

December MNORN Member Meeting/Annual Meeting

Join us, via Zoom, for the December MNORN Meeting. The topic of the meeting is " COVID-19 and the Year of the Nurse. What Have We Learned? "

Date: December 15th

Time: 7PM - 9PM

Objectives for the program:

- 1.) Define changes in the healthcare system and health policy that nurses could advocate for in order to be more prepared for the next pandemic.
- 2.) Develop a list of resources for nurses on mental health support, resilience, and leadership capacity building in order to share with and further support nursing colleagues.
- 3.) Develop and share best practices and innovations in order to stay safe at home and work.



Here is a video of MNORN leaders filmed to help start the discussion.



[USE THIS LINK TO REGISTER FOR THE MEETING](#)

COVID-19 Support Resources



Art by Stephanie
Gingerich:
"Be Your Remedy"

- [ANA COVID-19 RESOURCE CENTER](#)
- [CENTER FOR SPIRITUALITY & HEALING, U of MN](#)
- [TIPS from the American Psychiatric Nurses Association](#)
- [RESOURCES from the National Academy of Medicine](#)
- [RESOURCES FROM THE ASSOCIATION OF WOMEN'S HEALTH, OBSTETRIC AND NEONATAL \(AWHONN\)](#)
- [RESOURCES FROM THE AMERICAN ACADEMY OF NURSES](#)
- [FOR the FRONTLINES - free crisis counseling](#)



The Nurses Peer Support Network, which provides meaningful peer support for nurses with substance use disorder, has suspended all face-to-face in-person meetings until it is safe to resume them.

In the interim NPSN provides several options for peer support using an online platform called InTheRooms (ITR) which meets every Tuesday evening at 7:00 PM (group name for the ITR meeting is NURSES HELPING NURSES). Instructions for accessing InTheRooms (ITR) can be found [here](#)

NPSN also offers a selection of Zoom Peer Support Meetings:

2nd Wednesday of every month at 7:00 PM

1st Monday of every month at 6:00 PM

3rd Monday of every month at 6:00 PM

2nd Tuesday of every month at 6:00 PM (This meeting is especially for individuals living in southeastern MN (Rochester, Winona, Albert Lea, Austin, Owatonna and area.)

4th Tuesday of every month at 6:00 PM (This meeting is especially for individuals living in southeastern MN (Rochester, Winona, Albert Lea, Austin, Owatonna and area.)

1st and 3rd Thursday of every month at 6:30 PM.

Email minnesotanpsnetwork@gmail.com for connection information.

In addition to the online meetings listed above NPSN will provide one-to-one peer support via telephone. If you are interested please contact us at minnesotanpsnetwork@gmail.com

Holiday Season Self-Care

There is no doubt that grief and loss can be challenging during the holidays. This is especially true in 2020.

There may be traditions you'd like to keep and others you'd like to change. But however you decide to approach the holidays, strive to find moments of peace for yourself.

(from the National Fallen Firefighters Foundation www.firehero.org)

*** Be Open to New Traditions**

This year of social distancing means traditions might change. Think of ways to adopt - like "virtual visits" or neighborhood walks or drives to view holiday lights.

*** Say NO when you need to**

It's okay to skip holiday traditions that don't work for you this year. Avoid things that drain your energy.

*** Say YES if you can**

Accept offers from friends, colleagues, or neighbors to experiment with new "socially distant traditions." Doing the unexpected can help you adapt this holiday season.

*** Remember that Nutrition Matters**

Keep a food log as a reminder to eat healthfully. Pause to reflect before reaching for extra food calories or alcohol.

*** Unplug**

Limit the time you spend reading the news or on social media. You'll be less stressed and will sleep better, too.

*** Aim to be Thankful**

End each day with a moment of gratitude. Like anything else, gratitude is a practice.

*** Move Your Body**

Lift some weights or take a walk outside. It can reduce stress, self fight depression, and improve your mood.

*** Indulge Yourself**

There is nothing like a long bath, a delicious meal, or a jog to allow you to check out for a bit and just "be."

*** Allow Time for Reflection**

Know that certain moments may trigger memories and sadness. Give yourself time to acknowledge your feelings.

*** Get Consistent Sleep**

Sleep will help your physical and emotional health. Cutting back on caffeine, sugar, and naps can help.



