1951 - 2001
Northeast Georgia Medical Center, Inc.
Gainesville, Georgia

celebrating a proud history...
...building a healthier future

50th anniversary

Northeast Georgia Medical Center
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Those were the first lines in the August 1, 1951 Hospital Edition of "The Gainesville News." They sum up the sentiment of a community that longed to welcome back its native sons and daughters and to begin refocusing on the foothills, farms and family shops that made up the place they called home.

The hospitals of that day were the Downey Hospital, a private hospital which began in the home of Dr. James Henry Downey back in 1908, and the old Hall County Hospital, located at 787 Hospital Drive. The latter was a public hospital and included an almshouse for the poor and elderly. Attorney James (Bubba) Dunlap tells that the early Hall County Hospital was a "fine facility and far nicer than the homes of most of the indigent population it served."

In fact, it was the first time that many patients had access to indoor plumbing. A bathtub was once used as a coal bin because the workers had never seen an indoor tub.

When Congress passed the Hill-Burton Act of 1946, which gave grants to states to build or enlarge existing hospitals, a group of local leaders saw the opportunity to give Gainesville and northeast Georgia the hospital it needed. That meant merging the two hospitals: one private and one public into one new facility. As with our recent merger with Lanier Park, there was some initial concern about how the community would be impacted. But with all options carefully weighed, one new hospital was planned.

The Hill-Burton funds would provide roughly 1/3 of the cost of the proposed $1,600,000 needed. At the ballot box, the community voted overwhelmingly to raise an additional $500,000 through bond sales. The Hospital Authority had to come up with the remaining $600,000 anyway it could.

According to newspapers of the day, Mrs. Ethel Washington loaned the funds to purchase two pieces of property (one owned by the Bickers family and the other by the Pierce family) for the construction of the hospital. Mrs. Washington charged the Authority no interest and her only assurance was that "her money would be repaid when funds became available." Chicopee donated $10,000; and in early 1948, the Reconstruction Finance Corporation approved the Authority’s loan application for $500,000. It was a long, six-year process; but by September of 1951, the community lined up to tour the new Hall County Hospital.

Though some scoffed, saying the hospital was an unnecessary extravagance and that its 90 beds would never be filled, most were terribly proud of their new hospital.

Northeast Georgia Medical Center has been built around the cornerstone that was laid for Hall County Hospital over 50 years ago. We all owe a great debt to the physicians, nurses, community leaders, and volunteers who worked to begin our community hospital... and to those who have followed in their giant-sized footsteps.

"If these walls could talk" they would no doubt share some amazing stories. Some tales they’d whisper with shame of days before integration when separate water fountains and even separate wings were marked for "whites" and "colored." There would be many heart-breaking stories of final good-byes between a loving husband and wife, father and son, lifetime friends. But there would also be tales of joyous births and out-and-out miracles: recoveries that left our finest physicians smiling, shaking their heads and grateful that ultimately power over life and death did not rest in their hands.

Anniversaries are a good time to remember. Our hospital has a proud history — not just because our technologies and fac...
Of duty, honor & responsibility

The medical staff of the early 1950s served northeast Georgia with distinction

The young doctors who were part of the Hall County medical community of 1951 were members of what Tom Brokaw has called "The Greatest Generation." They were young boys during the Great Depression. Many had served during WWII; all grew up in a time when TB, Polio, and even childbirth took the lives of thousands each year.

"It was a very different time," says H. E. Valentine, MD, one of the doctors on the original medical staff. "Overall we were serious young men. We had come home from duty overseas. We were earnest and ready to settle down with our families and build our community."

Dr. Valentine earned his medical degree from the Medical College of Virginia before coming south to Emory for his internship. After a year at Emory, he was off to Charleston for three months with the Navy and then to Camp Lejeune for Medical Officer training. He served overseas with the Marine’s First Division until the war ended. He served in three campaigns in the Pacific with the Occupation Troops in China. Afterwards, he was back to Emory and his wife, Bonnelle.

"I had worked for Charlie Brice, a Gainesville dentist, while Herb was overseas," she says. "Charlie encouraged Herb to consider Gainesville as a place to practice. He told us about plans for the new hospital and what a great town it was. He was instrumental in bringing Herb to Hall County."

Dr. Valentine began practice in 1948, nearly 10 years before the Buford dam was finished to create Lake Lanier.

"The medical community was small enough for us to all know one another," he says. "We hosted the medical staff Christmas party right here in our home. Dr. Jesse Meeks was quite a character and we would sit and listen to his stories for hours on end."

In the earliest days of the hospital, the facility was equipped only with the bare necessities.

"I would take my EKG machine over to the hospital so I could monitor heart rhythms of my patients," he says. "But there was a core of very good, capable physicians like Pep Brown, Burt McCrum, and Raleigh Garner. They began to attract other high caliber specialists like P.K. Dixon and Henry Jennings, and soon we had a bustling hospital."

Martin Smith, MD, was a Gainesville native who had grown up playing in the fields and woods that would one day be the seat of Gainesville’s medical community.

"I began practice in Gainesville in January of ’51," he says. "I had completed my residency at Children’s Hospital of Washington, come to Gainesville and begun my practice without a break. So my wife Mary and I borrowed a friend’s house up at Lake Rabun to try to get some rest. Of course, it worked out to be the week of the dedication. I drove back from the lake to be a part of the ceremony and then headed back up to the mountains to finish my vacation."

Then-governor Herman Talmadge dedicated the new hospital on September 1, 1951.

Edgar Dunlap, local attorney, was the master of ceremonies.

"After my first year in practice, I paid a social visit to one of my instructors from medical school," Smith continued. He asked me how it was going and I told him that we’d lost three children that year. In those days the paper would run the obituaries on the front page. It was not uncommon to see children’s names. There was a high incidence of low-weight babies; it was a time before most childhood immunizations and there were far
fewer choices of antibiotics and other pharmaceuticals."

By the time of his retirement, Smith had cared for successive generations of the same family. "I was routinely treating third generations," says Dr. Smith. "I didn't have to ask if a patient had a family history of diabetes, I was there when his grandfather developed it."

In 1985, Dr. Smith served as the president of the American Academy of Pediatrics and has been recognized nationally for his efforts to improve immunization rates among the country's children.

Cullen McCarver, MD, completed his medical degree and passed his boards in 1942. He began his general surgical residency in Winston-Salem, NC, but nine months into his training he received his draft notice. While serving in the Army, he sustained a back injury that landed him as a patient in a Temple, Texas hospital. "It was a glorious military injury," he jokes. "I was playing baseball with some enlisted men and ran back to catch the ball. I fell into a trench and broke my back. After that, they pulled me from active duty and put me to work in their ward where I received another year of general surgery and orthopedic training."

By 1949, Dr. McCarver had set up practice in Gainesville where the concrete foundation had already been poured for the Hall County Hospital. "When the hospital finally opened, we had to take our own instruments from our office to use with our patients," he says. "The hospital had some instruments, but they were for emergencies. None of us had any money back then and our tools were like gold to us. My dad was an old country doctor, so I had some of his forceps and went and bought other things I needed for my patients at the hospital."

"We were a pretty tightly knit group of physicians," he says. "We had to be. We all took call because there were no ER physicians. That meant wherever you were — if it was your day — you answered the call. A pediatrician might see an 87-year-old woman. If you were in the office seeing patients, you left and went to the hospital. It was an imperfect system, for sure, but we made it work as best we could."

In 1953, Henry S. Jennings, MD, moved to Gainesville. He had completed his medical training at Emory, served two years in the military and had been one of the founding partners of the Emory Clinic. "At the Emory Clinic, my work was mostly episodic care," he says. "Patients would come in for a problem, I would make a referral, and might never see the patient again. I knew that wasn't the kind of medicine I wanted to practice. So, I headed to Gainesville to build a practice where I could get to know the people I was caring for."

In the days before Medicaid, physicians did 'clinic work' without pay. "A good part of the time you took care of people who had no means of paying you," he says. "But they needed care, so we gave it. We practiced good medicine. It was primitive medicine by today's standards, but good medicine none-the-less."

