



Minnesota Works Progress Administration:
Writers Project Research Notes.

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FEDERAL WORKS AGENCY
WORK PROJECTS ADMINISTRATION
1734 NEW YORK AVENUE NW.
WASHINGTON, D. C.

HOWARD O. HUNTER
COMMISSIONER OF WORK PROJECTS

February 5, 1942

Mr. S. L. Stolte
State Work Projects Administrator
1885 University Avenue
St. Paul, Minnesota

Attention: Mrs. Henet L. Kaufmann
State Director
Community Service Programs

Dear Mr. Stolte:

We are returning to Mr. Macy the manuscript,
Itasca Lends a Hand, transmitted with your letter of
January 16, 1942; a technical editorial report is attached.

The manuscript is not approved for publication
in its present form. It needs revision for better focus,
a more correct correlation with accepted welfare practices,
and the deletion of many passages that do not conform with
Writers' Program policies. The subject, if properly treated,
is significant in that it shows how welfare work is carried
on in a rural county. For this reason we hope that Mr. Macy
will be able to revise the text and submit it again for
approval.

Note
This ms. was returned at a
time when program redirection
into National Defense was well under
way. Additional research necessary to
complete the revision recommended here
would have required personnel not available to
at the time. In addition, the sponsor organization
was undergoing a drastic reorganization, brought
on by Mr. Roberts' alleged irregularities.
In view of all this, it did not seem advisable
to undertake the job of revising the manuscript
and clearing it with the new Welfare
Board for publication. Other work which
is being suspended in this emergency,
As in the case of other work which
this job can be resumed later on,
is this if it becomes possible and desirable
to do so.

Walter M. Hollinger, Director
Public Activities Programs
By J. D. Neward, Director
WPA Writers' Program

Roscoe Macy

EDITORIAL REPORT ON STATE COPY
(2 carbons required)State MinnesotaDate February 4, 1942Subject Itasca Lends a Hand

It is apparent that a conscientious effort has been made to gather material for this manuscript. It seems to us, however, that poor selective judgement has been exercised. The focus is the commission rather than welfare work and the care of the county's poor and ill; the subject matter is not sufficiently integrated with welfare developments; and the style is dull and awkward. The manuscript, little more than special pleading for and laudation of the commission, is disapproved for publication in its present form.

Public funds should not be expended to prepare a manuscript whose only discoverable objective is the justification and praise of one special body. This accepted policy and the excellent title, Itasca Lends a Hand, led us to expect that the manuscript would be, primarily, an account of welfare work in the county, focussed on the people, their needs, and how these needs have been met, and only secondarily a history of the commission. As the text now stands, it seems to be a rather dull account of how the commission struggled to maintain itself in the face of more professional standards in social work.

The facts, without the general and largely unsupported passages of praise, could be made into an interesting account of welfare work in this rural county; by inference such an account would be of more than local importance in showing the pitfalls, the weaknesses, the difficulties encountered, and what steps were taken to meet them. The writer states (Page 75): "Out of its wide and varied experience have developed important lessons which are of general, and not merely local, applicability in the conduct of public welfare work." But nothing in the manuscript bears this out.

The data given about the poor farm, the fact that no professional social worker was regularly employed until long after this was accepted procedure in social work, that there was continuous confusion about funds, authority, and provision of relief -- all indicate that welfare work in the county, as carried on by the commission, is hardly a pattern to be held up as a shining example.

We urge that the manuscript be revised in the light of the above general criticism. All the trite passages of praise should be deleted. In their place, expand the passages on the hospital, poor farm, and other welfare institutions; give some actual stories of persons receiving aid, so that the text will have some human interest appeal.

The following specific suggestions and the text notations and editing will, we hope, be helpful in revising the manuscript.

Chapter I: Practically all of this chapter, we suggest, should be deleted. The final five lines on page 3 and all of page 4 should be transferred to the introductory chapter (now Chapter II), giving the physical make-up of the county and its economy in 1917.

Page 2: Social service was far advanced by the 1930's and it can hardly be said that only then did it emerge from "the narrow, harsh legal restrictions of the Elizabethan Poor Laws."

"... held firmly to that delegated authority, defending it ..." The text does not make clear that this was laudable; in fact, we suspect that it was often a reactionary attitude.

Page 5: Are the terms "meandered lakes" and "unmeandered lakes" in common use in Minnesota? They are unclear to the general reader and do not appear in the dictionary.

We suggest inserting in the paragraph about Grand Rapids something on the population of the other towns in the county, since this makes clear the character of the section.

Page 8: Please check carefully the passage on the altruistic practices of the mine companies, and make certain that the information comes from a "neutral" source. What about the miners themselves? Are they unionized? How do the rent charges for the company owned houses compare with others in the county?

Page 11: How did this group get along? Did the men become public charges, and is this why the county "developed a natural reluctance to see the number increase?"

Page 22: At the close of Chapter III some resume would be effective, summarizing how and why the commission came into existence and why it had its two-fold function.

Chapter IV: The general criticism above applies particularly to this chapter. There seems to be far too much detail about the meetings, resolutions, etc. of the commission. The focus should be the poor and ill of the county. The TB patients and the poor farm are mentioned here only to explain some accounting difficulties encountered by the commission. The poor farm in the pre-1917 period should be adequately treated. Material on page 29 ff seems to belong in the section before 1917. We suggest putting the By Laws in the Appendix. As with the poor farm, more is needed about the hospital. Describe it; how was it staffed; how many beds, etc. etc.

Chapter V: The entire chapter needs revision. The reader is less interested in the administrative trials of the commission than in how well the commission cared for the ill and poor. It would seem that the commission was setting itself up against a legitimate trend in welfare work. The lack of a permanently employed welfare worker as late as 1927 is a case in point.

Chapter VIII: The title "Organized Pressure Groups " is misleading. Such groups, as the term is generally used, maintain legislative lobbies or exert pressure to secure or block legislation in some other way.

This entire chapter shows obvious editorial slant. Care should be taken to avoid editorializing; give the facts, carefully checked, in an objective way, so that the reader cannot tell on which "side" your sympathies lie.

See text editing for numerous deletions. The long quotation from an unnamed person is worthless as source material.

The order of duties of the commission -- to conserve the poor fund "while at the same time providing adequate relief" seems strange. Were the duties not rather to provide adequate relief within the limits imposed by the poor fund? The terms "deserving needy" and "Benefactor" are outmoded concepts in welfare work. The commission should not be considered (and should not consider itself) a benefactor ; it is spending public funds.

Mention is made of old age pensions. Were these part of the benefits set up under the Social Security Act. By 1937 Minnesota had provisions under this act for old age assistance, aid to the blind, aid to dependent children, and unemployment compensation. But no mention is made of these provisions or how they were carried out in the county.

When the manuscript has been revised, it should be submitted for approval to an authoritative social worker to make certain that the point of view is in line with modern welfare concepts.