An Invitation to Share Your Stories



Dear Registered Nurse,

The COVID-19 pandemic has significantly impacted our lives and how we, as nurses, deliver care to patients and families. As faculty from Minnesota State University, Mankato, we would like to invite you to participate in a study. The purpose of the study is to explore the experiences of nurses during the COVID-19 pandemic in Midwestern USA through their stories. We are collecting stories (written or video). Stories may be of any length and include any number of stories that you choose. Stories may include your experience(s) providing nursing care to a patient/family with COVID-19. For example, what has been the most significant challenge? What or who has provided you with support?

Each participant will be provided with a password protected OneNote notebook (notebook) that runs off a secure server. In your notebook, you can choose to:

- type text entries
- upload pictures of handwritten paper journals
- use a link to Flipgrid to create video stories

Stories will be kept confidential. Only the research team will have access to your stories. However, by signing the consent, you agree that your stories may be used in publications and presentations. If video recordings are used, your image may be used in presentations. No names, addresses, or contact information will be attached to stories. You will have the option to withdraw or change the way your stories could be shared.

You must meet the following inclusion criteria in order to participate in this study:

- Current Registered Nurse working in practice (hospital, long term care, home care, public health)
- Work in a Midwestern state

If you are interested in participating in this study, please email: nursestorytelling@mnsu.edu

Sincerely,
Tammy Neiman, PhD, RN
Sandra Eggenberger, PhD, RN
Patricia Beierwaltes, DNP, C-PNP
David Clisbee, MFA

Minnesota State University, Mankato IRBNet LOG# 1614601
Date of MSU IRB Approval: July 1, 2020

From The History of the St Paul City and County Hospital

by Minna Moehring MS, RN

I was privileged to have Minna Moehring Freiberg as a friend. By the time we met, Minna had been a registered nurse for more than 60 years. She remained “a nurses’ nurse” until her death at age 96.

Minna graduated with a diploma from Ancker Hospital in 1934. Her first job was at Ancker, as the supervisor of the operating room and a nursing instructor. During the height of the Depression, she was lucky to get a job. After working in California during World War II, she returned to Minnesota. She continued her education, earning a BSN at the University of Minnesota in 1950 and was once of the first to receive a Master’s degree in Nursing from the U in 1964. She completed her career as the first director of nursing for Ramsey County Hospital, working there from 1965 to 1976.

After her passing, I was given some of Minna’s papers. Among these papers is a history she wrote of Ancker Hospital, which had its beginnings as the St Paul City and County Hospital in 1872. Later it became Ramsey County Hospital and is now Regions Hospital.

Here is an excerpt of this history, from the hospital’s beginnings to just after the 1918 Flu Epidemic. Besides details such as including horses in the requisition for ambulances, there is preponderance of considerations about contagious diseases. Before antibiotics, healthcare focused on the care of tuberculosis, influenza, small pox, diphtheria, scarlet fever and more. Nursing care was critical to these patients, as it is today with COVID-19 patients. While the practice of medicine and nursing have advanced lightyears since the early days of “Minna’s hospital,” perhaps there are things we can learn from the nurses who used what they knew to care for people with contagious diseases.

The site for our City and County hospital was purchased in 1872. There was a stone mansion with ten rooms on the grounds that served as the hospital until 1882. In 1882 a two-story stone wing was added that could accommodate fifteen patients in a large ward on the first floor and sixteen patients in four 4-bed wards on the second floor. This same year an outstanding physician (Dr Arthur B. Ancker) was appointed by three men that formed the Board of Control. As physician and surgeon and superintendent of the hospital, in the forty years he served, he had the pleasure and satisfaction of seeing his hospital grow from a poorly equipped forty bed affair in an old residence to an eight hundred and fifty bed plant.

The next building was the erection of a barn in 1883. This barn, when occasion demanded, was used to accommodate patients. There first floor was a morgue, and the loft was partitioned. By its use, physicians were able to isolate at least two of the communicable diseases. When surgical operations were necessary a screen was thrown across one end of the largest room obscuring the view of patients whose conditions was such that they might suffer from seeing surgical operations. Stronger patients were called upon to hold the kerosene lamps when emergency surgery was performed at night.

At this time there were no nurses. The superintendent's only assistant was a woman who scrubbed the floors and helped with the food. She received \$14.00 a month. Instruments were sterilized in carbolic acid, and the surgeon had to clean them when he got through.

For many years the superintendent did most of the professional work, including emergency surgery that was done at the hospital, as well as looking after the administrative details.