Dr. Jennings says the most dramatic changes in internal medicine during the past 50 years revolve around the thousands of new technologies that have been added since the hospital opened. "I would never go back," says Dr. Jennings. "That is to say that MRIs, CTs and ultrasounds are an invaluable part of making an accurate diagnosis. But when these technologies were developed, things changed dramatically in the patient-physician relationship. In the early days, if a patient said 'I have a headache,' I started asking questions, touching my patient and listening. Today, that exchange is often short-circuited by the need to efficiently schedule the tests a patient needs. Like I said, I would not go back to the old way. But I know the value of getting to know your patients."

Gainesville is a much larger town these days, but as Dr. Jennings moves around the community he is routinely greeted with a hug by former patients. "I have become part of their families and they are part of mine. If I had to do it all over again,
I wouldn’t change a thing.”

In 1954, Drs. Hamil Murray and P. K. Dixon joined the Gainesville medical community.

"I came to Gainesville because Pep Brown invited me to join him," says Dixon, a native of Jonesboro. "He had been in private practice alone and was having a tough time of it. That meant he had no back-up, no one to assist him when he needed it. Without a partner, I would have been in the same boat."

Dr. Dixon had originally applied to the Abraham Baldwin Agricultural College when he was a senior in high school.

"I didn’t have the means to even consider medical school," he says. "But my principal called me into his office. I was trying to remember what I had done to get in trouble when he told me that he and Judge Hutchinson wanted to guarantee my way through medical school," he says. "But my principal member what I had done to get in trouble when called me into his office. I was trying to re-

"P.K. was responsible for much of the hospital’s early expansion," says Dr. Valentine. "He had served in influential state positions and helped us nearly double the size of the hospital during the first major expansion."

Dr. Dixon was also instrumental in starting Lanier Park Hospital back in 1977.

Hamil Murray, MD, joined the hospital in 1954 as the first full-time pathologist.

"I had started out to study internal medicine," says the Danielsville native. "I took a pathology residency as part of my training and found I really liked it."

The hospital’s first lab was in a small area located on the first floor across from what are now the service elevators.

"All tests were done by hand," says Dr. Murray. "Our reagents were prepared by hand and from recipes. We had only the most basic laboratory equipment.

"We had a small room adjacent to the main lab where we drew blood from donors. Though we didn’t participate with the Red Cross then, we had a good relationship with them and furnished blood to their eligible patients hospitalized here. They would borrow blood from us when they needed it, and we would call on them when our supplies were low."

"When we were both low, we had a call list we relied on. Members of the community were literally a part of our efforts to save lives. Without their willingness to stop what they were doing and come give blood, we would have lost many patients. It was just that kind of hospital and that kind of a community."

Dr. John Burns, III, was a second-generation physician to practice at the new hospital. His father, a surgeon, had been one of the owners of the Downey Hospital before the new Hall County Hospital was built.

Dr. Downey was New Holland’s chief surgeon and went into private practice when the mill hospital closed in 1903. In 1908, Downey converted part of his private residence into the six-room Downey Hospital, the only one between Atlanta and Greenville.

"In 1912, Dr. Downey built a second Downey Hospital, with 36 rooms. He took my dad into his practice when Dad returned from WWI," says Dr. Burns.

The younger Burns, an obstetrician and gynecologist, joined the hospital in 1956 after returning from the Korean War.

"There were already several obstetricians and gynecologists practicing in the community," he says. "Dr. Barton McCrum and Billy Hardman were on the staff when it opened. Barton had helped deliver the first baby born in the new hospital. Soon, the hospital developed such a reputation that many other specialists were drawn to Gainesville."

One of the greatest improvements in obstetrics in the past 50 years was the development of the subspecialty of neonatology and new treatments for prematurity infants.

"When we were caring for mothers with severe complications, we would sometimes have to send them to Grady because of high risk problems that could develop with the newborn," he explains. "Grady had more resources for helping the mother and the baby. One Christmas, one of my patients began to have trouble. She had high blood pressure; the baby was in distress. I had to send her to Atlanta, so we called on a local funeral home to assist with transport. The driver left his Christmas dinner and drove her to Atlanta. Of course, he wasn’t paid for doing that. But he helped save that baby. That was just the kind of community we worked in."

As he looks to the future of medicine, Dr. Burns is hopeful.

"If the past 50 years are any indication," he says, "we can’t even imagine the advancements that will be made in the next half century. So much research is being done to develop new pharmaceuticals and treatments. Wouldn’t it be wonderful if the next generation is able to speak about cancer the way we speak of polio — as a horrible disease of the past?"

Even though John III retired in 1993, the contributions of the Burns family to the medical community continue today. Yet another John Burns, the son of John, III, now practices anesthesiology at the Medical Center, following a legacy begun nearly a century ago by his grandfather.

Many other father/son physicians including Pep Brown’s son and namesake; Hamil Murray’s son Tom; P.K. Dixon’s son, Ken; and others have served generations at the Medical Center.
Doctors of 1951

Editor’s Note: Following is a list of the original medical staff at Hall County Hospital the day it opened. The list was compiled based on information from the August 1, 1951 issue of The Daily Times and the memories of the physicians we contacted. We offer sincere apologies for any omissions.

- Rafe Banks
- P. F. Brown
- John Burns, Jr.
- E. E. Butler
- Raleigh Garner
- Ben Gilbert
- Hartwell Joiner
- Billy Hardman
- Cullen McCarver
- Barton McCrum
- Lee Rogers
- Martin H. Smith
- Herbert Valentine
- Eugene Ward
- Cleve Whelchel
- C. W. Whitworth

E.E. Butler devoted his life to medicine

E. Butler, MD, was the first black physician to receive privileges at the Hall County Hospital. He was born April 13, 1908, less than 60 years after the end of the Civil War. He died in May of 1955, just one year after the Supreme Court declared segregation unconstitutional.

He lived during a period in history in which he was not a slave but in which he was denied full rights and privileges as a US citizen.

Butler attended a segregated elementary school in Macon, Morehouse High School and College, and Meharry Medical College in Nashville, TN. Meharry is a private institution founded by the Freedmen’s Aid Society of the Methodist Episcopal Church to educate freed slaves and to provide healthcare services to the poor and underserved. After completing medical school in 1933, Dr. Butler practiced in Macon for two years before working in a Tuberculosis clinic at Alto from 1935 to 1936.

He came to Gainesville in 1936 and practiced here until his death in 1955. He was an active member of the community, the first black to serve on the Gainesville Board of Education and spearheaded the first black voter registration drive. He loved and supported the Fairstreet Athletic Association and the Fair Street Band. The community emorialized his service through the naming of the E.E. Butler High School and E.E. Butler Parkway.

He was a deacon and Sunday School teacher at St. John’s Baptist Church.

Radiology

The hospital’s first radiologist was Dr. Oliver Ghent, says Clark Ferrell, MD, who joined the hospital back in 1960. When I started practicing medicine more than 40 years ago, we had no MRI, no ultrasound, no CT. We provided primarily X-rays, upper GIs, and radiation therapy, until Dr. Lake joined the organization, and then we relinquished therapy to him and his new department. Technology for imaging has become much safer and more reliable through the years.

Anesthesiology

Dr. Calvin Allen, the hospital’s first anesthesiologist, joined the medical staff in 1957. Assisted by two nurse anesthetist they used primarily gas anesthesia which was highly explosive. Static electricity could cause the gas to ignite, says Dr. Allen, who retired in 1990. In addition, the early Hydrogen agents were also harmful to the liver. The development of new injectable anesthesia that could be administered through IV’s was a vast improvement in the way care was given during my medical career.
To serve, to heal, to care...
Technology has changed the duties of nurses but not the mission

In 1967, in a brand new intensive care unit, a young nurse, Sandra Cantrell learned one of the most important lessons of her nursing career.

"We were so proud of ourselves," she explains. "We’d never had anything like the unit. By today’s standards it was pretty barren and sterile, but to us it was something straight out of a science fiction program. It was state-of-the-art.

"The unit had five beds located in individual cubicles and one centralized monitoring desk. At that desk we had a monitor for each patient. We take that kind of technology and equipment for granted now," she says, "but until that time, the only way you monitored a patient was at his or her bedside."

One evening Cantrell made her rounds in the unit checking the leads for the heart rhythm monitors, chatting with the patients and recording vital signs. When she seated herself at the monitoring station, she noticed a dangerously irregular rhythm for one patient.

