate degrees are no longer eligible for this advanced training. The majority of registered nurses in rural America attend community colleges and possess associate degrees. I do not quarrel with the need for University trained nurses to fill many positions. However, there is no basis for this rule that relates to quality of care or accessibility.



FNS midwives deliver babies.

Historical Value

Research has been a part of FNS since the beginning, although financial restraints and the emphasis on clinical service have limited the research program. Nevertheless, FNS has often participated in studies by making itself available to professionals from outside its ranks. Recently the Frances Payne Bolton School of Nursing at Case Western Reserve University received a grant from the National Center for Nursing Research called "Sixty Years of Nurse Midwifery: Practice Outcome Analysis". Outcome statistics from the data base will serve as valid and reliable methods for assessing nurse midwifery practice. Nurse-midwives have kept careful statistics on their practice outcomes since FNS began in 1925. The FNS data base reflects nurse-midwifery practice over a long period of time in a stable population. A report by the Metropolitan

Life Insurance Company in the early 1950's on the data from FNS's first 10,000 nurse-midwifery managed births can now be extended and will allow us to look at the results against the background of social and technological change that has recently come to this isolated mountain area. The study will certainly advance the understanding of nursing and midwifery managed care with its implications for health policy and clinical nursing education.

Cooperation not Competition

I have been impressed with the mountain people's pride in themselves and their homeland. However, they continue to have little influence on their own economy and future development. Economic booms and busts are still determined by fluctuations in the need for coal. FNS is also increasingly influenced by outside forces. Major dependence upon government reimbursement rates for indigent care, credentialing rules which limit the nurses who are eligible for advanced education, opposition of some in the medical profession, and so forth, must all be recognized.

Those influences do not immobilize me. FNS currently has 88 students enrolled in the Community-Based Nurse Midwifery Education Program. Close to 15 students are enrolled in the midwifery precertification program. We are pleased to participate in a rural health initiative



FNS nurses check patient's ears.

with the University of Kentucky and Hazard Appalachian Regional

Hospital. As Director of FNS, I have set our motto for the 1990s as cooperation, not competition. If the systems are to work, must we not co-



FNS babies receive their first baths.

operate? Cooperate on a foundation of ethics, integrity, and mutual concern for the people we are fortunate to serve.

-by Deanna Severance

Author's note: Many thanks to Dale Deaton and the "Afterword" he wrote in the 1981 edition of Wide Neighborhoods. I have quoted liberally.

SIXTY-FIFTH ANNUAL REPORT
of the
FRONTIER NURSING SERVICE, Incorporated
for the Fiscal Year
May 1, 1989 to April 30, 1990

PREFACE

As has been our custom since we were one year old, we present our annual report of the fiscal affairs and of the field operations of the Frontier Nursing Service, Incorporated.

We have, as in previous years, divided our report into two sections. One section is about money, and one section is about work.

I

FISCAL REPORT

The figures that follow are taken from the Balance Sheet, the Exhibits and Schedules of the Audit for the fiscal year which ended April 30, 1990.

Ernst & Young

REPORT OF INDEPENDENT AUDITORS

Board of Governors
FNS, Inc.

We have audited the accompanying consolidated balance sheets of FNS, Inc. and subsidiaries as of April 30, 1990 and 1989, and the related consolidated statements of revenues and expenses, changes in fund balances and changes in financial position for the years then ended. These financial statements are the responsibility of the FNS, Inc.'s management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with generally accepted auditing standards. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the consolidated financial position of FNS, Inc. and subsidiaries at April 30, 1990 and 1989, and the consolidated results of their operations, changes in their fund balances and changes in their financial position for the years then ended in conformity with generally accepted accounting principles.

Ernst & Young

June 27, 1990

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CONSOLIDATED BALANCE SHEETS

FNS, INC.