ITASCA LENDS A HAND

A history of the Itasca County Poor and
Hospital Commission, the first
welfare board to be established
in a rural county in Minnesota
1917-1942

Compiled by workers of the Writers'
Program of the Work Projects
Administration in the
State of Minnesota

Sponsored by the Itasca County
Poor and Hospital Commission
and Welfare Board

State Department of Education

Statewide Sponsor of the Minnesota Writers Project

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ITASCA LENDS A HAND

CHAPTER I

WELFARE PIONEERING

Page 1

This is the story of ^{work in a rural county} a rural county welfare board, its origin, its ^{and how it adjusted to changing} principal characters and the struggle to hold it to its original purpose through the ^{two conditions,} grave difficulties of hectic decades. Only incidentally is it the story of the Itasca County Poor and Hospital Commission and Welfare Board with headquarters in Grand Rapids, Minnesota.

This board has done in less than twenty-five years what many cities and metropolitan counties have required from fifty to some hundreds of years to do and what in the great majority of rural counties has not been done at all. Because Itasca is a rather sparsely settled county only a generation or so removed from its pioneer days, the effect of the work done and the methods used are still visible and easy to analyze.

Other counties in Minnesota and elsewhere have similar or greater problems to meet in the handling of welfare work and if this account is ^{clearly} simple enough and intelligent ^{by told,} enough, it is hoped that county officers and legislators as well as public spirited citizens may find the story helpful to them in taking steps to improve their own county organizations for the relief and rehabilitation of the poor.

The Itasca County Poor and Hospital Commission was established to take over a responsibility which the county board of commissioners had found irksome. In any county in which welfare functions are discharged in the main by the county commissioners, it will be found that the usual procedure, mainly because it is the easiest, is to establish a county farm or "poor house," and to provide some form of work relief, usually on county roads.

It is only in recent years that state and federal agencies have come into existence. Although the doctrine that there is some measure of public responsibility for the care of the needy was recognized in the English Poor Law of Elizabethan

but there was a
poor farm in Itasca...?

X days, it took an economic catastrophe to bring about a general realization in this country that economic dependence does not necessarily imply social inadequacy. It is now known that public responsibility for the care of the needy can no longer be properly discharged within the narrow, harsh legal restrictions of the Elizabethan Poor Laws. To make its due contribution to the strength of democracy, it must adopt something of the philosophy and the deep charity that has developed under private philanthropy, and avail itself fully of the scientific knowledge accumulated through sociological research and through experience in welfare work. Busy men of affairs, chosen as county commissioners, do not often have the breadth of vision to recognize the full extent of their responsibility nor the experience needed for adequate fulfillment of that responsibility.

X Itasca County was remarkably fortunate in having a county board, a quarter of a century ago, whose members were disposed to prepare for emergencies before they arrived. When the burden of public relief threatened to become too heavy for them to give it adequate attention, they did not attempt to dodge their responsibility. They chose five men they trusted, to shoulder that burden, and then they backed up their delegates through thick and thin.

X That five competent men were found to assume this grave burden and willing to devote to it an extraordinary amount of time and effort without recompense is similarly remarkable. That ^{this} new Itasca County Poor and Hospital Commission had the judgment and vision to forge a legal instrument without which they would have been virtually helpless in their task was still another piece of good fortune, without which the ultimate success of the experiment would scarcely have been possible.

7. The commission, having assumed the responsibility delegated to it by the county board, held firmly to that delegated authority, defending it, with the help of the pioneer welfare statute of 1917, against every challenge from the outside.

They were ordered to unify welfare activities in the county and they were strikingly successful, with the help of the State and Federal governments, in carrying out that order. Wherever possible, they cooperated with other agencies; if cooperation would not work, they assumed direct control. They held fast to their authority as it was given to them by law, and they served faithfully and with no attempt to dodge their responsibilities. They laid their other business aside to render this unpaid public spirited service.

Their period of performance was such as to earn the respect of all. They met the challenge of pressure groups and disarmed them by frankness and by single-minded persistence along the way that seemed to them to be the right one.

Back in 1917, a great war was raging and the post-war depression was as yet undreamed-of. Only the larger metropolitan areas had set up tax-supported welfare agencies to provide the deserving poor with subsistence and medical and hospital care as needed. In rural areas, the thought of formal public works as a relief measure had been forgotten, if indeed it had been heard of since the march of Coxey's Army in 1894.

It therefore comes as a distinct surprise to know that Itasca County, a thinly settled rural area in northern Minnesota, established a non-political welfare board 25 years ago, and through it has maintained scientific control over the county relief expenditures ever since. More than 1,800,000 acres in area, Itasca is one of the largest counties in the United States east of the Mississippi River. Its population in 1940 was 32,996; in 1917, it was scarcely half that. One naturally wonders what influences were present in that rural, sparsely-settled region to account for the establishment

Use this with
and the
remainder of
the chapter with the material
in chapter II

of the Itasca County Poor and Hospital Commission as early as 1917.

~~The answer is perhaps to be inferred from the economic makeup of~~
the county at that time. ^{the county} ~~It~~ was dependent mainly upon three basic industries,
lumbering, agriculture, and the mining of iron ore. Of these, lumbering was already
~~moribund~~ ^{dying out}, with the pine almost gone, and agriculture was still in its infancy. The
third, iron mining, was then entering upon its prosperous World War phase, but it
had never provided more than seasonal employment, while technological improvements
had already been largely instrumental in reducing total employment in Itasca County
mines to the low figure of 1,100 in 1915. Even in 1917, then, Itasca was facing an
unemployment problem.

Another factor which undoubtedly had its influence in the 1917
decision was the fact that the principle of hospital insurance had been introduced
into the county in an early day ^{through the institutions known as "lumberjack hospitals"}. The public had become accustomed to having hospital
facilities conveniently at hand and, although the original institution was dormant
in 1917, its idle plant was a constant reminder of a service which the community
needed.

is this necessary? [A brief review of the setting and of the events leading up to the establishment of the Itasca County Poor and Hospital Commission will promote a better understanding of its history.

? Itasca County is in north central Minnesota, its northern boundary being within ~~sixty~~-five miles of the Canadian border. It sits like a saddle on a three-way watershed. The streams of the southern part of the county drain ^{into} ~~to the~~ Gulf of Mexico through the Mississippi River; The northern sections drain into Hudson Bay through the Big Fork and Rainy Rivers, and certain of its waters find their way to the Great Lakes and St. Lawrence River. The winters are long with much snow and severe cold. Summers are short and ~~marked~~ by hot days and cool nights. A temperature swing of 130 degrees between summer and winter extremes is usual.

The area of Itasca County ^{is} comprises ~~2844~~ square miles or 1,819,676.52 acres, of which 128,768.61 acres are covered by the waters of meandered lakes and streams. There are 386 meandered lakes in the county. No accurate count has ever been made of the others but there are thought to be between five and six hundred unmeandered lakes, of more than twenty acres each, within its boundaries.

? The population of the county is 32,996, about equally divided between ~~the rural areas~~ ^{the farming} and the towns and villages. The seat of county government is the village of Grand Rapids, population 4,875, situated on the Mississippi River in the south central part of the county. ⁹ The county ~~area~~ may be roughly divided into three sections: timber, iron ore fields and farm land.

The chief timber region is the Chippewa National Forest in the North-western part of the county. The forest ~~is located~~ ^{is} for the most part, on lands that are marginal or sub-marginal for farming purposes. During the ^{1930's} ~~past decade~~ forest areas have ~~been~~ extensive ^{by} improvements ^{the} through activities of ~~emergency employment~~ agencies such as the Civilian Conservation Corps and the Work Projects Administration.