Water was drawn from a well and heated on a kitchen stove. There were two bathrooms, which were closets, one on each side of the stove, and the patients were bathed in ordinary wash tubs in these closets.

In the early 1880's nurses were employed, and in the late 1880's night nurses were added to each department.

In 1885 it was learned that accommodations for bed patient care were inadequate. There were no accommodations, whatsoever, for the treatment of delirium tremens, insanity, or contagious diseases, such as scarlet fever, and diphtheria, and it was a source of public danger not to care for such conditions.

The closest scrutiny was required in handling the numbers who sought care at the City and County Hospital. Legitimate cases were never denied attention but the difficulty arose when professional malingerers, shifters, and impoverished wanderers sought admission. They were frequently armed with a letter obtained by deception, or through misplaced confidence from some citizen. There was difficulty also with out-of-town residents from adjacent states who came for hospital care because ours was a general hospital. It had become "a most important institution in a great city."

At this time, city water had been supplied, and sewerage had been improved. Extensive improvement was made in the erection of a commodious and comfortable contagious building. Adjoining this, a Foundling's Home was built.

The hospital lacked facilities for the demands made upon it. In 1887, patients were constantly turned away. The city was granted the legislative permission to issue bonds to \$50,000 to build a new City and County Hospital "that will have no superior in point of detail, and general construction on this continent."

In 1888 the economy of hospital operation was stressed and this was most favorably compared with other hospitals of like nature in the United States. The hospital continued to be crowded beyond a line of safety. It was poorly ventilated, and not properly heated or lighted.

In 1889 consideration was given to the organization of a nursing school. The administration was still laboring under many disadvantages, although the general condition of the hospital was good. The laundry was enlarged and improved; the wards were furnished throughout with new beds, bedding and furniture. The countless dangerous coal oil lamps were

replaced by gas. Female patients were transferred to the Foundling's Home in order to obtain a better classification of diseases in the hospital wards. No city caring for the dependent class was more liberal in its distribution of charity than was this city.

The Administration Building was now under construction. Employees' quarters were found to be entirely inadequate, uncomfortable and inconvenient.

Although in 1890 the hospital was a model institution in many respects, the Contagious Building was antiquated, and totally unfit for the purpose designed, with no means for isolation of mixed cases.

The training school for nurses was founded by the Board of Control as a two-year course in 1891.

The superintendent made the following statement about the qualities of a trained nurse: All the best qualities of human nature rolled into one human shape. Order, neatness, industry, superior quality - mentally, morally, and physically; sympathy, endurance, patience; self-control to take us through every trying ordeal - these mere essential qualities for the trained nurses.

In 1892 a visiting staff was organized to help take charge of the professional work of the institution. This staff consisted of thirty-four members "representing the flower of the profession of the city."

In 1893 medical students from the state university and medical men from smaller towns sought clinical instruction in our wards. The Training school for Nurses was opened with fourteen students, who were accepted for a two-year course in nursing between the ages of 21 - 35 years. The hospital staff gave night lectures to student nurses.

There were sixteen student nurses in the Training School in 1894, an insufficient number to care for the patient load.

There were twenty students in the school of nursing in 1895. After one month probationary period, they received \$8.00 per month, and in their last year received \$10.00 per month. There was no set entrance data, but students were admitted when vacancies occurred. The student was required to take examinations in reading, penmanship, and arithmetic before the end of the probationary period.

In 1895, an electric lighting plant was considered for the hospital as well as a complete disinfecting plant for contagious cases. The establishment of temporary detention and surveillance of persons suffering from diseases of the mind was urged.

A mortuary and a laboratory were established in 1896, and an ambulance barn was erected. Thirty-seven cases of diphtheria were treated with diphtheria antitoxin serum. "The institution is now well equipped in all its departments; fully in keeping with progressive ideas and abreast of the most modern methods adopted for hospital management."

695 operations were performed this year (1895), many most difficult in the realms of surgery. The first operation in the state with the use of the x-ray was performed.

The need for a diet kitchen for student nurse training was urged strongly.

In 1898 a night superintendent of nurses, and an instructor in invalid cooking and dietetics were requested. One of the greatest needs was a nurses' home. The graduation exercises were held in Ward B, which had been vacated for the occasion.

In 1899 it was again recommended to establish a cooking school for student nurses.

The nursing school had attained a high standard of excellence in 1900. "It has never been in a more prosperous condition." Thirty-five probationers were received. Only eighteen were accepted. There were twenty-eight students in the school.