"I was startled and looked up over the monitor," she says. "The patient was fine... reading. I checked the monitor and the rhythm was normal. But in a minute, it happened again, and then again. I finally went over and asked him what he was doing. He was scratching the leads, and it disrupted the transmission to our monitors.

I learned my lesson. No matter how great the technology becomes, you nurse the patient not the machine."

The theme of Cantrell’s story is echoed time and again as nurses discuss the changes in their profession over the last half century.

Retired Director of Nursing Miriam Sellers joined the hospital in 1956. For 20 years she served as the night duty supervisor. From 1976 to 1986 when she retired, Sellers was the hospital’s director of nursing.

"When I joined the hospital, our equipment was pretty basic," she says. "We used glass syringes and had to reuse the needles. We'd sharpen them by hand to try to keep them smooth enough to use without tearing the patient’s skin.

"Even the patients’ drinking straws were glass!"

With no emergency medical services, local funeral homes provided patient transport.

"They’d bring patients to us in the hearse," she says. "We knew all the funeral home directors. Henry Ward was the coroner, and he and I got to be good friends. Things were just much simpler then."

The absence of technology in the hospital’s early days meant nurses knew they had to rely heavily on their interpersonal and observational skills to do a good job.

"Our first and last source of information about patient was pretty much what the patients told us and what we observed in them," says Mrs. Sellers. "Slowly we began to add equipment like ultrasounds, CAT scans and MRIs, but in the early days, X-rays were about it. Our best equipment were our eyes and ears."

"I would guess they still are."

For Linda Niles, manager of the post anesthesia care unit at the hospital, the greatest challenge is adapting to the rapid pace of change.

"I’ve been here almost 25 years," she says. "Not only is healthcare changing — we all expect that — the rate at which it is changing is increasing exponentially.

According to Mrs. Niles, recent challenges to good nursing have come in many unexpected forms.

"The introduction of universal precautions when AIDS and hepatitis was identified was a substantial change," she says. "Not because it’s a big deal to wear gloves and a mask during some procedures, but because it forced healthcare providers to think continually about the fact that they place themselves in harms way to do their jobs.

"In addition, the unification of the two hospitals was a huge undertaking for everyone," she says. "It was a joyful thing and a hurtful thing at the same time. People loved Lanier Park and they loved the Medical Center. Accepting the unification and all that went along with it was a pretty big adjustment for staffs at both hospitals, for our physicians, staffs and the community."

Another unexpected challenge to delivering good nursing care has been the rapid growth of the Hispanic community in northeast Georgia.

"We are still discovering the differences in our cultures and the many diverse needs of the people we serve. It is more than adding translators. It’s about learning to appreciate people who are different from..."
you and counting on you to help them."

Sometimes, Niles says, the hustle and bustle, technologies and changes can make a nurse question why he or she chose the profession.

"Every job has distractions, I’m sure," she says. "Sometimes, you just have to refocus on your personal mission. For every nurse I’ve ever known who’s worth her salt, that usually comes down to a deep desire to make a difference, to help people whatever their race, whatever their disease. I imagine every nurse who’s worked here in the last 50 years has had a handful of moments that make the tough times worth it. You hold on to those and then get back to work.

**Linda Niles, manager of the post anesthesia care unit**

Shown above from top to bottom (l-r) are nurses: Anita Scott, Fran Fields, Betty Sue Harris, Evelyn Waugh, and Diane Quinn.

**James Alday, MD, with Carolyn Knopp, nurse epidemiologist, in the early 1970s.**
The year was 1960, and scattered across north Georgia were 10 young girls who would become the first class of the newly founded Hall School of Nursing. They would come from mountains and towns and would form friendships that would last a lifetime.

"We still gather every year," says Sonya Hancock, RN, BSN, the school's very first applicant and one of two members of the first HSN class who still works for the Medical Center. "We worked our behinds off, but those were some of the best years of my life. Those ladies all still mean a lot to me."

Mrs. Hancock was 17 when she was accepted at the new school. She had planned to attend Georgia Baptist's Nursing School when a classmate gave her Mrs. Ocie Pope's number and told her about the new program.

"There was no dorm," she says. "We lived in a house on Spring Street, and the next class lived in the Dixie Hunt Hotel. We woke each morning at 5 a.m., were in class or on duty all day and were not allowed out of our rooms after 7 p.m. We attended school year-round with no summers off."

Nursing students were considered members of the hospital staff and given job duties in addition to their classroom studies. From 7 to 9 a.m. the students were in "clinicals" in the hospital, being taught by nurses and physicians. Then they were off to class for the bulk of the day. They would finish their classes and hospital duties around 5 p.m. and were to go to study hall in their Spring Street home from 7 to 9 p.m.

"For three months we worked in a maximum security psychiatric ward in Chattahoochee, FL," says Barbara Garrett, RN, BSN, the other of the original ten who is still employed by the Medical Center. "We were put in charge and given the keys. It was a huge responsibility for young students. They warned us to watch our backs and to watch out for each other because 'the patients have nothing to lose and you have the keys.' If we had been old enough to realize what we were doing, we would have been scared to death."

All members of the Hall School of Nursing dressed in long, white uniforms. The shortest member of the class was to hem her skirt so that it hung only seven inches from the floor. Then the others were to hem their skirts so that all hem lines were level when they stood together.

"I was one of the tallest," says Mrs. Hancock, "and I weighed 100 pounds, so I looked like a beanpole! Everyone thought we were nuns. If we didn’t have on our caps, we were out of uniform; but those caps were status symbols, and we were proud to wear them."

School policy prohibited the nurses from being married, though one member of the class was secretly married for the entire three years. Because students were not permitted to have cars, they walked everywhere.

"We walked to chapel at Brenau every Thursday night, and we got some free time on Friday and Saturday nights," says Mrs. Garrett. "We’d walk to Watley’s downtown and have a spoon burger. We might go to the theatre if we had saved up enough money."

"After a suitor had called on a fellow stu-
ent a couple of times, he became fair ame," laughs Mrs. Hancock. "We'd ease those boys and have the best time! Then we'd hound them until they'd take s all for rides or to a drive-in restaurant."

Final exams made life particularly hard or the nursing students.

"There were times when the demands were so great that I would think 'what am doing here,' " says Mrs. Garrett. "I would be so exhausted, but all-in-all it was the most fun I’ve had in my life!"

During finals, Auxiliaries would bring the tudents brownies and snacks so that they could study without having to leave their ooms to eat.

"Nell Weigand and Ocie Pope efriended us in a way that is hard to escribe," says Mrs. Hancock. "They made us feel valued and appreciated. Nell would hold socials and teas to help s take a break and relax. Mrs. Pope epeatedly had all 10 of us in her home or dinner. P.K. Dixon would do the ame thing and take us out on the lake. Those special breaks in our very emanding routine were all that kept us oing some times."

"Drs. Sam Poole, Dick Stribling and Henry Jennings were our mentors," dds Mrs. Garrett. "They took time to each us and encourage us. Each student was to choose a physician to emove the stripe from her cap when he was a Senior. We were to choose he doctor who had helped us the most n our studies. I chose Dr. Jennings, and Sonya chose Dr. Poole."

Each of the 10 students who began in the rst class completed their course of study t the Hall School of Nursing. As the eads passed, all but Mrs. Garrett and Mrs. Hancock moved on to other callings. But the group remains close even ter more than 25 years.

"We’re like comrades in arms," says Mrs. Hancock. "You can’t go through othoing like that together and not share real bond. That class, that school, and ll of the people who helped us through he years are part of precious memories.

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Volunteers celebrate their 50th Anniversary

Hall County Hospital’s Auxiliary was serving before the hospital opened its doors

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The Bright Spot during the early 1950s

E ven at 97 years old, Gladys Garner captures attention when she walks into a room. Her once fiery red hair has long since turned gray. She must steady herself with a walker now, but her eyes sparkle like a child’s as she greets her guests. On this day, friends have come to help her reminisce about the early days of the Hospital Auxiliary. In her living room, in a beautiful Cape Cod style home on the shores of Lake Lanier, are three of Gainesville’s living legends: Mrs. Garner, who founded the Auxiliary back in 1951; JoAnne Frierson, long-time Auxilian and Auxiliary President 1989-90; and Jane E. Carter, retired director of the Medical Center Auxiliary.