There are a few ~~other~~ small (timber holdings privately-owned) scattered throughout the county.

The iron mining section ~~of the county~~ lies east and a bit north of Grand Rapids. Here is found the chief concentration of population outside the county seat. There are eight mining towns or villages with populations ranging from 300 to 2,500.

The remainder of the county may be termed agricultural ~~area~~. Farming, however, is in the beginning stages in Itasca County, with less than five per cent of the available land actually under tillage. Most of the well-developed farms are found in the southern one-third of the county.

*OK? or
of Finnish
etc
descendant*

The inhabitants are descendants of many nationalities. Besides native Americans, families of Finns, Scandinavians, Yugo-Slavs and Italians predominate, with the usual scattering of Germans, Irish, English, Scotch and French found in a midwest community. There are about a hundred Indian families grouped in a few villages in the western part of the county. Italian and Jugo-Slavs are generally found in the mining towns. The farming population includes most of the Finns and Scandinavians, as well as many Germans. Several families ~~of~~ ^{have} Czecho-Slovaks ~~are located on~~ farms in the northwestern townships.

During the 1930's

Good roads reach all parts of the county. ~~The past ten years have~~ ^{roads were} brought greatly ^d ~~improvement~~ in this respect through depression-time work provided by the county, state and federal governments. ~~The county~~ ^{Itasca} is served by two railroads. ^{which} ~~The Northern Pacific~~ ^{southern part of the} crosses the county from east to west in the southern part. ~~This~~ ^{townships.} once had several feeder lines reaching into the northern ~~sections of the county.~~ The main purpose of these feeders was to haul timber and timber products to the main line and over the continental divide to the Mississippi. When logging operations were completed, these lines were taken up. The Iron Range has a separate railroad to haul

*it also, of course, crosses it
from west to east!*

ore to the head-of-lakes docks at Duluth.

Principal occupations in Itasca County are mining, lumbering, agriculture, and wood processing.

Mining

~~The~~ ^{That} portion of the Mesabi Iron Range lying within Itasca County includes more than fifty-four mines, fewer than half of which are now in operation. Most of the operating mines on the Mesabi today are of the open-pit type. Early mining was underground ^{and} the open-pit method ^{was} ~~being~~ a later development.

While the ore deposits of the Mesabi Range are more extensive in St. Louis County, adjoining Itasca on the east, mining occupies a prominent place in the latter's economy. The industry was opened up in Itasca ^{about 1898-99,} [a year or two before 1900.] ~~but mining was not conducted on an important scale until about 1910.~~ ^{did not become} ~~The latter year~~ ^{IN that year} saw the beginning of the use of heavy machinery ^{was used for the first time} and the introduction of open-pit mining. A few of the underground mines have continued in operation because of the superior quality of the ore obtained, and in order to use equipment already installed.

In open-pit mining, the soil and parent rock is stripped from the ore, which is then removed from its bed by power shovels. This method requires processing of the ore in crushers and washing plants located at the mines.

Employment in the mines has varied from a high of ⁵⁰⁰⁰ ~~five thousand~~ in 1921 to a low of ^{1,100} ~~eleven hundred~~ in 1915 and 1932. There has been a gradual improvement in mining methods during the past twenty years and a consequent reduction in the relative number of men employed. In the peak employment year ^{1921,} ~~of 1921,~~ ^{6,000,000 tons} ~~the amount of ore~~ ^{were shipped} ~~shipped was 6,000,000 tons~~ with five thousand men employed, while the peak production year ^{in 1923,} ~~was 1923,~~ ^{were} ~~with 9,800,000 tons shipped,~~ but only four thousand men employed.

Another factor making for periodical unemployment is the seasonal nature of the mining industry. This results in a forced lay-off of workmen for a four-to six-month ^S period each year, and at a season when there is little chance of finding

What heavy does it have on the subject of the mine?

other work.

~~substitute employment~~. Worst of all, this periodical lay-off applies chiefly to the lower wage group, as there is a good deal of shop work available for skilled men during the winter.

Production, moreover, is on a season-to-season basis. It is inadvisable to build up stock-piles for future use, as extracted ore is taxed much more heavily than the unmined reserve. For this reason, in a year of few orders, little mining is done and few men are employed.

Shortly after 1910, with the rapid expansion of mining operations, an acute housing shortage developed. To cure this condition, the mining companies built groups of homes conveniently located for their workmen on what were called "locations". Practically all of these were later incorporated into mining towns or villages.

see report It has been the policy of the mining industry to act in some respects as a sort of volunteer social agency. In slack times, it has reduced rents on company-owned houses, and employed its men on maintenance and improvement projects on a part-time basis to spread the pay checks, sometimes operating at a very small margin of profit or even at a loss rather than close down altogether. *— source?*

In safety equipment and education, ~~splendid~~ progress has been made during the thirty odd years of operation. A few examples from yearly records show a steady reduction in the relative number of occupational injuries:

1913	2,000 employed, 260 injured.
1914	2,500 employed, 255 injured.
1918	4,500 employed, 230 injured.
1923	4,700 employed, 230 injured.
1925	3,900 employed, 155 injured.
1930	4,300 employed, 120 injured.
1932	1,100 employed, 20 injured. (Record low employment year since 1910.).

Employment has increased since 1932, but the ~~accident record~~ has been held at or below the 1932 level *in* ratio of injuries to number of men employed.

Other welfare activities of the mining companies include quantity pur-

chases of fuel to be sold at cost to mining town inhabitants, medical and hospital care, help and encouragement along educational lines, and pensions to long time employees. Public-spirited, welfare-minded mining officials advise their people in financial, social and legal matters, and many times in family and inter-family affairs.

The Mesabi Range area is served by two hospitals, both situated in Hibbing, St. Louis County. These institutions are sponsored by and receive most of their support from the mining interests. There are branch hospitals in the Itasca County mining towns, serving as diagnosing^{tic} centers, and for treatment of minor injuries; cases requiring surgical care or bed treatment are taken to the main hospital at Hibbing.

It is estimated that the high grade ore now being mined in Itasca County will be exhausted in about thirty years. Experiments are being conducted, however, in the processing of lower grade ores. Should these meet with success, the life of commercial ore deposits might be extended for many years.

Lumbering

The entire county was once heavily timbered, and it was this timber that drew early comers to Itasca. The first logging camps were opened in the ^{1870's} decade before ~~1880~~. The major portion of the logs were floated down the Mississippi to mills at Minneapolis. In the latter part of the logging era, however, a considerable amount of timber was processed locally and hauled out by railroad. The best and most accessible stands of timber were rapidly cut, and by 1910 the Paul Bunyan days were over.

Since that time, logging activities have been ^{confined to} those of the small operator ^{who purchases} stumpage from state, federal or private owner, and those of the land owners themselves. Timber products today are pulp wood, railroad cross-ties, cedar fence-posts and poles for telegraph and telephone, match wood and box wood, mining timbers, and some saw timber of inferior grade.

Camp logging operations are seasonal, conducted chiefly during the winter months when the swamps and bogs are frozen. ^{Though} The volume is small as compared

large-scale
lumbering
?