In 1901 students, for the first time, were vaccinated for small pox.

The Contagious Building to care for diphtheria and scarlet fever was erected in 1902. The intern service was recommended to be eighteen months instead of one year, and the service so arranged that not more than three graduate at one time. There was demand for additional and more suitable quarters for the housing of student nurses. A trained nurse for the operating room, and a graduate to act as night superintendent were recommended, as well as an instructress in dietetics. The nurses' training was made a three-year course.

In 1908 a storage plant to facilitate food storage was needed, as well as an electric motor instead of hand power to lift the elevator in the Service Building.

The first vacation period was given to the students in the school of nursing. This was two weeks in length.

The alumnae was organized in May of 1904, and has, through the years, been exceptionally active.

In 1906 the nurses' residence was completed.

The first banquet for the graduation class was given by the alumnae association in 1907. there was a total of seven graduates, all of whom were employed here after graduation.

In 1907 a nurse was dismissed because she left duty to go to a wedding. Twenty-five students went on a strike to get her reinstated. They failed and were dishonorably discharged. At a hearing they were reinstated by the board. The curriculum for the student was 250 hours in length and consisted of anatomy, physiology, materia medica (pharmacy), hygiene, obstetrics, pediatrics, and emergencies.

In 1908 there were eighty-nine recognized cases of tuberculosis in the hospital, excluding bone and other organ tuberculosis. Forty-two of these died in the hospital. The need for a separate pavilion to house and care for these patients was keenly felt.

132 cases of tuberculosis were cared for during the year of 1909. Because of ever increasing demands on service, it was found that two ambulances and four horses were inadequate. Two more of each were requested. Overcrowding in the nurses' home and dining rooms were made more evident. A six month's post-graduate course for nurses was offered to consist of the following experiences:

- 2 months - Operating Room
- 1 month - Obstetrics
- 1 month - Contagious or children's wards
- 2 months - General wards

The first affiliation offered to other schools was in obstetrics. The hospital now furnished accommodations for 550 patients.

The need for a laboratory building to do scientific work was made obvious in 1910. The Contagious building was inadequate for the patient census.

In 1911 the number of hospital admissions was 4,684. A tuberculosis building was again urged. Additional room for male patients in the general hospital became imperative.

The probationary period was lengthened to six months. A tennis course for nurses was provided.



An appropriation of \$75,000 was made for a tuberculosis pavilion in 1912. A laboratory building was in the process of construction.

<http://www.mnsans.com/ramsey-sanatorium.html>

In 1913 five additional schools were sending their senior students for affiliations.

More affiliates were accepted for senior nurses in 1913.

A new tuberculosis building accommodating 110 patients was completed and occupied in 1914. Need for 150 more beds in the Contagious Building was felt.

\$300,000 was asked for the totally inadequate needs regarding student nurse accommodation.

There were numerous complaints about the condition of the streets leading to the hospital. It was recommended that they be paved with creosoted blocks. An artesian well with proper machinery was suggested for hospital use.

The Alumnae of the school centered much interest on the graduates. There was a continued increase in membership and meeting attendance. The meetings were held on the first Friday of every month. The dues were \$1.50. There was a Sick Benefit Fund, the joining of which was not obligatory. Dues for the sick fund were \$5.00 per year. In the event of illness the benefit was \$1.00 for 21 days. The Alumnae meetings were followed by social hours and refreshments furnished by the hospital, presided over by the matron. During commencement week a formal banquet was given to the graduating class which was anticipated with much pleasure as it brought together graduates from various locations, renewed old and pleasant associations.

The diploma from the school in 1916 entitled the graduates to become a candidate for state registration in our state and other states.

In 1916 three admission dates to the school were set as January, March, and September. An addition to the Nurses' Home was built. This accommodated 90 nurses and provided classroom space.

One and one-half stories were added to the East Wing for male patients in 1916. This gave room for an additional 76 beds.

In 1917 the students received training in the office, domestic department, the laboratory, and two weeks in the social service department under the guidance of a social service worker.

An appropriation of \$100,000 was asked for a Children's Building.

Number of patients treated during the year 1918 was 8,855. The death rate increased 3% (from 7% to 10%) due to the influenza epidemic during which 1,300 cases were cared for. An addition to the present Contagious Building was urged again. An appropriation of \$35,000 was asked for a new office building, receiving room and waiting room for visitors.