"Once back in 1949, I walked into a room full of men to speak about plans for the Auxiliary," Mrs. Garner says. "As I walked passed one of the gentlemen, I heard him say 'what does she think she’s doing?' I knew what Hospital Auxiliary’s had done in other states and that we would need a strong organization of volunteers when our hospital opened.

"The doctors used to say that we moved in and took charge," she laughs. "I guess we did."

The Auxiliary of 1951 was made up of 195 members. Mrs. Garner had contacted local organizations across the region to make them aware of the need for women to serve in the new hospital.

"We didn’t have any trouble getting people involved. Everyone wanted to help," she says.

Mrs. Garner and Ocie Rich Pope recruited Mrs. Claude Carter to be the group’s first president. The Pilot Club of Gainesville began volunteering at the information desk, a service project which they continue 50 years later.

"One of the earliest Auxiliary projects was The Bright Spot, the forerunner of the current Window Shop," says Mrs. Frierson, who began volunteering in 1954. "We would bring sandwiches and food from home to the hospital. You could never do that now with current health regulations! But we thought nothing of it then, and it helped raise money for supplies for the hospital."

Nell Whelchel Wiegand was a recent graduate of the University of Georgia when she continued next page
began volunteering 50 years ago. Mrs. Wiegand was a Gainesville native with strong family ties to the medical community. Her uncle, Cleve Whelchel, was one of the doctors who owned the old Downey Hospital when the new Hall County Hospital was built; and Pep Brown was her cousin.

"I think I was working at the newspaper selling ads when I started volunteering," she says. "My sorority, Phi Mu, had organized book carts at hospitals all over the country, so I got involved with starting the bookmobile. The local department store, Ronalds, donated a dress, and we auctioned it off to raise money to buy the books and cart. Helen Lily was the chairperson."

Early Auxilians also hemmed napkins and rubber sheets by hand, and made tray and instrument covers. They also made draperies and gift items to sell in a corner of The Bright Spot.

In 1959, Mrs. Ocie Pope, with the Auxiliary as the sponsor, opened the Hall School of Nursing. "Nurses were in such short supply," explains Mrs. Wiegand, who has also served on various medical center boards in her 50 years of service to the hospital. "It was an important way that the Auxiliary could improve patient care, and we were proud to get the school started and to help it grow."

The Auxiliary donated over $500,000 to the Hall School of Nursing between 1959 and 1978 when the school merged with Brenau University. "The Auxiliary’s support for the school was more than just financial," says Barbara Garrett, one of the students in the first class ever at the school. "They would bring us food during finals and invite us into their homes. They knew we were away from our parents for long periods of time and took us in under their wings like part of their families."

Just before the rebellious 60s began, the Auxiliary began a teen volunteer program. Ninety "candy strippers" served in more than 30 areas of the hospital during the program’s first year. During the summer of 2001, 100 teen volunteers donated over 7000 hours of service.

In 1976, the Auxiliary began recruiting male volunteers; and the Hall County Hospital was renamed Northeast Georgia Medical Center. The same year, a true "steel magnolia," Jane Carter, took the helm as the third director of volunteer services, succeeding Adelaide Norton and Mary Knickerbocker. Under her guidance, the Auxiliary took on greater and greater challenges to meet the growing needs of the community.

"Jane was an insightful leader for the volunteer services department," says John Ferguson, President of Northeast Georgia Health System. "She was as smart as she was gracious and made our program one of — if not THE — strongest volunteer programs in the state."

In 1980, the Auxiliary sponsored the first Love Light Tree project, chaired by Anne Thomas. The project raised over $10,000 which was used to renovate the newborn nursery.

In 1985, the Auxiliary called on their founder and her husband, Dr. Raleigh Garner, to chair the Love Light Project to raise funds for Lifeline. Lifeline is an in-home system that provides emergency call services for people with handicaps or medical problems. Dr. and Mrs. Garner graciously agreed to act as chairs, and the project raised over $21,000.

Since its inception, the Love Light Tree has raised nearly $700,000 for various projects throughout the hospital.

In 1992, the Auxiliary took on another holiday project: Marketplace. Marketplace brings vendors from all over the region to a two-day shopping event at the Gainesville Civic Center. All proceeds from booth sales to the vendors and from refreshment sales benefit a specified hospital project.

"Because of Love Light, the holidays were already a very busy time for the volunteers when they voted to take on Marketplace," says Ms. Carter. "But they stepped right up to the task and, with Mary Lynn Coyle and Sally Darden as their first chairs, had a very successful first year. The project has grown every year since, and shopping at Marketplace has become a traditional community kick-off for the holiday season."

In less than a decade, Marketplace has raised over a quarter-million dollars for hospital improvements. "The Auxiliary’s financial contributions through the efforts of the volunteers are considerable," says Lynne Allen, current director of volunteer services. "They’ve raised over $3 million for worthy hospital projects. But their most important contributions are the hours upon hours that they spend in service to our patients. In our history, volunteers have given over one million service hours. The volunteers are often part of other service organizations like The Red Cross, Phoenix Society, Insurance Women of Gainesville or The Junior League; but they choose to fulfill their service hours through the Auxiliary. They volunteer for many reasons, but they all share a desire to make a fulfilling and meaningful contribution."

Joanne Frierson at the admitting desk in the mid 80s
Auxiliary Highlights 1951 - 2001

1952
- Sale of hot dogs paid for a croup tent for the children's ward

1959 - 1978
- Hall School of Nursing: a $23,000 gift to help build the school, other gifts provided student scholarships, furniture, receptions, new equipment, an elevator for the school

1960s
- Auxiliary purchased TVs for patients to rent, Newborn Baby Picture service began

1980
- Love Light began

1984
- Lifeline is sponsored by Auxiliary

1991
- Auxiliary pledged $250,000 in seed money to support the Foundation

1992
- Marketplace began

1993
- First Steps, a parenting support program, began in conjunction with Prevent Child Abuse Gainesville

1997
- NGMC Auxiliary named top non-profit organization in Hall County
- An infant security unit for the renovated Mother/Baby unit purchased with funds donated by the Auxiliary

1998
- The Auxiliary contributed $300,000 to Healthy Journey to benefit Cardiology

1999
- WHALE program - We Have A Little Emergency began to identify an injured child to emergency medical personnel when the injured parent or driver cannot speak for the child.

Auxiliary Highlights 1951 - 2001

1997 - 1998 Jaqueline Clements
1996-1997 Virginia Hall
1995-1996 Helen Powell
1994-1995 Eula Pearce
1993-1994 Peggy Walters
1992-1993 Dedra Martin
1991-1992 Mary Anne McNeese
1990-1991 Mary Early
1989-1990 Joanne Frierson
1988-1989 Ineke Zonnenberg
1986-1987 Ruth James
1985-1986 Barbara Ostrom
1984-1985 Joan Kosmala
1983-1984 Joanne Tilley
1982-1983 Miriam Robinson
1981-1982 Jean McRae
1980-1981 Skip Reed
1978-1980 Catherine Telford
1976-1978 Anne Thomas
1974-1976 Adelaide Norton
1972-1974 Nell Wiegand
1968-1972 Anne Garrard
1967-1968 Margaret Ellett
1965-1967 Louise Estes
1964-1965 Lillian Jacobs
1963-1964 Ditty DeLong
1960-1963 Anne Vance
1957-1960 Eva McConnell
1954-1957 Emma Edmondson
1951-1954 Marie Carter

Barbara & Jack Griffeth, MD, 1999 & 2000 Love Light chairs

Auxiliary Past Presidents

Founder: Gladys Garner
1999-2000 Teresa Kay
1998-1999 Jill Hill
1997-1998 Jaqueline Clements
1996-1997 Virginia Hall
1995-1996 Helen Powell
1994-1995 Eula Pearce
1993-1994 Peggy Walters
1992-1993 Dedra Martin
1991-1992 Mary Anne McNeese
1990-1991 Mary Early
1989-1990 Joanne Frierson
1988-1989 Ineke Zonnenberg
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1980-1981 Skip Reed
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1976-1978 Anne Thomas
1974-1976 Adelaide Norton
1972-1974 Nell Wiegand
1968-1972 Anne Garrard
1967-1968 Margaret Ellett
1965-1967 Louise Estes
1964-1965 Lillian Jacobs
1963-1964 Ditty DeLong
1960-1963 Anne Vance
1957-1960 Eva McConnell
1954-1957 Emma Edmondson
1951-1954 Marie Carter
1951
- On September 1, 1951 the 90-bed Hall County Hospital opened at 743 Spring St. succeeding the Hall County Hospital built in 1934 and the Downey Hospital first opened in 1908 and expanded in 1912.