~~logging has~~ ^{ed} with the early days, but ~~is an important factor in bridging~~ the gap between logging and agriculture.

Farming

With open farm land available at low prices, cutover land that must be cleared of stumps and brush does not attract the average experienced, well-equipped farmer. However, agricultural development in Itasca County has been steady, though not rapid, through the past twenty years. Those making land improvements fall into several classes.

One group is composed of those who wish to own a farm home to supplement part time employment in mines, woods and elsewhere. The availability of cheap lands and development of good roads ^{made this feasible} ~~have given encouragement to this idea~~. In early days a considerable part of the land was homesteaded for its timber. Many early homesteaders sold timber rights to logging concerns and worked in the camps. When logging ended, some who had made headway in land clearing continued their improvements, supplementing their income by work in small timber-product camps and by township and county road work.

During the period when land prices were high elsewhere, ambitious but under-capitalized farmers bought cut-over land in the county and placed it under cultivation. Economic mortality in this group was high, but the developments remained. Furthermore, there were a good many who rode out their difficulties and attained moderate success. Notable among these were groups of Finnish farmers, with their cooperative enterprises.

^{Another} ~~The members of another distinctive group are the victims of the depression~~ ^{is made up of} ~~who moved into Itasca in the 1930's.~~ Men who had lost employment elsewhere, many of them with large families, were attracted by cheap land on easy terms with an abundance of fish, game, wild fruit, and fuel to aid subsistence. ^{They} ~~These~~ moved in, erected shelters, opened garden patches

and started from scratch. In early depression years they were numerous. More recently, the county has developed a natural reluctance to see the number increase, and acquisition of residence has been discouraged except in special cases.

see report

^{For the county as a whole}
Principal cash crops are dairy and poultry products and potatoes. Others are seed, truck garden products, small fruit, pork, mutton and wool. The chief markets are the county seat and the mining towns. Naturally, ^{the latter outlet} ~~this market~~ fluctuates with the ups and downs in mining operations. A considerable demand for seed potatoes from this region has developed in states farther south.

?
the county?

The University of Minnesota maintains and conducts an experimental farm in Itasca County as a branch of the State Farm School. ~~This is located on good roads near the county seat.~~ The county employs an agricultural agent, whose function it is to advise ~~with~~ and aid the farmers with their problems. ^{Itasca has} ~~They have been~~ ^{successful} ~~fortunate~~ in ~~being able to keep individual agents for long periods,~~ and the county has profited by their intimate knowledge of ~~the territory~~ and local conditions.

Tourist Business

There are more than 150 summer resorts of various types in Itasca County. ~~There are~~ ^{are} boys' and girls' camps catering to the families of those in the upper financial brackets, and summer welfare camps ^{are operated} for less fortunate children. Summer-time tourists are served by cabin camps, trailer camps, camp grounds and lodges, offering lodging and meals. The more elaborate places ^{are} [have] summer hotels with tennis courts, golf courses, and riding horses, in addition to ~~the natural accommodations of~~ bathing, fishing and boating. ~~The~~ ^{State} and national parks in the area lend themselves to this sort of recreation.

The resort season proper is from May 15 to Labor Day. Chief attractions are the equable summer climate with its cool nights, and the clear lakes well stocked with fish and excellent for bathing and boating. The timbered and cutover regions

clientele
afford good duck shooting during the fall flight, so that many camps have an additional during the hunting season.

The resorts draw their custom from the east, south and middle west.

They hire a few of the employables of the region, and during their short season, *being* ~~are~~ *considerable* an important market for dairy, poultry and truck farm products. The summer resort and tourist trade is an important *employment factor in* addition to the commerce of the county.

Manufacturing

chief
The most important manufacturing concern in the county is the Blandin Paper Mill located at Grand Rapids on the banks of the Mississippi River. This mill employs an average of *225 persons* ~~two hundred and twenty-five people~~. It was opened in 1902, and has been in continuous operation since.

The paper mill purchases almost all its material locally, from nearby pulp cutting camps and from individuals cutting and hauling from their own land. The mill uses from *30,000* ~~thirty~~ to *35,000* ~~thirty-five thousand~~ cords of pulp wood per year, and has a production output of *150* ~~one hundred and fifty~~ tons of paper per day.

50 *60* At Deer River (population 987) in the southwestern part of the county, *is a box factory*. It uses material purchased in the *vicinity* ~~locality~~, and employs between fifty and sixty people. *persons*.

There are several cooperative and *individually owned* private capital creameries scattered over the county; also a number of small saw and planing mills, mostly employed in custom sawing of lumber which is used, *chiefly* ~~for the most part~~, in local building projects.

Commercial activities in the county are those required to serve the needs of the territory. The county seat has a wholesale grocery concern, yards for the marketing of timber products, and a freight trucking company.

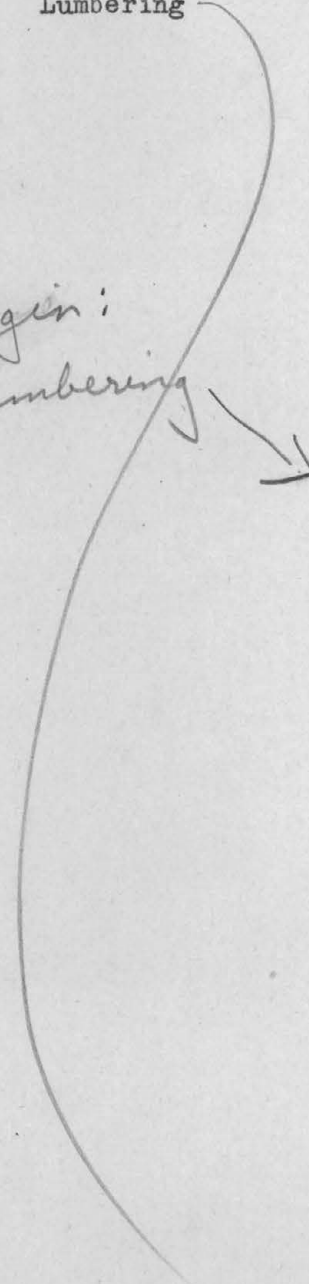
When was the county erected, when was the county seat established etc. "Early Days"; used so frequently, has no meaning without some more of the county's history.

To understand the need for early establishment of a social agency in Itasca County it is necessary to go back to the years immediately following the logging period. Lumbering

too much of
this sort of
introductory
material.

Why not begin:

#1 Lumbering



~~no 4~~ ~~Logging~~ was the county's chief industry in the early days. Closing of the camps and slackening of traffic on the logging railroads ~~severely curtailed~~ ^{meant loss of work} employment. ~~This type of work had been the main dependence of~~ ^{for} many of the early settlers. Some of these ^M moved away, but many stayed, of necessity or by choice. In parts of the county the closing of the camps was in some measure offset by expanded activity in iron mining which occurred at about the same time, but a good many families were left without adequate means of subsistence, and had to ask the county authorities for aid of various sorts.