	April 30	
	1990	1989
<u>GENERAL FUNDS</u>		
<u>CURRENT ASSETS</u>		
Cash and short-term investments	\$ 217,613	\$ 146,937
Accounts receivable--patients--less allowances for uncollectible accounts of \$558,000 in 1990 and \$480,000 in 1989	1,022,468	792,309
Inventories	188,379	164,973
Prepaid expenses and other current assets	<u>186,821</u>	<u>220,868</u>
TOTAL CURRENT ASSETS	1,615,281	1,325,087
<u>PROPERTY AND EQUIPMENT</u>		
Land	135,163	135,163
Buildings	3,405,558	3,207,163
Equipment	<u>3,697,130</u>	<u>3,618,177</u>
	7,237,851	6,960,503
Less accumulated depreciation	<u>4,356,700</u>	<u>3,942,173</u>
	2,881,151	3,018,330
<u>ASSETS WHOSE USE IS LIMITED</u>		
Consolidated Fund	3,216,429	3,614,058
Depreciation Fund	23,058	74,652
Education Fund	3,231,034	3,245,443
Kate Ireland Women's Health Care Center Fund	<u>437,658</u>	<u>435,978</u>
	<u>6,908,179</u>	<u>7,370,131</u>
	<u>\$11,404,611</u>	<u>\$11,713,548</u>
<u>RESTRICTED FUNDS</u>		
<u>ENDOWMENTS</u>		
Cash and investments	\$ 1,243,547	\$ 1,211,280
Student loan receivables	115,011	108,270
	<u>\$ 1,358,558</u>	<u>\$ 1,319,550</u>

Ernst & Young

	April 30	
	1990	1989
<u>GENERAL FUNDS</u>		
<u>CURRENT LIABILITIES</u>		
Accounts payable	\$ 478,934	\$ 399,366
Accrued salaries and amounts withheld from employees	208,651	223,390
Accrued vacation expense	166,353	198,300
Unexpended special purpose funds	146,229	133,712
Payable to third party programs	35,637	223,182
Other current liabilities	287,092	51,334
TOTAL CURRENT LIABILITIES	<u>1,322,896</u>	<u>1,229,284</u>
FUND BALANCE	10,081,715	10,484,264
<u>COMMITMENTS AND CONTINGENCIES</u>		
	<u>\$11,404,611</u>	<u>\$11,713,548</u>
<u>RESTRICTED FUNDS</u>		
<u>FUND BALANCE</u>		
Fund balance before net unrealized loss on noncurrent marketable equity securities	\$ 1,365,482	\$ 1,319,550
Net unrealized loss on noncurrent marketable equity securities	(6,924)	
	<u>\$ 1,358,558</u>	<u>\$ 1,319,550</u>

See notes to consolidated financial statements.

CONSOLIDATED STATEMENTS OF REVENUES AND EXPENSES

FNS, INC.

	Year Ended April 30	
	1990	1989
PATIENT SERVICE REVENUES		
Mary Breckinridge Hospital:		
Inpatient services	\$ 4,493,651	\$ 3,905,882
Outpatient services	3,284,426	2,771,874
Clinics	1,508,096	1,715,446
Home Health Services	557,660	498,243
	<u>9,843,833</u>	<u>8,891,445</u>
Less indigent care, contractual allowances, bad debts and other revenue deductions	3,008,097	2,244,896
NET PATIENT SERVICE REVENUES	<u>6,835,736</u>	<u>6,646,549</u>
OTHER OPERATING REVENUES	<u>735,440</u>	<u>824,322</u>
TOTAL OPERATING REVENUES	<u>7,571,176</u>	<u>7,470,871</u>
OPERATING EXPENSES		
Salaries and wages	4,804,925	4,743,067
Fringe benefits	724,823	744,653
Medical services, supplies and other expenses	3,270,070	2,820,083
Facility costs	1,086,874	1,092,828
TOTAL OPERATING EXPENSES	<u>9,886,692</u>	<u>9,400,631</u>
EXCESS OF EXPENSES OVER REVENUES FROM OPERATIONS	(2,315,516)	(1,929,760)
NONOPERATING REVENUES AND EXPENSES		
Unrestricted donations:		
Deposited into Education Fund	56,727	139,772
Deposited into Consolidated Fund	708,447	333,106
Retained for use in operations	423,606	398,640
Deposited into Kate Ireland Women's Health Care Center Fund	17,725	68,033
Unrestricted income from endowment and other funds	30,857	31,196
Investment income from assets whose use is limited	644,817	558,437
(Loss) gain on sale of investments	(4,276)	36,551
Other nonoperating revenues	11,109	16,610
	<u>1,889,012</u>	<u>1,582,345</u>
EXCESS OF EXPENSES OVER REVENUES	<u>\$ (426,504)</u>	<u>\$ (347,415)</u>

See notes to consolidated financial statements.

CONSOLIDATED STATEMENTS OF CHANGES IN FUND BALANCES

FNS, INC.