1958
- First expansion of Hall County Hospital completed increasing the bed capacity to 147. P.K. Dixon, MD, makes a formal motion that the Medical Staff recommend to the Authority that a school of nursing be established.

1959
- The Candy Striper Program (now the Teen Volunteer Program) began.
- A 15-month training program for laboratory technicians, then in critically short supply, was established at North Georgia Tech and Vocational School in Clarkesville. Subsequently, most all hospitals in North Georgia were fully or partially staffed by graduates of the program.
- The recovery room opened.

1966
An expanded emergency room opened.

1967
Completion of a second addition brings the bed count to 252 and adds a 5-bed intensive coronary care unit.

1969
The Physical Therapy Department opened.

1970
Hall County Hospital entered the computer age using an NCR Century 100 payroll computer. A 28-bed psychiatric wing is added.

1971
Hall County Hospital and Lanier Area Vocational -Technical School provide a 24-month program for radiological technologists.

1973
Cobalt Therapy Services added.

1973-74
Addition expanded radiology facilities and administrative office space.
1976 - Hall County Hospital becomes Northeast Georgia Medical Center. $10,000,000 expansion completed. Added a 10-bed coronary care unit under the direction of Sam Poole, MD, a 12-room operating suite, a new ER, 10-bed Surgical ICU, 40 additional acute care beds and the expansion of X-ray and several support services.

1977
Lanier Park Hospital opened.

1980
Medical Center Auxiliary began the annual Love Light Tree Celebration.

1983
NGMC opened an Urgent Care Center in Oakwood. The name was later changed to Neighborhood Healthcare.

1984
NGMC opened first cardiac catheterization and special procedures lab for the diagnosis of heart and vascular disease.

1985
A new Outpatient Services Building opened, providing space for a new radiation oncology treatment department, outpatient cardiology services, a new clinical laboratory, dialysis, outpatient surgery services, a community wellness center and new administrative offices. Lanier Park expanded its emergency room, outpatient services and operating rooms.

Mid-80s
NGMC received CON approval from the state to begin offering home health services. Hospice care, Lifeline and Infusion Therapy were later added.

1986
The Hospital Authority leased the Medical Center to a holding company, Northeast Georgia Health System, through its subsidiary NGMC, Inc.

1987
Laurelwood, mental health, alcohol and drug abuse facility opened.

1989
In January, the Rehabilitation Institute for physical rehabilitation opened.

1994
Partners in Health Mobile Health Unit was purchased.

1995
Quick Care, the treatment center for minor illnesses and injuries, opened.

Mid-90s
The Medical Center Foundation expanded fund raising to benefit other organizations whose goals are to improve the health status of the community.

1996
New Neonatology unit opened and staffed by two board-certified neonatologists and nurse specialists. Provides high quality health care for infants born at risk.

1997
New Surgery Pavilion opened: inpatient and outpatient surgery procedures were consolidated.

1998
Summer 1998-Construction began on a new ER expansion.

1999
NGHS received CON approval to build a satellite radiation oncology facility in Stephens County, in cooperation with Stephens County Hospital

- Freestanding four-room sleep lab for the diagnosis and treatment of patients with sleep disorders opened

- Pediatric Care Unit renovation completed

2000
Medical Center begins plans for Open Heart Surgery.

2001
Lanier Park and Northeast Georgia Medical Center joined together to care for the people of our community.
Hospital Authority governing body of Medical Center

Since it opened in 1951, the Hall County Hospital/Northeast Georgia Medical Center has been governed by the Hospital Authority of Hall County and the City of Gainesville. The Authority owns the hospital and leases it to Northeast Georgia Health System through the Northeast Georgia Medical Center.

"The organization has undergone two major restructurings in its history," says Executive Vice President Henry Rigdon. "Once in 1976, when the hospital’s name was changed; and again in 1986. In ’86 NGMC signed the 40-year lease agreement with the Authority under which we operate today."

That lease agreement lays out specific requirements for the way the hospital will be run, ensuring that the hospital operates in a manner that meets the community’s need for healthcare services.

"This is something of an oversimplification," says Rigdon, "but the current Authority structure provides oversight that requires the Medical Center to act in a socially responsible manner. The Authority is not involved in day-to-day decisions made by the boards or hospital management so long as the hospital operates within the conditions spelled out in the lease."

The original Authority consisted of Leslie Quinan, Albert Hardy, Charles Young, Conrad Romberg, J.W. O’Neal, Gladys Garner, Dr. Lee Rogers, Dr. John K. Burns, J.C. Platt and Administrator W.N. Walters.

As the hospital grew and the need increased to improve access to services to people in surrounding counties, the hospital restructured to form separate volunteer boards to oversee specific areas of the organization.

"Our current corporate structure is made up of the Authority, Northeast Georgia Health System, and 9 boards," says Rigdon. "Over 100 community members serve on those boards, volunteering their time to provide governance for the organization."

The current Authority is made up of Board Chairperson Gwendolyn Mundy, EdD; Dr. Lolita Chappel-Aiken, EdD; James H. Brock, Vice Chairman; Joe S. Hatfield; Jim P. Henderson; Louis Propes; John D. Prien, Jr.; Kelvin Simmons; and Jerry Shuler.

"These people also serve on other boards and committees and like all the board members, work without pay to keep our health system on track, growing, and meeting the needs of our community," says Rigdon.

The operating board is the Medical Center board which consists of 12 members: three members of the Authority, three physicians, four community leaders and two members of the hospital’s management team. The board for the Parent Corporation (Northeast Georgia Health System) consists of 15 members. Other affiliated boards include Northeast Georgia Health Resources, Northeast Georgia Primary Care, The Medical Center Foundation, Northeast Georgia Health Ventures, Northeast Georgia Health Partners, Northeast Georgia Medical Center Auxiliary and a 45-member Advisory Board.

The Medical Center, like the Hall County Hospital before it, is a not-for-profit organization," explains Rigdon. "We distribute no profits to individual shareholders. Instead, we reinvest excess revenue back into the community."

Historically, Hall County contributed a small amount of tax money each year to help pay for the care of indigent patients treated by the hospital. No other counties have ever contributed tax money to the hospital to pay for their indigent patient population. In 2000, NGMC received no funding from Hall or other counties for indigent care or operations.

"It is a misconception that the hospital is or ever has been a publicly funded hospital," says Rigdon. "The hospital has always been funded primarily by payers - initially patients; and in later years Medicaid, Medicare and private insurance. We are, however, publicly accountable."

The hospital has also been supported in part financially by philanthropy in the community. From the earliest days of the Auxiliary (when women donated baked goods to raise funds to purchase equipment) to the $8 million Healthy Journey Initiative, the organization has been strengthened by the gifts of the community it serves.

One recent example of how board leaders act as stewards for the community’s well-being is their actions prior to the unification with Lanier Park.

Any significant change in operations requires board approval," says Rigdon. Before we consolidated NGMC and Lanier Park, we were operating at full capacity; and facilities at Lanier Park were underutilized. In December of 2000 the NGHS Board adopted a policy statement that clearly shows their stewardship responsibilities for the impact the consolidation with Lanier Park could have on the community."

"They weighed concerns about competition and charges," says Rigdon. "In our current environment hospitals have very little say in what we are reimbursed. Most payments are predetermined by Medicaid, Medicare and managed care contracts. But the board knew that there would be public concern about charges. There was good discussion and deliberation before the unification was approved."

The boards also played an active role in bringing open-heart surgery to the community.

"Many similarly-sized communities already offer Open Heart Surgery," says Rigdon. "In Rome and Athens, the procedure has been offered for several years. The hospital board not only approved the significant expenditure that will go into developing the new service, they also got personally involved in helping the hospital justify the certificate of need from the state."

Board members wrote letters to the State Health Planning organization and many traveled with members of the Auxiliary and other community supporters to the Atlanta to help plead the hospital’s case.