The governing body of the county is the Board of County Commissioners. The county is divided into five commissioner districts, and the board consists of ^{elected} five commissioners, ~~elected~~ one from each district. The chief concern of the board ^{today} is road maintenance and improvement, ^{with} ~~though it has~~ several other functions of varying importance. ^{the} ^{however,} In early days its field was very wide and complex as it was practically the sole arbiter in all county affairs.

^{what} In case of misfortune, sickness, fire, crop failure or unemployment the county commissioner of the district of residence was the person to see. Sometimes assistance took the form of work on the county roads, but more often it was the direct grant of a grocery order, or an order for building materials, or medical or hospital aid, paid for from county funds on the order of the commissioner. Until 1917, each commissioner was sole authority in the granting of these aids within his own district.

Under this system the amount and type of assistance granted in emergencies differed widely throughout the county. Road work was paid for from a county road and bridge fund, raised by taxation of property in the county. This fund was distributed proportionately among the districts, so that each district had a definite amount to use. Direct aids ^{was} ~~were~~ paid from the county poor fund, which was not

divided among the districts.

The granting of relief was considered a minor function of the commission. The commissioners were busy men and their districts were large, with extensive areas often inaccessible on account of road conditions. ^{It is} There was consequently ^{not possible} no scientific ^{in any systematic way} system for investigating the relative need of applicants. The commissioners' personal knowledge and the reports of [neighborhood groups] commonly formed the basis on which relief was granted or denied. Naturally, the eloquence of the applicant and the generosity of the commissioner were influential factors. Oldtimers state that election year was likely to influence both the demand for relief and the generosity with which it was dispensed.

^{neighbors?} The records show that during the years 1913, ^{from} 1914, ^{through} 1915 and 1916 the amount of aid granted in district No. 1, in the western part of the county, totaled more than that of the four ^{remaining} other districts combined. This situation gave rise to dissatisfaction in other districts, both on the part of applicants for aid and of the commissioners, who ^{wished} desired to keep down relief expenditures. By 1916, the poor fund was far "in the red", the county was paying interest on unredeemed warrants, and an increase in the tax rate impended.

Hospitalization

Another factor of considerable influence was the hospital situation in Itasca County. Until 1910, almost the entire population of the county was directly or indirectly dependent upon the logging industry for its living. There were a few settlers working in the camps, but most of those employed were typical lumberjacks. ^{rough men, accustomed to privation} There were usually single men who followed the camps from one section of the country to another as the timber was cut off.

"Jack" was a carefree individual who gave little thought to the future. He worked all winter in the woods, living in camps where sanitary measures

were crude and ineffective, drawing against his wages for necessary clothing and for tobacco kept in stock by the camp clerk. At the time of the spring break-up he drew the balance of his winter's wage, generally in the form of a check, and headed for the nearest point where a good time might be had. The fee for ^{cashing} chasing his check was often as high as twenty-five cents on the dollar, and the remainder, in the course of a week or two, found its way into the tills of saloons and loggers' hotels. Rid of his hangover, Jack then made for the Dakota harvest fields, and in the fall came back to camp, his pockets again empty.

The loggers almost never made ^{voluntary} provision for sickness or accident. ^{possible} A company known under one of its names as the Northwest Hospital Company established ^(also known under other names) several hospitals ⁱⁿ through the northern part of the state; one of which was ^{item} located at Grand Rapids. Their plan of operation was based on the sale of "hospital tickets" to the men working in the logging camps. The ^{costing} charge for a ticket ranged from nine to twelve dollars ^{a year}. This ticket ostensibly entitled the purchaser to any needed hospital service during the year. Virtually all the clients were woodsmen, to whom the tickets were sold on commission by agents visiting the camps for that purpose.

The one in Grand Rapids? This hospital operated with some degree of success while the big camps were running. The management frequently evaded its ticket liability by ruling that the patient either was not sick enough to need hospital care, or was too sick to be moved to the hospital. Clients began to drop out, and as the logging business was already entering upon its decline, the hospital company was soon in financial hot water. It closed for a time, then reopened under a new name but with its business policies unreformed. Its days, of course, were now numbered. Many of the camps were closing down, while the loggers who remained were disillusioned and no longer easy marks for hospital-ticket salesmen. Shortly after 1910, the Northwest Hospital Company

Keeps is H. colloquial
good
closed down for ~~keeps~~. It was an ill-starred venture, and its methods ~~unsavory~~, but at least it had the distinction of being the first experiment in group hospitalization in the north woods country.

The hospital was taken over and operated for a time by Dr. Thomas Russell and Dr. H. B. Ehle, ^{11/4} ~~They~~ acted as house physicians and surgeons. ^{respectively} The care and nursing of patients was entrusted to the Benedictine Sisters. An attempt was made at first to operate on the ticket system, but ~~the effort was not a financial success~~. ^{it was} They found that they could not give good, conscientious service for a price low enough to ^{sell} ~~make the tickets saleable~~ to persons who were not already sick. After operating for a couple of years, the hospital was closed for a time. The Benedictine Sisters then reopened it and conducted it as a nursing home until 1917. *is this the meaning or did they both act as physicians and surgeons?*

Another private hospital was operated for a time on a site directly across the Mississippi River from the present paper mill location. ^{what distinction between nursing home + hospital?} It was conducted by Dr. John C. Rosser, ~~in connection with his medical practice~~, but was closed before 1917, ~~Dr. Rosser leaving for another location~~.

First Steps

Due to a number of contributing causes, tuberculosis was ~~frequently~~ prevalent in early Itasca County. As few families were able to ^{pay for} ~~meet the expense of~~ sanatorium care, many of the patients became county charges. By 1912, this had become so severe a drain upon county revenues that there was considerable demand for a local sanatorium, to be built with county and state funds. At a meeting of the County Board of Commissioners held June 10, 1913, steps were taken toward the establishment of such a sanatorium in Itasca County.

The board appropriated fifteen thousand dollars to start the building fund, and levied a moderate tax to raise additional money. In making this appropriation, it was understood that the State of Minnesota would furnish ^{an equal} ~~a like~~ amount for

? Same date as what?
purchase of the site and erection of buildings, and thereafter would assume one-half the cost of maintenance.

~~On the same date~~ ^{also} the county board appointed a hospital advisory committee of three members: Dr. Thomas Russell and Dr. Charles M. Storch of Grand Rapids, and Dr. John T. Ring of Nashwauk. But this committee, after careful investigation, advised against establishing a sanitorium in Itasca County. For one thing, the committee could not agree upon a site for such an institution. It was admitted that the only practicable location would be in or on the outskirts of a village located on the main-line railroad, and that, in the opinion of the committee, would constitute a serious menace to the health of the community chosen. As a result of the committee report, the matter was dropped for a time; meanwhile, the fund began to accumulate a bit of interest.

In its issue of August 25, 1915, the Grand Rapids Herald-Review, one of the two leading newspapers of the county, revived the discussion. ~~In~~ [≡] a front-page article, ~~it~~ [≡] called attention to the fact that "there is an appropriation of \$20,000 ear-marked two years ago (1913) for a hospital and this fund is lying idle. A law passed by the legislature in 1915 made it possible for the county commissioners to appropriate \$40,000 to build and maintain a hospital and, if that is not enough, that \$20,000 can be added to the appropriation legally." The article suggested that the hospital be built and turned over to a Catholic sisterhood to run. ~~With this,~~ [≡] interest revived, and the Herald-Review for October 6, 1915, reported that the Grand Rapids Commercial Club, two days before, had appointed a committee to meet with the County Board of Commissioners to discuss the hospital matter. The members of this committee were Henry Hughes, Ralph Stone, A. L. Thwing and J.A. Amberg.