Year Ended April 30, 1990 and 1989

	General Funds	Restricted Funds
Balances at May 1, 1988	\$10,493,327	\$1,245,155
Excess of expenses over revenues for the year ended April 30, 1989	(347,415)	
Restricted contributions used for purchase of property and equipment	121,560	
Contributions restricted for specific purpose (additions to endowment)		225
Restricted revenue earned by endowment funds		3,581
Gain on sale of investments of endowment funds		27,669
Decrease in net unrealized loss on noncurrent marketable equity securities	216,792	42,920
Balances at April 30, 1989	<u>10,484,264</u>	<u>1,319,550</u>
Excess of expenses over revenues for the year ended April 30, 1990	(426,504)	
Restricted contributions used for purchase of property and equipment	23,955	
Contributions restricted for specific purpose (additions to endowment)		25,321
Restricted revenue earned by endowment funds		2,279
Gain on sale of investments of endowment funds		18,332
Increase in net unrealized loss on non- current marketable equity securities		(6,924)
Balances at April 30, 1990	<u>\$10,081,715</u>	<u>\$1,358,558</u>

See notes to consolidated financial statements.

CONSOLIDATED STATEMENTS OF CHANGES IN FINANCIAL POSITION

FNS, INC.

	Year Ended April 30	
	1990	1989
Cash provided (used)		
OPERATIONS		
Excess of expenses over revenues from operations	\$(2,315,516)	\$(1,929,760)
Charges to expense not requiring the use of cash--depreciation	<u>414,527</u>	<u>394,722</u>
	(1,900,989)	(1,535,038)
Certain working capital changes:		
Accounts receivable	(230,159)	170,519
Accounts payable	79,568	(571,835)
Payable to third party programs	(187,545)	(275,483)
Other	<u>212,229</u>	<u>(137,936)</u>
CASH USED IN OPERATIONS	(2,026,896)	(2,349,773)
Nonoperating revenues and expenses	<u>1,889,012</u>	<u>1,582,345</u>
TOTAL CASH USED	(137,884)	(767,428)
FINANCING AND INVESTMENT ACTIVITIES		
Property, plant and equipment:		
Purchases and donations	(277,347)	(258,337)
Restricted contributions	<u>23,955</u>	<u>121,560</u>
CASH USED	(253,392)	(136,777)
CASH USED BEFORE TRANSFER FROM ASSETS WHOSE USE IS LIMITED	(391,276)	(904,205)
Net decrease in assets whose use is limited	461,952	621,852
Decrease in net unrealized loss on noncurrent marketable equity securities	<u>461,952</u>	<u>216,792</u>
	461,952	838,644
Increase (decrease) in cash and short-term investments	70,676	(65,561)
Cash and short-term investments at beginning of year	<u>146,937</u>	<u>212,498</u>
CASH AND SHORT-TERM INVESTMENTS AT END OF YEAR	<u>\$ 217,613</u>	<u>\$ 146,937</u>

See notes to consolidated financial statements.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

FNS, INC.

April 30, 1990

NOTE A--ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Organization: FNS, Inc. (the Service) was organized in 1925 as a nonprofit charitable organization. The Service's original purpose was to provide needed health services in the Appalachian area. During its early years, the Service was the only provider of health services in the area and it remains the largest provider of health services in Leslie County and the portion of surrounding counties comprising its service area. In 1939, the Service established a midwifery school. The Service currently operates an accredited midwifery and family nursing school, a home health agency, a 40 bed hospital, and provides primary care services through the Hyden Clinic, the Kate Ireland Women's Health Care Center, and District Nursing Clinics. The Service has historically been dependent on charitable contributions to fund a significant portion of the costs of services and programs.

Principles of Consolidation: The Service consists of the following nonprofit entities:

FNS, Inc. - Parent holding company of the Service. Prior to May 1, 1989, the name of this entity was Frontier Nursing Service, Inc.

Mary Breckinridge Healthcare, Inc. - Subsidiary responsible for operating the hospital, home health agency and clinics.

Frontier Nursing Health and Education, Inc. - Subsidiary responsible for operating the midwifery and family nursing school.

Frontier Nursing Service, Inc. - Subsidiary responsible for maintaining the investment portfolio of the Service.

FNS Real Estate, Inc. - Subsidiary responsible for holding and managing the real estate owned by the Service.

The consolidated financial statements include the accounts and transactions of the above entities. Significant intercompany transactions and accounts have been eliminated in consolidation.

Tax Status: The Service has received a determination from the Internal Revenue Service (IRS) that each of the nonprofit entities qualifies as tax-exempt under applicable Internal Revenue Code (IRC) sections.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS--Continued

FNS, INC.

NOTE A--ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES--
Continued

Patient Service Revenues: Patient service revenues are recorded at established rates. Contractual allowances, indigent care, and provisions for bad debts are reported as deductions from patient service revenues.

Unrestricted Donations and Grants: Donations and grants which are not restricted by donors are reported as nonoperating revenues. Bequests under wills are recorded when received by the Service.