"The Authority and boards’ first concern was the same as the members of the first Authority back in 1951," says Rigdon. "...what will best serve the interests of the people of northeast Georgia."
Hospital Authority Members 1951 - 2001

Cochran
Mrs. Mary Logan Brown (45-49)
Dr. J. K. Burns, Jr. (45-55)
Albert Hardy (45-53)
Bill O Neal (45-53)
J. C. Platt (45-63)
Leslie Quinlan (45-51)
Dr. Lee Rogers (45-54)
Conrad Romberg (45-74)
Marshall Stone (45-47)
Charles Young (45-55)
Mrs. Gladys Garner (49-61)
W. A. Black (51-61)
George Baker (53-56)

Lawson
J. M. Lancaster (53-57)
Howard Fuller (54-75)
Dr. H. H. Lancaster (55-57)
Carl Lawson (55-73)
Winston Garth (56-59)
Broughton Rider (57-65)
Lloyd Strickland (57-66)
J. J. Norton (59-62)

Swetenburg
Tom Blackstock (61-68)
Ralph Pope (61-67)
Jesse Jackson (62-63)
Dr. P. F. Brown, Jr. (63-76)
R. L. Swetenburg (63-73)
Henry Miller (65-71)
James Evans (66-70)

Ramsey
Dr. Elder Jackson
Dr. Hartwell Joiner
Ray Jones
Sam Jones
Gwen Mundy
Bobby Painter
Tommy Paris, Jr.
Lowell Peacock
John Prien
Louis Propes
Randolph Ramsey
Jerry Shuler

Authority Members 1979-2001
Lolita Aiken-Chappel
Dr. Robert Anderson
Gene Bobo
Jim Brock
Maynard (Yank) Brown
Cecil Cochran
Dick Dale
Jimmy Dixon
Joe Hatfield
Jim Henderson

Celebrating a proud history...
...building a healthier future
In 1964, at the age of 23, John Ferguson came to the 147-bed Medical Center as the first hospital engineer in the state of Georgia. He held a master’s degree in engineering from Georgia Tech. While at Tech he’d played varsity football and baseball, and was a graduate assistant and instructor.

"John was what we called an efficiency expert," says James Gravitt, the hospital’s first director of purchasing. "As our industrial engineer he was an active part of the hospital’s building program, and he was quickly made assistant administrator under Damon King."

"I saw John sitting at an army surplus desk working a slide rule," says King. "I met him, worked with him for a while, and saw that he was a really bright young man who had a lot of leadership potential. I told him I needed some help and asked him to serve as my assistant administrator."

In that position, Ferguson was responsible for housekeeping and dietary, maintenance, laundry, security and the industrial engineering departments.

King was part of a new guard of health-care administrators and a good mentor for Ferguson. The development of Medicaid and Medicare combined with the technologies of the Space Age catapulted hospitals into a new era. Together, King and Ferguson showed himself to be a man of vision. Ferguson worked diligently to help the hospital acquire needed property and to get community support for expansion.

"Physical growth and community support really go hand-in-hand," says Wilbur Ramsey, a long-time board member. "Sometimes that is obvious in a real tangible way. The hospital was originally nestled in a residential area. The people who lived in the houses around the hospital were their neighbors. Mr. Dyer owned the land near where the Outpatient Services Building is now. He would walk the property every day. John would go talk with him and try to persuade him to think of the hospital when he was ready to sell. When John approached Mrs. Dyer about buying the property, she said that she saw the hospital’s need but she just couldn’t move to Atlanta and leave her beautiful flowers. John promised to move any of her bushes that she wanted moved. The Dyers sold the hospital their property, and John kept his promise and had the flowers moved."

Ferguson shows a reputation as a likeable leader with a good sense of humor.

"Before the hospital grew to be so big, John knew every employee, and everyone knew him," says Gravitt. "Several of us used to be part of a hunting club. It was primarily a social gathering: we’d eat well, sleep a lot, fish and chat. It gave us a good chance to get to know one another. John would also make a point to move around the hospital talking to visitors and employees."

Many times, I’d call him with a question or concern and rather than call me back he’d walk over to my office.

"That willingness to make personal connections is part of what has made him such a good leader for the hospital."

As the hospital grew, Ferguson became known as someone who could spot talent and build a team of leaders to help him manage the ever-growing organization. He hired a young newspaper reporter, LeTrell Simpson, as the Medical Center’s first hospital public relations director and many other management professionals including Henry Rigdon, Executive Vice-President and Jackie Hutchinson, who joined the organization as a radiology tech who worked her way up through the ranks. Other members of the administrative team who have served with him for more than half of the hospital’s history include Jack Scarpellino, who joined as an administrative resident and has overseen every major building project at the medical center for the past 25 years; and Diane Quinn, Director of Nursing, has served with him for decades.

When Ferguson took the helm in 1968, just over 100 babies a year were delivered at the hospital. The town’s surgeons performed 404 operations, and less than 2000 visits were made to the hospital emergency room. Today more than 3800 babies are delivered at the hospital each year and ER visits top 60,000. Annual net operating revenues have grown from $3 million to over $220 million.

Ferguson was instrumental in founding Health Southeast, a group of hospitals organized for cost-containment efforts and...
served as chairman of the Voluntary Hospitals of America/Georgia, a hospital management services company. In addition, he served on the Georgia Hospital Association Board of Directors for 12 years. He also served on the board of the Georgia Association of Not-for-Profit Hospitals and on the Gainesville-Hall County’s Chamber of Commerce. In the early ‘90s, Governor Joe Frank Harris appointed Ferguson to serve on the Commission on Access to Healthcare of the Georgia General Assembly. In that capacity he worked to develop a proposal detailing plans for improved access to health insurance for all Georgians. In 1994, the City of Gainesville presented a resolution to Ferguson honoring him for 30 years of service.

Ferguson is a Fellow of the American College of Healthcare Executives. He is a Rotarian and member of the First Methodist Church. He has three grown daughters and a 12-year-old son, Angus, and 5 grandchildren.

"John is devoted to his family and his community," says Philip Wilheit, board chairman. "He has successfully managed a multi-million dollar business as it has undergone tremendous changes. His record shows him to be a leader of rare ability and character."

As the hospital grew, Ferguson became known as someone who could spot talent and build a team of leaders to help him manage the ever-growing organization.

Today more than 3800 babies are delivered at the hospital each year and ER visits top 60,000. Annual net operating revenues have grown from $3 million to over $220 million.

Pictured above are several members of administration who have each served with Ferguson for more than a quarter century: (l-r) Henry Rigdon, Jackie Hutchinson, LeTrell Simpson, and Jack Scarpellino.
On September 1, 1951, a beautiful ribbon hung across the doorway of the new Hall County Hospital awaiting a ceremonials ribbon cutting, but Pete Davenport of Little Davenport Funeral Homes just couldn’t wait. He was transporting an expectant mother, and she was in active labor.

Dr. Garner and I just moved the ribbons and took her in, he says with a laugh. You could say I opened the place!

And hours later, Mrs. Truelove’s son, Gerald was born. He was the first baby born in the new hospital. The newspaper promised many special gifts for the first baby: a baby swing, valued at $3 from Johnson Furniture Company on North Bradford and a silver baby cup from Hoyt Ledford.

Truelove, who now works for Wm. Wrigley, is the proud father of two grown children who were also born at the Hall County Hospital.

Joyce Corbin has known all of her life that she held a special distinction in the hospital’s history books.

‘I was one of the first babies to be born in the new hospital, she says. All of my life, I ve heard that I was Number 8 .

Ms. Corbin was born on September 12, 1951. She had three older siblings; two who were born at home and one at Fort Mack during her father’s military service.

A retired head nurse from Downey Hospital delivered my first two, says Girly Holbrook, Ms. Corbin’s mother. After she tired she would go out into the countryside and help women deliver their babies at home.

With Joyce, I went to see my doctor, Dr. Billy Hardman, and he put me in labor in his office. He sent me to the new hospital, and Joyce was born before he got there! She came really quick, and the nurses delivered her.

Mrs. Holbrook and baby Joyce stayed in the hospital for about three days before they went home. Depending on the health of the mom and baby, sometimes stays were much longer. Women were often kept in bed for days, which actually increased their recovery times.

Mothers and babies didn’t room together in those days, says Mrs. Holbrook. You’d have your baby and then they’d take it to the nursery. Many mothers were put to sleep for deliveries, but Joyce came so quickly there was no time for any type of pain medicine.