~~The next newspaper mention of the matter was in the July 12, 1916, issue~~ ^{LOW}

It stated
~~of the Herald-Review, an announcement~~ that the Board of County Commissioners had decided to submit the question of a county hospital to the voters in the November election. "There has been considerable agitation for such a hospital from time to time," said the Herald-Review, "and much discussion pro and con on the idea of a county hospital The County Board of Commissioners determined to have the voters decide the question and ask for a vote in November on building the county hospital at a cost not to exceed \$50,000."

The decision of the voters in November was *that a hospital should be built,* ~~in favor of the hospital~~ and on November 14, 1916, the hospital committee and President L. A. Rossman of the commercial club met with the county board at the courthouse. The commercial club group suggested that the County Board of Commissioners appoint an advisory committee of five members to aid the board in hospital affairs. As the proposed institution was to be county owned and conducted, it was suggested that the committee be made up of one appointee from each commissioner district, to serve without pay. The committee would, by visit and correspondence, collect from other hospital organizations information on building and equipment, methods of management, and such other data as might be of value in building and setting up the organization of an Itasca County Hospital.

Advisors

After adjournment for consideration of the proposal, the county board met again on November 18, 1916. Having decided to follow the suggestion made, they appointed the following men to act on this advisory hospital committee:

District 1 - - - - M. J. Baker, Deer River merchant.
District 2 - - - - George O'Brien, Cohasset farmer.
District 3 - - - - Alexander King, Coleraine mine official.
District 4 - - - - Dr. Daniel Costello, Grand Rapids dentist.
District 5 - - - - B. W. Batchelder, Nashwauk.

At the meeting of the county board on December 5, 1916, Dr. H. M. Bracken, secretary of the State Board of Health, discussed hospital matters with the board and its advisory committee.

At the first commissioners' meeting of the new year, on January 2, 1917, three members of the hospital advisory committee, King, Baker, and Batchelder ^{gave} tendered the committee's first report. ^{It} ~~The report~~ stated, in part: "Itasca County Hospital will be the first hospital to be constructed by a county government in the State of Minnesota. Its construction and maintenance have created new legal problems as no provision has been made in the Minnesota statutes for this kind of county work." ^{As} ~~Following the suggestion made in the~~ advised in that report, the county board authorized the committee to draft a bill to be presented in the legislature, authorizing the building of a county hospital, and outlining the method of management.

The Herald-Review of February 14, 1917, states "County Attorney Ralph Stone, assisted by C. C. McCarthy and receiving suggestions from a number of others, has drafted a bill which it is proposed to have introduced at the present session of the legislature, providing for the management and control of the new Itasca County Hospital and for the poor of the county."

"It will be remembered that at the last session of the old Board of County Commissioners, Mr. Stone was instructed to prepare a bill covering points involved in the decision of the voters of the county to build a county hospital. In his work on this bill, Mr. Stone conferred with a great many people and there seemed to be a general feeling that the measure should also include a provision for making the care of the poor of the county a part of the duty of the hospital board, as well as charging them with the responsibility of conducting the hospital. It is felt these two interests are so closely allied that they should be combined under the management of a single body. . . .

"The bill has been prepared to follow quite closely the lines of the act under which the St. Louis County Poor Board operates. The system has been a tremendous success in St. Louis County. It is felt by many that it would be a good

thing to relieve the county commissioners of the duty of caring for the poor. These obligations have consumed a great deal of the time of the commissioners and has caused them a great deal of expense. In fact, some of the commissioners have made the statement that their expenses on poor cases alone have used up the entire expense money allowed them for the year. "

Confident of favorable action by the legislature, the hospital committee proceeded with building plans. The Herald-Review for March 21, 1917, reports^{ed} that F. H. Masse & Co., architects of Rochester, Minn., "have received appointment as architects of the Itasca County Hospital building. "

The Bill

The bill drawn by the committee under authorization of the County Board of Commissioners and introduced into the legislature was passed April 10, 1917. ~~The text of the bill will be found in the appendix of this work.~~ (See appendix for text.)

It created a Board of Poor and Hospital Commissioners and defined its powers and duties. It directed that the board be appointed by the County Board of Commissioners with approval of the district court. No county commissioner was eligible to appointment.

Two members of the new commission were appointed for two years and three for three years and upon expiration of these first terms their successors were to be appointed^{over-lapping} for terms of three years each. A president and a vice-president were to be elected, each to serve one year, and a clerk was to be appointed. The commission was to adopt by-laws and make rules for its own conduct. Members were to receive no compensation and the Board of County Commissioners was to provide suitable offices for the commission.

The function of this new Board of Poor and Hospital Commissioners was to take over all powers and duties relative to the care of the poor previously exer-

do not use italics (underscore) for emphasis. The way the material is presented should carry the emphasis.

cised by the county board. Funds accruing from the labor of needy persons or from the produce of the poor farm were to be turned over to this board and then to the county treasury for the credit of the poor fund. Payments from the poor fund were to be made by voucher signed by the president or vice-president and the clerk of the commission, and quarterly statements were to be rendered to the county auditor. It was definitely directed that the commission was to have complete control of public welfare work and of the county poor fund.

Should a county hospital be provided under state law, complete control and management was to be vested in the commission, which was to fix rates, appoint a superintendent at its pleasure, fix his salary and prescribe his duties and responsibilities. It was to employ and pay assistants, physicians, surgeons and other help as required and was to collect any funds from patients or others and to keep a record of all funds of the hospital to be filed with the county auditor and published with the county's financial statement.

The commission was to appoint a clerk at its pleasure and fix his salary, up to \$125 a month. He was to keep complete records. It could authorize the clerk to grant temporary relief in emergencies, but only to a limited extent. The clerk was to act both for the commission and for the hospital, and other necessary assistants were to be appointed by the commission.

Taxes were to be levied for support of the poor and of the hospital annually, a budget resolution to constitute a levy on taxable property up to five tenths of one mill and to be assessed as corporation taxes are assessed.

It was provided that, should any paragraph of the act be held invalid, other paragraphs were not to be affected and acts inconsistent with it were repealed. Existing laws were to be construed so as to carry out the spirit of the act and to that end such laws were to be made to conform.