Investments: Investments in marketable equity securities are stated in the financial statements at the lower of their aggregate cost or market value. To reduce the carrying amount of the Restricted Funds noncurrent marketable equity securities portfolio to market, which was lower than cost at April 30, 1990, a valuation allowance in the amount of \$6,924 was established by a charge to the respective balance representing the net unrealized loss. Such valuation allowances were not required as of April 30, 1989, as the market value of the noncurrent marketable equity securities portfolio exceeded cost at that date. Investments other than equity securities are stated in the financial statements at cost, or if donated, at fair market value at the date of donation. Gain or loss from sale of investments is the difference between proceeds received and the carrying value of the investment sold. Unrealized gains or losses are not included in the accompanying financial statements, other than net unrealized losses on marketable equity securities as described above.

Assets Whose Use is Limited: Unrestricted resources which are designated by the Service for special uses are reported as assets whose use is limited. The Board of Governors has designated the following funds to accumulate monies for the indicated purposes.

The Consolidated Fund accumulates funds for such operating and general purposes as the Board may determine.

The Education Fund includes all donations specified by the donor for this fund and unrestricted legacies and bequests received from May 1981 through April 1985. It accumulates funds until such time as they are needed for the operation of the educational programs.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS--Continued

FNS, INC.

NOTE A--ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES--
Continued

The Depreciation Fund accumulates funds for replacement, expansion or improvements of the Service's facilities.

The Kate Ireland Women's Health Care Center Fund accumulates funds until such time as they are needed for the operation of the Kate Ireland Women's Health Care Center.

Income from the principal portion of the Consolidated Fund is to be used to subsidize care for indigent patients unless such income is specifically designated by the Board for other uses. Income from the Education, Depreciation, and Kate Ireland Women's Health Care Center Funds is retained in the principal of the funds until expended for the designated purposes.

Restricted Funds: Restricted funds represent endowments, the principal of which cannot be expended. Income from such endowments is available for operating purposes and is reported as revenue when earned in accordance with the donors' instructions.

FNS, Inc. is also the income beneficiary of certain trust funds which are not administered or controlled by the Service. Accordingly, such funds are not included in the balance sheets at April 30, 1990 and 1989. Income received from such funds was \$43,725 and \$49,878 for the years ended April 30, 1990 and 1989, respectively.

Resources restricted by donors for additions to property are recorded as increases to the general fund balance when expended for the purposes intended. Resources restricted by donors for specific operating purposes are credited to other operating revenues when expended for the purposes intended.

Inventories: Inventories, principally medical supplies and drugs, are stated at cost (first-in, first-out method) which is not in excess of market.

Property and Equipment: Property and equipment is stated at cost, or fair market value at date of donation for items donated to the Service. Depreciation has been computed on the straight-line method over the estimated useful lives of the respective assets.

Reclassifications: Certain 1989 amounts have been reclassified to conform with 1990 classifications.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS--Continued

FNS, INC.

NOTE B--MEDICARE AND MEDICAID PROGRAMS

The Service participates in the Medicare and Medicaid Programs. Approximately 23% and 21%, respectively, of the Service's patient service revenues are derived from services to patients covered by these Programs.

Medicare: Medicare payments for inpatient services (excluding capital costs) are made based upon the patient's diagnosis (DRG), irrespective of cost. The diagnosis upon which payment is based is subject to review by Program representatives. The Program reimburses the Hospital for capital costs, as defined, and certain outpatient services based upon cost. Such reimbursable costs are determined from annual cost reports filed with the Program, which are subject to audit by the Program.

Medicaid: The Medicaid Program reimburses the Hospital on a prospectively determined rate per patient day for inpatient services and a predetermined percentage of covered charges for outpatient services.

Home Health Agency: The Medicare and Medicaid Programs reimburse the Service for services provided by the Home Health Agency on the basis of cost, subject to certain limits. Such reimbursable costs are determined from annual cost reports filed with the Programs. The cost reports are subject to audit by the respective Programs.

NOTE C--INVESTMENTS

The carrying value and approximate market value of investments at April 30, 1990 and 1989 are summarized as follows:

	1990		1989	
	Carrying Value	Market	Carrying Value	Market
Investments recorded in:				
Assets whose use is limited:				
Consolidated Fund:				
Cash	\$ 252,150	\$ 252,150	\$ 202,223	\$ 202,223
U.S. Government obligations	601,844	606,812	994,921	1,001,483
Corporate bonds	652,656	819,625	652,656	778,187
Common stocks	1,896,184	2,049,725	1,950,663	2,162,338

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS--Continued

FNS, INC.