Some mothers were still being put to sleep when I had mine, says Ms. Corbin. Both of her children were also born at the Medical Center. Some mothers were put to sleep; they woke up and met their babies.

Also, Ms. Corbin adds, in those days children weren’t permitted to visit. When I was small and when my children were born, children would wait outside the hospital under the trees.

But by the time Ms. Corbin’s grandsons were born, those small saplings had grown into beautiful shade trees, and things inside the hospital had changed dramatically.

Three generations of our family have been delivered at the Medical Center, she says. My grandsons Kyle and Joshua were both born there. When they were born, their moms could labor and deliver in the same room. Mothers prepared for childbirth with Lamaze or had epidurals for pain. You could also keep your baby in the room with you if you wanted, and your children could visit any time during visiting hours.

Since 1951, many technological improvements have decreased morbidity rates for newborns and mothers. Mrs. Holbrook lost two children after Joyce was born, and Ms. Corbin lost a child as well.

It is a really beautiful place up there now, says Ms. Corbin. The new area has hardwood floors and pretty draperies, but the best changes are the ones that help babies get off to a good start.
Healthy Journey building Stribling Heart Clinic

We used to say that Dick Stribling could smell a diagnosis," says Sonya Hancock, current director of the emergency services department and former director of the intensive care unit. "He was a genuinely gifted physician who cared deeply for his patients."

In the spring of next year, a new diagnostic heart clinic will open on the third floor of the Outpatient Services Building. The clinic will be built with funds donated by the community as part of the Healthy Journey Initiative and will be named after Dr. W.D. Stribling. "A doctor made it for us in his basement. It was cutting-edge technology, as big as a filing cabinet plus a linen closet and taught me the techniques. 'You don't wait on a doctor,' he told me. 'You start CPR and keep it up until one of us can get here.'"

"By saying that he showed great respect for what nurses could do. He knew we were here around-the-clock even when physicians could not be. He helped us believe in ourselves because he believed in us. The bottom line for him was what would help the patient, and it simply didn’t matter that we were ‘just’ women."

The new clinic, which will bear Dr. Stribling's name, will offer many improved services for the community and is only possible because of the generous support of people throughout northeast Georgia. "It’s such a fitting tribute," says Cantrell. "In another 50 years, the people of northeast Georgia will still be saying his name and honoring the service he provided. He was one of our hospital’s real pioneers."

"I think Dick would be thrilled that we have progressed so far," says Mrs. Stribling. "He would love that we have been saying his name." He loved serving the people in northeast Georgia. "In another 50 years, the people of northeast Georgia will still be saying his name and honoring the service he provided. He was one of our hospital’s real pioneers."

"I think Dick would be thrilled that we have progressed so far," says Mrs. Stribling. "He would love that this is a working tribute, a program that will serve our community for years to come."

<table>
<thead>
<tr>
<th>Services to be offered through the new Clinic and funded by Healthy Journey gifts:</th>
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<tbody>
<tr>
<td><strong>- Congestive Heart Failure Clinic</strong></td>
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<tr>
<td>To be provided to patients free-of-charge, this clinic-within-a-clinic will provide day-to-day support for people suffering from congestive heart failure.</td>
</tr>
<tr>
<td><strong>- Five Echocardiography</strong></td>
</tr>
<tr>
<td>Rooms with new echo machines which use sound waves to show how well the heart muscle and valves are working.</td>
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<tr>
<td><strong>- Multi-site echocardiography</strong></td>
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<tr>
<td>Patients will be able to visit Neighborhood Healthcare Centers throughout the region to be fitted for Holter and Event Monitors. Data can then be sent to the clinic’s board certified cardiologist for reading via a modem. This means less travel and greater convenience for patients experiencing heart rhythm abnormalities.</td>
</tr>
<tr>
<td><strong>- New stress testing and EKG machines</strong></td>
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<tr>
<td>as well as a new defibrillator and five blood pressure monitors</td>
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<tr>
<td><strong>- Expanded cardiac catheterization laboratory services</strong></td>
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<td><strong>- Cardiology screenings and education programs</strong></td>
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<tr>
<td><strong>- Cardiac Rehab and the Vascular Lab</strong></td>
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<tr>
<td>- A fully-equipped nuclear imaging room for isotope testing</td>
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<tr>
<td>- General expanded capacity for cardiac testing &amp; evaluation</td>
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Healthy Journey to raise $8 million

The W. D. Stribling Diagnostic Heart Clinic is only one component of The Medical Center Foundation’s most ambitious fund-raising project to date. Healthy Journey, a three-year initiative that began in 1999, has already raised $4 of its $8 million goal and will support the following improvements:

- Comprehensive Community Cancer Center & Supporting Programs:
  - Targeted Screenings & Community Education
  - In-Home Respite Care for Hospice Patients
  - Expanded cancer care services

- Support for the CHOICE Program at South Hall Middle School which helps at-risk teens develop healthy self-esteem and wise decision-making skills

- Keeping Our Children Healthy & Safe
  - An expansion of the SAFE KIDS Program, to build safer playgrounds and put needed safety equipment and information into the hands of parents to reduce the number of injuries and deaths due to preventable childhood accidents

- School Nurse Program
  - Educational efforts to increase enrollment in PeachCare for Kids, a state-funded, federally administered insurance program for working families

- Salvation Army Centers of Hope
  - The 9th Annual Medical Center Open raised nearly $90,000 to help fund the building of transitional family housing units at the Salvation Army’s Centers of Hope. Residents in the transitional housing units can stay together as a family as parents learn new job and budgeting skills and get back on their feet.

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To learn more about the Healthy Journey initiative or to make a pledge, please call The Medical Center Foundation at 770-533-8099.
Former Hall County Hospital Administrator Fred Walker said it well back in 1965: People point out that this hospital is a credit to the community, he said. I feel it's really the other way around. I think people of this area are a real credit to the hospital.

And so it is today. The hospital and the community it serves operate in a mutually beneficial fashion. The community supports the hospital through service and financial donations. The hospital serves the community: delivering our babies, healing the sick and comforting the dying. It is an endless exchange and through it both the hospital and the community grow stronger.

GOOD NEWS

If I had to name some shining examples of our best efforts in the community during the last couple of decades, one of the finest would be the expansion of the Good News Community Health Clinic, says LeTrell Simpson, vice president of corporate development. Nurses, dentists, physicians, and church groups came together to serve the underprivileged. Our community’s support of Good News and the addition of our mobile health unit even attracted the attention of former First Lady Rosalyn Carter.

Unlikely local hero Gene Beckstein opened Good News at Noon in 1993 as a soup line and spiritual outreach mission. Many of the people who came to Good News needed medical and dental services but were uninsured and uncertain of how they could get care. As word spread of Beckstein’s ministry, nurses, dentists, physicians and others quietly began to volunteer their time at the clinic. Retired physician Sam Poole, one of the region’s finest cardiologists began volunteering regularly at the clinic. Word of the high-quality free care spread quickly and within two years the clinic was bursting at the seams.

The Medical Center Foundation agreed to raise $100,000 to convert a storage shed at the mission into four new exam rooms, a small lab, waiting room and two restrooms. Donations began pouring in almost immediately. By campaign end, gifts had surpassed the goal by 100 percent, raising over $200,000.

Two years later, the Foundation’s Medical Center Open Golf Tournament raised an additional $150,000 to build a dental clinic at Good News.

MOBILE HEALTH UNIT

The mobile health unit, which now travels the roads of Hall and surrounding counties, is another of the hospital’s most successful examples of community collaboration efforts.

The van was a joint project of several community agencies: The Junior League of Hall County, The Hall County Health Department, Lanier Park Regional Hospital, The Gainesville City and Hall County School Systems, And the Medical Center. In the five years since the unit first hit the road, thousands have benefited from services offered through the mobile health program. Services range from childhood immunizations to diabetes and heart disease screenings.

SAFE KIDS

The community’s efforts to prevent childhood injury are another testimony to what a community can do by pulling together, says Simpson. SAFE KIDS is a coalition of more than 20 community agencies - from law enforcement to educators - working to lower the incidence of childhood injury.

SAFE KIDS distributes carbon monoxide and smoke alarms, life jackets, bike helmets and child safety seats throughout the region. More importantly though, SAFE KIDS provides safety education so that the community is aware of the risks to children and informed with the knowledge they need to use safety equipment.