(singular the board)
The hospital advisory board ^{was} ~~that had been acting~~ until this time ^{an} ~~was~~ without official authority except as appointees of the county board, and acted as a temporary organization. At a meeting of the County Board of Commissioners held May 16, 1917, the necessary steps to set up a commission under the bill just passed ^(May 2, 1917) were taken. By resolution the following were appointed to serve as the first Poor and Hospital Commission of Itasca County:

District No. 1 - - - - - M. J. Baker, Deer River Merchant.
District No. 2 - - - - - J. M. Stackhouse, Cohasset.
District No. 3 - - - - - Alexander King, Coleraine mine official.
District No. 4 - - - - - D. M. Gunn, Grand Rapids hotel man.
District No. 5 - - - - - R. L. Downing, Peewatin mine official.

what was he?
[There is a copy of the resolution establishing this commission in the early files of the Itasca County Poor and Hospital Commission.] ~~It is dated May 3, 1917.~~ The first, or organization, meeting of the new commission was held on May 23, 1917. Alexander King was elected president and D. M. Gunn vice-president. By resolution it was decreed "that Clarence B. Webster be, and he hereby is, appointed clerk of this Poor and Hospital Commission of Itasca County, Minnesota, to serve until removed by this board." The clerk's salary was set at ^{\$125} ~~one hundred and twenty-five dollars~~ a month; ^{was} he to pay all his own expenses, including those incurred in juvenile court work. ¹ ~~The latter reference is accounted for by the fact that Webster was at the time judge of probate for Itasca County, and juvenile court work was one of his official functions.~~

By Laws

The following by-laws were adopted for the operation of the commission:

Itasca County Poor & Hospital Commission By-Laws.

Article I.

Indent
Sec. 1 - A majority of the members of the Board of Poor and Hospital Commissioners of Itasca County, Minnesota, shall constitute a quorum for the transaction of business at any regular or special meeting of such board, but any number

shall be competent to adjourn such meetings sine die, or to a further time.

Sec. 2 - Regular meetings of the board shall be held monthly on the first Wednesday in each month, at the hour of 2:30 p.m. at their room at the County Court House.

Sec. 3 - Special meetings of the board may be called by the president or any two members of the board at any time or place on one day's notice in writing, to be served either personally or by mail.

Sec. 4 - When a quorum is present at any meeting, the action taken by a majority of the quorum shall be considered the action of the commission.

Sec. 5 - The order of business at meetings of the commission, so far as applicable, shall be as follows:

- (1) Roll call
- (2) Reading of minutes of last meeting
- (3) Reports of committees and clerk
- (4) Unfinished business
- (5) New business
- (6) Audit and allowance of claims

Article II.

Sec. 1 - The officers of this commission shall consist of a president, vice-president, treasurer of hospital funds, and a clerk to be appointed as prescribed in Chapter 187, Session Laws of 1919. President, vice-president, and treasurer shall serve until the first Wednesday in January 1917, and shall thereafter be elected annually on the first Wednesday in January each year. The clerk shall hold office at the pleasure of the Board.

Sec. 2 - The president shall preside at all meetings of the board. He shall sign all orders on the Auditor for the payment of claims against the poor fund of the county, and shall perform such other duties as are incident to his office or as may from time to time be prescribed by this board.

Sec. 3 - The vice-president shall perform the duties of the president in case of his absence or inability to act.

Sec. 4 - The treasurer shall perform such duties as may hereafter be prescribed by this board under the rules and regulations and amendments to this section, which may hereafter be adopted. The County Auditor shall issue his warrants on the poor fund whenever directed to do so by an order from this commission signed by the president and clerk.

Sec. 5 - The clerk of this commission shall perform all the duties which are imposed upon him by the law creating this commission, and shall perform all acts and work which he may be ordered or directed to do by any member of this commission.

Article III.

~~Amending the By-Laws~~

These by-laws may be added to, amended or repealed by a vote of three or more of the members of the board on motion.

The first regular meeting after that for organization was held June 6, 1917, with all members present. The bills allowed at this meeting totaled \$1198.81. Of this amount \$212.05 was for care of tubercular patients who were county charges and \$481.35 for care of charges at the poor farm. The balance represented relief grants

for ^{subsistence} ~~sustenance~~ or medical care.

The next meeting ^{ed was on} of record ~~is that~~ of July 17, 1917. The bills allowed amounted to \$3428.78. Among the items were tubercular patients at the State Tubercular Sanitorium: \$257.40 for May and \$264.10 for June 1917. ~~Another~~ motion ^{was offered} at this meeting ~~was~~ for "consideration of plans and specifications for the county hospital, prepared by F. H. Mosse & Co." These were approved, and recommendation made to the county board to accept them, and "that call for bids on construction according to plans and specifications be issued forthwith."

A Site

It had been ~~a matter of common consent~~ ^{agreed} throughout the county that the county hospital should be located at the county seat. The Commercial Club of Grand Rapids had been much interested in promoting the project, both as a social benefit to the county at large, and to the village as a business asset. There was considerable maneuvering ~~in the matter~~ before the exact site for the hospital was finally selected. Real-estate operators were naturally interested, and options on probable locations were picked up here and there with a view to personal profit. Moreover, the hospital meant callers and visiting relatives and friends of patients, so that farsighted storekeepers thought it would be wise to have the location conveniently adjacent to their stores. Various diplomatic coups ~~in this connection~~ took place before May 1917, while the hospital commission was acting in an unofficial or advisory capacity.

The county board and advisory hospital board had been viewing and pricing possible sites in and near Grand Rapids. Several ~~locations~~ were found, but the prices were high. One site seemed so desirable that some of the hospital board members "had been praying for it." This was a block of the townsite of Grand Rapids, at the time used as a baseball field. An option had been taken, and a high selling

price placed on the tract. This situation had already been discussed at a joint meeting of the county board, its advisory committee and the commercial club hospital committee.

During the discussion at this earlier meeting it had been pointed out that the funds to be used were ~~distinctly~~ restricted to the \$50,000 authorized in the November election. The committee, in its investigation, had learned that the full \$50,000 would be ^{barely} ~~little enough~~ to provide a satisfactory building and equipment. To use any considerable part of this for land ^{buying} ~~cost~~ would seriously affect the size and equipment of the institution.

A member of the county board, Cyrus King (✓ no relation to Alexander King of the hospital advisory committee), reported what was considered an inspiration. Lying on the outskirts of Grand Rapids were the county fair grounds, owned by the county. At one end of these grounds was a small lake and a grove of pine. Here was a location ^{to be had} without cash outlay. The ^{advantages} ~~beneficial effects~~ of the quiet surroundings and of the pine laden air were stressed. With a little work ^{and} moderate expenditure for landscaping, beautiful grounds could be developed. All this pleased the county authorities. ^{To} From the village ^{angle}, however, the proposal was less attractive. The place was quiet, ~~yes~~, but it was also a long ^{way} distance from the downtown district and from the stores whose owners were hoping to benefit from hospital trade. Furthermore, the village would be expected to extend water mains, sewers and sidewalks to the new hospital, and the distance would make that expensive. Residents of Grand Rapids, stirred by ~~the seriousness of~~ these various objections to the proposed site, organized citizens' committees to deal with the problem.

The Herald-Review notes that "on Sunday, February 4, 1917, a group of citizens called a meeting in the commercial club rooms to iron out differences of opinion and to be in a position to offer a concrete proposition to the county board at

site that could be had

The "time" of the event is confusing. Reveal.

their meeting to be held February 6." ^{As a} The result of this meeting ~~was that~~ Grand Rapids business men decided to offer the county board its choice of three different tracts for donation to the county as a hospital site. The tracts offered were Block 52, Block 53, (ball park site), and Block 57. It was hoped to be able to purchase the selected site with funds raised by a village tax, but the group decided to guarantee purchase by subscription in case a tax could not be levied.