NOTE C--INVESTMENTS--Continued

	1990		1989	
	Carrying Value	Market	Carrying Value	Market
Due to Restricted Funds	(186,405)	(186,405)	(186,405)	(186,405)
	<u>3,216,429</u>	<u>3,541,907</u>	<u>3,614,058</u>	<u>3,957,826</u>
Depreciation Fund:				
Cash	23,058	23,058	74,652	74,652
Receivable from General Funds	27,000	27,000		
Less intrafund amounts	(27,000)	(27,000)		
	<u>23,058</u>	<u>23,058</u>	<u>74,652</u>	<u>74,652</u>
Education Fund:				
Cash	1,116,450	1,116,450	250,521	250,521
U.S. Government obligations	2,001,563	2,017,810	2,994,922	3,004,370
Common stocks	113,021	111,520		
	<u>3,231,034</u>	<u>3,245,780</u>	<u>3,245,443</u>	<u>3,254,891</u>
Kate Ireland Women's Health Care Center Fund:				
Cash	22,361	22,361	35,603	35,603
U.S. Government obligations	395,370	400,925	400,375	405,624
Common Trust Fund	19,927	19,662		
	<u>437,658</u>	<u>442,948</u>	<u>435,978</u>	<u>441,227</u>
TOTAL ASSETS WHOSE USE IS LIMITED	<u>\$6,908,179</u>	<u>\$7,253,693</u>	<u>\$7,370,131</u>	<u>\$7,728,596</u>

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS--Continued

FNS, INC.

NOTE C--INVESTMENTS--Continued

	1990		1989	
	Carrying Value	Market	Carrying Value	Market
Restricted Funds:				
Cash due from				
General Funds	\$ 9,480	\$ 9,480	\$ 13,942	\$ 13,942
U.S. Government obligations	1,388	1,388	113,482	126,069
Investments in common trust funds	<u>1,053,198</u>	<u>1,046,274</u>	<u>897,451</u>	<u>913,370</u>
Valuation allowance	(6,924)			
	<u>1,039,350</u>	<u>1,046,274</u>	<u>897,451</u>	<u>913,370</u>
Due from assets whose use is limited--				
General Funds	<u>186,405</u>	<u>186,405</u>	<u>186,405</u>	<u>186,405</u>
TOTAL INVESTMENTS OF RESTRICTED FUNDS	<u>\$1,243,547</u>	<u>\$1,243,547</u>	<u>\$1,211,280</u>	<u>\$1,239,786</u>

During 1990 and 1989, the Board of Governors waived repayment of approximately \$500,000 and \$1,875,000, respectively, of intrafund loans advanced from the Depreciation Fund for working capital purposes, including current year loans.

NOTE D--RETIREMENT PLANS

The Frontier Nursing Service, Inc. Capital Accumulation Plan (Plan), a non-contributory defined contribution retirement plan, was established effective January 1, 1986, and covers substantially all Service employees. Employer contributions are determined by the Board of Governors annually and are allocated among Plan participants on the basis of eligible employees' salaries. Plan expense was \$92,000 and \$137,000 for the years ended April 30, 1990 and 1989, respectively.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS--Continued

FNS, INC.

NOTE E--RELATED ORGANIZATION

Mary Breckinridge Housing, Inc. (Project) is a nonprofit organization incorporated April 4, 1984, for the purpose of constructing and operating housing for the elderly and handicapped. In 1989, the Service contributed approximately \$31,000 to the Project to facilitate closing permanent financing with the Federal Housing Administration. The Service has no legal obligation for future contributions to the Project.

NOTE F--COMMITMENTS AND CONTINGENCIES

The Service insures for medical malpractice losses through claims-made policies, and records reserves for deductibles for potential claims, based on their best estimates. In the opinion of management, such insurance and estimated reserves for deductibles are adequate to cover significant losses, if any. Should the claims-made policies not be renewed or replaced with equivalent insurance, claims based upon occurrences during their terms but reported subsequently will be uninsured. The Service intends to continue carrying such insurance.

In October 1989, the Service settled a suit alleging violation of the Federal antitrust laws and such settlement had no significant effect on the accompanying consolidated financial statements.

FRONTIER NURSING SERVICE, INCORPORATED
CONTRIBUTIONS PLACED IN TRUST

May 1, 1989 to April 30, 1990

Funds which are placed in trust are a measure of strength for Frontier Nursing Service as we fulfill our purpose and plan for a solid future. This is a listing of previous trust funds which had additions, and new contributions which were placed in trust during this fiscal year.