Last year, the National SAFE KIDS Campaign awarded Northeast Georgia Medical Center & Health System the first-ever Outstanding Lead Agency Award.

The best reward is that the programs appear to be making a difference, says Simpson. Bicycle-related injuries seen in our ER dropped by 54% in 1999-2000, and Gainesville has one of the state’s highest rates of seat belt compliance.

LOVE LIGHTS FOR HOSPICE

Since 1995, the Auxiliary’s Love Light Tree Project has raised over $300,000 for the hospital’s Hospice program.

You can’t talk about community involvement and not talk about Love Light, says Simpson. Each Christmas as they light that tree and a local choir sings carols, we have a beautiful visual reminder of the support we receive from the community. Each of those lights means that someone shared from their own resources to help Hospice care for the terminally ill.

continued next page
MEALS ON WHEELS
When the Seventh Annual Medical Center Open Committee set its goal of $55,000 to support an expansion of the Meals on Wheels program they knew it was a worthy project.

We knew we would have good community support because Meals on Wheels is a well-respected agency, Woody Stewart, Development Council Chairman for the Foundation. But the outpouring by our community was unexpected and absolutely amazing!

The tournament raised nearly $85,000 to purchase equipment needed to establish satellite locations in North and South Hall and eliminate a 180-person waiting list.

But it didn’t end there, says Stewart. Because the tournament increased awareness of what Meals on Wheels was doing, many hospital employees and others throughout the community began volunteering to deliver meals.

SALVATION ARMY CENTERS OF HOPE
The following year, The Medical Center Open once again chose a local community service agency as its benefactor. Raising over $90,000 ($30,000 above the $60,000 goal) the Foundation helped The Salvation Army build transitional family housing units so that families in need will have a place to stay while they get back on their feet.

For years to come, when families in need turn to The Salvation Army for shelter, training and support, they will stay in housing that was built by The Medical Center Foundation through the generosity of our community, says Stewart.

PHYSICIAN AT HEALTH DEPARTMENT
Through a portion of its Indigent Care Trust Fund dollars, the Medical Center provided a physician at the Hall County Health Department. The nurses at the health department have always done a great job, says Simpson, but they were limited in what they could provide without a physician on staff. Using monies from the Indigent Care Trust Fund we were able to make a real impact in the quality of care available to our indigent population.

HEALTHY HALL PARTNERSHIP
The Medical Center Foundation, through the Community Benefits Department, funded a community needs assessment to determine the unmet health needs as they relate to social issues in Hall County. The 28-person volunteer steering committee shared the result of their assessment in 1999 and since has been working on a plan to improve the overall health of our community.

Healthy Hall’s efforts focus on three main areas:

- **¥ Education Pays** - working with city and county curriculum teams to find a way to infuse real life skills into the curriculum in grades K - 12 to lower drop out rates.

- **¥ CHAIN (Collaborative Health and Information Networking)** - joining ranks with United Way’s Information and Referral Committee to promote HelpLine, a newly formed information and referral number to better link citizens with the programs and services they need. This committee has a long-term vision of providing a 211-information service to the citizens of Hall County.

Results from the needs assessment also gave the Foundation the framework for the Healthy Journey Initiatives, says Simpson.

A special thank you....
to the 50th Anniversary Committee members for all their hard work in planning the 50th Anniversary Celebration.

Committee members include: Dr. John K. Burns, III; Dr. Henry Jennings, Dr. Hamil Murray, Miriam Sellers, Mary Emma Stribling, Peggy Walters, Nell Wiegand, Lynne Allen, Ruth Allison, Sharon Freeman, Martha Hemphill, Margie Moon, Anita Scott, Veran Smith, LeTrell Simpson, Cathy Bowers. Thanks also to Susan Daniel for her work in preparing the copy for this tabloid.
Reflections from and about NGMC employees

HENRY FORD HOWARD,
HOUSEKEEPING & LAUNDRY

The Rev. Henry Ford Howard was one of the hospital’s first employees and remembers well the day the hospital opened.

I was there before they moved in the first piece of equipment, he says. On September 1, they brought in the patients from the other two hospitals. It was a big day.

Mr. Howard worked in laundry and housekeeping until he retired from the organization in 1979.

It was a great place to work, and John Ferguson had a lot to do with the way employees enjoyed their work. He had a head on his shoulders; I’ll tell you that.

JAMES GRAVITT,
PURCHASING

Eighty-one year old James Gravitt joined the hospital as a young man just 6 weeks after it opened.

I was working in a local drug store when they called and asked me to come to the hospital, he says. I was over materials management and acted as controller. Those were the days before air conditioning and before hospitals had access to the funds they needed to buy necessary equipment. It was a continual balancing act, but it was my job to help make sure each purchase we made was a good value. People used to tease me about being a penny-pincher. They’d say I guarded the hospital’s money like it was my own. They were right. I did. I had been entrusted with a big responsibility, and I took it seriously.

Mr. Gravitt was instrumental in helping form one of the first Group Purchasing Organizations: Georgia Hospital Shared Services. He was on the original committee and board of directors.

Combining our purchasing power with other hospitals gave us leverage in negotiating prices, he says. During that first year alone, we saw a dramatic reduction in our costs for IV fluids and other major expenditures.

MARTHA HEMPHILL, EKG

The hospital is really the only place I have ever worked, says Martha Hemphill who joined the hospital in 1957. I worked on the floor, was a ward secretary, and then went to work with Dr. Murray in the lab. From there she moved into EKG and after several promotions, has worked there ever since.

The people I have worked with taught me things I rely on every day. Drs. Stribling, Jennings and Poole, Drs. Valentine, Johnson and Bloodworth were our teachers. There is no way that I can overstate the contribution Sam Poole made to our cardiology program. He started the cardiac care unit. He taught us all, shaped the way care is still given in the CCU, and mentored scores of students through his work with the Hall School of Nursing. He gave me incredible opportunities and helped me grow. They called us the Poole girls. And even though he retired years ago, when he calls, we jump. He commands that kind of respect. It isn’t tied to any power that came with being on the active staff.

MARIA FISK,
LAURELWOOD

I joined the hospital in the Summer of 1987 to help begin preparations for the planned adolescent program, says Maria Fisk, manager of the Adolescent Unit at Laurelwood. We were still operating out of the west wing on the main building’s fourth floor. That program had begun in 1971 with 27 beds.

When we opened Laurelwood in January of 1988, it was big news. We were able to add the adolescent program and expand our mental health and chemical dependency programs substantially.

In the 14 years I’ve been here, we have seen dramatic changes in mental health treatment. Changes in reimbursement have closed many private and state run facilities, so our patient population is sicker than when we opened Laurelwood. The challenges are greater because lengths of stay have been shortened - but that’s true in the main hospital as well. There are a lot of challenges so we have to stay on our toes, looking for new ways to do things.

We’ve also seen the introduction of many new medications for treating mental illness that give patients a hope that they would not have had years ago.

SALLY GROSE,
NUTRITION SERVICES

Sally Grose, nutrition services, joined the hospital in the mid-70s, but her family ties go all the way back to the beginning of Hall County Hospital.

My dad, Hart Jointer, MD, was on the medical staff from 1929 to 1988, she says.

I joined as a nursing assistant up on the fourth floor when surgery was on that floor. Then I transferred down to dietary and have been here ever since.

Grose has worked on the patient
trayline, in the main cafeteria, and now keeps the dessert bars stocked.

We have come a long way, she says. We started in a small room near where the service elevators are now. We've had several renovations and additions and now take up most of this side of the basement's west wing. It takes a lot of room and a lot of people working together to prepare three meals a day for every patient and to run the cafeteria for staff and visitors.

**RUTH ALLISON, RN, SHORT STAY SURGERY AND ENDOSCOPY**

When I started nursing back in 1962, we were a small hospital; and today we are a large medical hub. In 62, we had two RNs in the entire hospital: one was the supervisor and the other worked in OB. Everyone else was an aide or an LPN. Now, we have hundreds of RNs.

I work in a progressive atmosphere where everyone is working to find better ways to deliver care. There are so many employees who have been here as long as I have or even longer. That says a lot about the management and the organization's philosophy. I'm proud to be an employee here.