- Nursing Education Enrichment Drive
- Friends Fund
- Kate Ireland Women's HealthCare Center
- Mary Breckinridge Hospital Endowment
- Lucie Wilshire Graham Memorial
- Anne Steele Wilson Memorial
- Wilson Neel Memorial Baby's Crib
- Hyden Hospital Inpatient Care Restricted Fund
- Elizabeth Canby Bradford duPont Memorial
- Gertrude E. Randall Estate
- Nancy Harmon Ruekberg Estate
- Margaret H. Jones Estate
- Ruth I. Bigler Trust
- Dorothy Humphreys Hinitt Estate
- Helen R. Conger Estate
- Gene Walker Crary Estate
- Anna Mayhew Ratliff Estate
- Lois H. Kroll Estate
- Theodosia T. Ross Bauer Estate

**FRONTIER NURSING SERVICE, INCORPORATED
LEXINGTON, KENTUCKY
STATEMENT OF DONATIONS AND SUBSCRIPTIONS PAID
May 1, 1989 to April 30, 1990**

SUMMARY

Geographical Summary	Contributions
Baltimore	\$ 4,232
Boston	22,491
Chicago	7,550
Cincinnati	10,031
Cleveland	94,862
* Daughter of Colonial Wars	8,142
Detroit	16,179
Hartford	2,043
** Kentucky:	
Blue Grass	37,814
Louisville	19,406
Miscellaneous	29,798
Minneapolis	4,009
New York	63,239
Philadelphia	20,802
Pittsburgh	36,584
Princeton	1,235
Providence	390
Rochester	4,990
Washington, D.C.	27,059
Other areas	<u>103,229</u>
Total	\$514,085
 Committee Benefits:	
Boston	13,000
Philadelphia	4,200
Washington	<u>18,750</u>
Total	\$35,950
 Total Contributions Above:	
Restricted	122,929
Unrestricted	391,156
Benefits	<u>35,950</u>
Total	\$550,035
 * Donations from various State Chapters	
** Total for Kentucky	\$87,018

**II
REPORT OF OPERATIONS**

**Comparative Analysis of Service Provided
on the Two Fiscal Years 1989 and 1990**

HOSPITAL

	FY ENDING 4-30-89	FY ENDING 4-30-90
ALL PATIENTS (Excluding newborn):		
Percent of occupancy	29.6%	31.1%
Patient days - total	4,230	4,716
Medical - Surgical Unit	3,364	3,589
Obstetrical Unit	866	862
Admissions - total	1,137	1,116
Medical - Surgical Unit	725	693
Obstetrical Unit	412	404
Average Daily Census	11.6	12.9
Average Length of Stay	3.7	4.1
NEWBORN:		
Percent of Occupancy	19.1%	20.1%
Patient Days - total	696	732
Admissions - total	345	343
Average Daily Census	1.9	2.0
Average Length of Stay	2.0	2.1
DELIVERIES - TOTAL	344	339
OPERATIONS - TOTAL	446	510
Major	159	150
Minor	287	360
In-patient	239	265
Out-patient	207	245
ENT	2	3
C-Section	75	73
ANESTHESIA - TOTAL	446	509
Spinal	28	54
General	336	355
Local	82	89
DEATHS - TOTAL	32	36
Institutional (over 48 hours)	29	29
Institutional (under 48 hours)	3	5
Non-institutional (OPD/ER)	14	16

	1989	1990
X-RAY EXAMINATIONS - TOTAL	7,057	7,648
In-patient	584	664
Out-patient	6,289	6,870
ECHO		
In-patient	47	48
Out-patient	137	66
LABORATORY PROCEDURES		
TOTAL	88,443	104,863
In-patient	18,257	24,625
Out-patient	34,706	43,304
Referred in	35,480	36,934
Referred out (not in total)	6,057	5,877
PRESCRIPTIONS FILLED		
Out-patient Treatments	55,346	53,944
Unit Dose (in-patient) - total	53,665	59,197
PHYSICAL THERAPY TREATMENT		
TOTAL	3,252	2,802
In-patient Treatments	329	368
Out-patient Treatments	2,923	2,434
Days of Operation	234	256
ELECTROCARDIOGRAMS -		
TOTAL	1,956	1,909
In-patient	504	534
Out-patient	1,452	1,224
RESPIRATORY THERAPY -		
TOTAL	13,807	17,051
In-patient Procedures	11,330	14,962
Out-patient Procedures	2,477	2,089
HOME HEALTH VISITS - TOTAL	8,782	9,917
Average Visits Per Day	34.3	38.7
EMERGENCY ROOM VISITS -		
TOTAL	6,878	7,416
Average Visits Per Day	18.8	20.3
Days of Operation	365	360
ADMITTED THROUGH EMERGENCY		
ROOM - TOTAL	470	428
MBH (HYDEN) CLINIC VISITS -		
TOTAL	15,376	16,109
Average Visits Per Day	60.1	62.9

Days of Operation	256	256
OB/GYN CLINIC - TOTAL	848	4,895
Average Visits Per Day	10.0	19.1
Days of Operation	256	256
DISTRICT CLINICS - TOTAL	17,071	14,946
Average Visits Per Day	66.7	58.3
BEECHFORK CLINIC - TOTAL	4,847	3,656
Average Visits Per Day	18.9	24.3
Days of Operation	256	150
COMMUNITY HEALTH CENTER TOTAL	5,057	3,385
Average Visits Per Day	19.8	20.8
Days of Operation	256	162
PINE MOUNTAIN CLINIC - TOTAL	2,008	1,851
Average Visits Per Day	7.8	7.2
Days of Operation	256	256
WOOTON CLINIC - TOTAL	5,159	6,051
Average Visits Per Day	20.2	23.6
Days of Operation	256	256

**COURIER AND VOLUNTEER HOURS REPORT
MAY 1, 1989 TO APRIL 30, 1990**

<u>Areas Served</u>	<u>Hours</u>
Clinics	682
Hospital	265
Home Health	441
Administration/Development	212
Community	352
Transportation/Rounds	856
Frontier School	47
KIWHCC	806
Literacy Program	511
Wendover	<u>695</u>
Total number of hours worked	4867
Total number of couriers	25

SIXTY-FIVE YEAR TOTALS - SELECTED DATA

Each year for many years, the Annual Report issue of the Quarterly Bulletin provided cumulative totals of patients registered, maternity cases delivered, and other information of historical interest. As a result of changes in record keeping procedures several years ago, some of this information was reclassified and accounted for differently. It became impossible to develop the data in exactly the same form in which it had been presented for many years.

However, because there continues to be interest in these figures, we now reconstruct the essential information necessary to cover FNS' sixty-five years of operation. These figures should not be understood as audit totals. They are reasonably close approximations as of the close of the fiscal year that ended April 30, 1990.

Patients registered from the beginning (1925)	91,559
Children (estimated)	49,489
Adults (estimated)	42,070
Maternity cases delivered	22,816
Maternity deaths (9 puerperal, 2 cardiac)	11
Number of days of occupancy in FNS hospitals (including old Hyden Hospital, which opened in June, 1928, and Mary Breckinridge Hospital, which opened February 10, 1975) Figures exclude newborn	486,667

FNS, INC.

Director/Chief Executive Officer: Deanna Severance, BSN, MS

FRONTIER NURSING SERVICE, INC.

President: Deanna Severance BSN, MS

Fiscal Services

Chief Financial Officer: Rowena Rollins

Fiscal Services Department Heads:

Data Processing: Alice Stidham
 Patient Accounting: Pam Shepherd
 Purchasing: Nannie Hornsby
 Medical Records: Mallie Noble, ART

Human Resources

Manager: Eva Morgan

Wendover, Courier and Volunteer Program

Coordinator: Susan Hudgins

FNS FOUNDATION, INC.

President: Deanna Severance BSN, MS

Vice President: Sheila Allen, BA

Departments

Editor, Quarterly Bulletin: Meriwether Wash, BS
 Office Manager: Ruth O. Morgan

FNS, REAL ESTATE, INC.

President: Deanna Severance, BSN, MS

FRONTIER NURSING HEALTH AND EDUCATION, INC.

President: Judith Treistman, Ph.D, CNM

Frontier School of Midwifery and Family Nursing at Hyden

Judith Treistman, Ph.D, CNM
 Debra Browning, RN, MSN, CFNP
 Family Nurse Instructor

Frontier School of Midwifery and Family Nursing at University of New Mexico

Nancy Clark, Ph.D, CNM
 Program Director
 Sarah Ragalyi, RN, CNM
 Instructor
 Wendy L. Wagers, MSN, CFNM
 Instructor

Kate Ireland Women's HealthCare Center

Wanda L. Morgan, RN, BS, CFNM
 Midwifery Service Coordinator
 Kathleen Isaac, RN, AD, CFNM,
 Elizabeth A. MacMillan, RN, AA, CFNM
 Karen Beesley, CNM

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Administrator: Charlie Wilson, BS, MA

Coordinators and Department Heads:

Dietetics: Linda Campbell, RD
 Emergency Services: Mable R. Spell, RN, CFNM, CFNP
 Food Service: William L. Peavley
 Housekeeping: William L. Peavley
 Laboratory: Tammy Collett, MLT/ASCP-HEW
 Maintenance: John C. Campbell
 OR Supervisor: Betty McQueen, RN
 Pharmacy: Joe R. Lewis, BS, RPh
 Plant Operations: R.C. Osborne
 Quality Assurance : Betty H. Couch, ART
 Radiology: Glen Hammons, RT
 Respiratory Therapy: Diana Fortney, CRT
 Social Work: Ruth Ann Dome, BSW

Nursing Staff

Head Nurse, Med / Surg: Marie Mitchell, RN
 Head Nurse, OB: Sidney Baker, RN

Medical Staff

Chief of Staff:
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 Ira Azizpour, M.D., Obstetrics/Gynecology

Hyden Clinic

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 Theresa Francis, RN, CFNP

District Clinics Manager: Sharon Koser

Jessie Preston Draper Memorial Nursing Center (Beech Fork)

Susan Davis, FNP
 Sr. Sonia Miley, FNP

Community Health Center (Big Creek)-successor to The Caroline Butler Atwood Memorial Nursing Center (Flat Creek),

The Clara Ford Nursing Center (Red Bird),
 and The Betty Lester Clinic (Bob Fork)
 William Powell, FNP
 Sharon D. Koser, BSN, CFNP

Wooton Center:

Sr. Joan Gripshover, RN, BES, CFNP, Project Director
 Sr. Katherine A. Donohue, RN, MS, FNP

Pine Mountain Center

Gertrude Morgan, BSN, CFNP, Project Director

Home Health Agency

Susan Snider, RN, Director
 Sandra Gross, RN
 Clara Jefferis, RN, BSN, CFNP
 Sandy Mathis, RN
 Deborah Lewis, RN

Frontier Nursing Service, Wendover, Kentucky 41775, 606-672-2317

Mary Breckinridge Hospital, Hyden, Kentucky 41749, 606-672-2901

Frontier School of Midwifery and Family Nursing, Hyden, Kentucky 41749, 606-672-2312

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 Mrs. Samuel H. Ordway, New York, NY
 Mrs. John Sherwin, Willoughby, OH
 Mrs. Ernest R. von Starck, Haverford, PA
 Mrs. Erskine P. Wilder, Barrington, IL
 Mr. Ralph B. Williams, Chestnut Hill, MA
 Miss Barbara Wriston, New York, NY
 Mr. William T. Young, Lexington, KY

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 Dr. Carolyn A. Williams, Lexington, KY
 Mrs. Elsie Maier Wilson, Gainesville, FL

URGENT NEEDS

FNS has an urgent need for the items listed below and hopes that its friends will wish to contribute toward their purchase. Donations should be sent to the Development Office, Frontier Nursing Service, Wendover, Kentucky 41775, where they will be gratefully received.

Wendover:

Combination storm/screen doors (13)	Estimated Cost:	\$650
Storm doors (2)	Estimated Cost:	\$278
Storm door (1)	Estimated Cost:	\$ 89

Home Health:

Portable baby scale (1)	Estimated Cost:	\$ 98
Portable shampoo trays (6)	Estimated Cost:	\$ 48
Fetal Stethoscope (1)	Estimated Cost:	\$ 56

Hyden Clinic:

Audiometer, glucometer and tape strips	Estimated Cost:	\$900
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Beech Fork:

Phone system	Estimated Cost:	\$350
Computer system	Estimated Cost:	\$1500

Wooton Clinic:

Durable tape recorders (2)	Estimated Cost:	\$120
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WE THANK YOU
FOR YOUR PARTICIPATION



The Frontier Nursing Service
Wendover, Kentucky 41775

Loose Item

Please send me more information about:

- The FNS Courier and Volunteer programs.
- Estate Planning.
- Life Income Gift Opportunities.
- Visiting and Touring the FNS.
- Books and other literature concerning FNS.

As an interested friend, my subscription of \$5.00 a year is enclosed.

New Renewal

As a supporter, you will receive the *Frontier Nursing Service Quarterly Bulletin* unless you request otherwise.

Enclosed is my gift of \$ _____



Mary Breckinridge's home at Wendover.
Historic Landmark — Restored in 1981.

Name

Address

City

State

Zip

Your Gift is
Tax Deductible

Loose Item

FRONTIER NURSING SERVICE, Inc.

Its motto:

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

Isaiah 40:11

Its object:

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

From the Articles of Incorporation of the
Frontier Nursing Service, Article III
as amended June 8, 1984