Members of the village council appeared at a meeting of the county board on January 11, 1917 to inform the board of the current state of public opinion in Grand Rapids with regard to the hospital site. They reported that at a meeting of the village council held in December a group of citizens had presented a petition favoring purchase by the village, and donation by it to the county, of a hospital site acceptable to the county board. This petition had been accepted and placed on file by the village council. At the January council meeting, however, another group of Grand Rapids citizens had appeared with a counter petition, protesting against the purchase of a site by the village under the plan outlined at the December meeting.

too detailed

Because of this confusion of opinion in Grand Rapids, it was decided to postpone action on all matters relating to the hospital until the February 6 meeting of the county board. Notice was given to the members of the hospital advisory board to meet with the county board on that date.

At the February 6 meeting, the proposal of the Grand Rapids business men was presented by Henry Hughes, and the joint board adjourned to inspect the three sites. "After careful examination and comparison they decided to accept the offer of the ball park site. "

Construction

In the legislative act setting up the poor and hospital commission, no specific authority was given this body to erect the hospital building, so that duty fell

to the county board. The county commissioners called for bids and construction was started almost immediately.

tone down

The hospital commission aided with advice and assisted in supervision of construction. Members of the first Poor and Hospital ^{Commission} ~~board~~ still living in the community feel that one member, Alexander King, deserves a great deal of credit for his efforts during this period. He devoted much of his time to the hospital, at considerable expense to himself. Nor was the sacrifice his alone; his employers, of the Oliver Mining Company, shared generously by giving him free time to ^{devote to} ~~spend in~~ this public undertaking. His knowledge of building construction was probably greater than that of any other member of the two boards interested, and his personal enthusiasm and interest in the project were high.

Construction operations continued through the late summer of 1917 and the winter of 1917-1918. Equipping the hospital was considered one of the duties assigned to the ^{Poor and} Hospital ^{Commission} ~~board~~ by the legislative act, and investigations and preparations were made to fulfill that responsibility. At the regular monthly meeting of the ^{Commission} ~~poor and hospital board~~ held February 8, 1918, the matter of surgical equipment for the new hospital was considered. President King offered a detailed estimate of equipment and furnishings that would be needed for the initial outfitting. This estimate was accepted and D. M. Gunn was appointed to let the contract to the lowest responsible bidder.

At the meeting of March 6, 1917, J. M. Stackhouse was appointed "treasurer of the hospital fund," an office provided for in the by-laws adopted at the organization meeting the previous year. This hospital fund, as distinguished from the building fund, was a fund to meet the costs of maintenance and operation, raised by taxation and from hospital receipts. The treasurer was placed under surety bond of \$5,000, and the First National Bank of Grand Rapids was designated as deposi-

tery for the fund under a depository bond of like amount.

At a meeting of the board held March 20, 1918, the Masonic Lodge of Grand Rapids requested permission to furnish one room of the hospital. The Grand Rapids Woman's Club made a ^{similar} ~~like~~ request. These requests were honored and, with the approval of the board, the Masonic Lodge selected "the first room on the north side from the sun-parlor."

On March 20, Anna Manthey was appointed superintendent and head nurse for the hospital. Her salary was set at \$85 per month and she was instructed to take charge of the hospital on or about the first of May.

Operation

Hospital matters progressed smoothly under the ^{Commission} ~~new board~~. At the September meeting the blue prints on landscaping the hospital grounds, prepared by Coe, Converse and Edwards Company were approved, grading ordered and the tree and shrub planting job was let to ^{this} ~~the above~~ company at \$434.65.

During the October, 1917, meeting, the salary of Superintendent Manthey was increased to \$100 per month "effective from and after November 1, 1918." A tax was levied at the October meeting to raise \$45,000 for the poor fund and \$15,000 for the hospital.

^{During} In the first years of the commission, ^S ~~its~~ duties included ~~the~~ hospital management, maintenance and operation, and the handling of the poor fund. At this time the poor fund was charged with the costs of operating the poor farm, and with grants of assistance to needy residents of the county.

Provision for the poor farm had been made by a resolution of the county board adopted July 25, 1896. The resolution provided for ~~the~~ purchase of the site for a "county poor farm". During the years 1901 to 1909, there was considerable interest in the ^{promise of an ore discovery on the farm.} ~~iron ore~~ possibilities of the farm. The place was thoroughly explored and

prospected, and options to purchase were taken and extended from time to time. The last option was permitted to expire without renewal in August 1910, as ^{its} the holders ~~of the option~~ did not find ore in such quantity and quality as to justify taking up the option. Operation as a poor farm was continued and was made one of the functions of the Poor and Hospital Commission when that body was organized.

From a superficial examination of the minutes of the commission, it would appear that the hospital and poor farm ^{at first} occupied almost all of the time and effort of the members. As a matter of fact, though, the early members say that these duties were actually the easiest of all, and made the least demand upon their time. Their ^Chief problem was the granting of direct relief. Dissatisfaction with earlier methods of handling relief was one of the reasons for setting up the commission, and ^{it} they were expected to correct the mistakes of ^{its} their predecessors.

The commission had no special investigators to check requests for aid. Each member was his own investigator for the county commissioner's district from which he was appointed. He investigated and reported his findings and recommendations to the commission, ^{and} ~~at its next meeting.~~ Relief was allowed in the same manner as were other poor fund bills. The board depended upon each member for the proper handling of his own particular district, although problem cases were often brought up for discussion at regular meetings, and solutions were sometimes suggested by the commission. Each member carried an order book and was authorized to give aid on his own responsibility in emergency cases.

An interesting item appears in the minutes of the poor and hospital commission for March 6, 1918. Temporary relief was asked for one Jacob Muller, "and after discussion it appeared that the said Jacob Muller was an inmate of the Dawson Hospital, a local nursing home, and had come from Fillmore county, Village of Chatfield, in August 1917, and ~~the board not being satisfied that the said Jacob Muller is~~

J
a resident of Itasca County, upon motion by Gunn, *Seconded* by Stackhouse, the clerk was directed to investigate the case and was authorized either to transport the said Jacob Muller to Chatfield, Fillmore County, Minnesota, or the Itasca County poor farm." This was the first of the many "residence" cases that ^{*came*} ~~were destined in ensuing years~~ *to come before the commission in the following years.*

Epidemic

Early 1919 brought new problems to the commission as a result of the influenza epidemic of the previous year. It had not been possible for the hospital to meet all the demands made upon it at that time, and ~~additional~~ temporary hospitals and nursing centers were set up in various places throughout the county. After the epidemic subsided, bills for the ^{*cost*} ~~maintenance~~ of these emergency institutions began to pour in to the commission. The bills were presented on the plea that the care had been rendered as a public service and the cost should therefore be paid from public funds, either the hospital fund or the poor fund. The commission protested, realizing that it could not carry this extraordinary expense in addition to the ^{*normal*} ~~regular~~ demands upon its funds. The members felt that the costs should be a charge against the county revenue fund, as provided by law for assistance in suppressing an epidemic. Some of the bills had been presented to the county board, and some to the Poor and Hospital Commission. ~~Such~~ ^{*These*} bills received by the county board were immediately referred by it to the commission.

The commission's ~~minutes~~ ^{*minutes*} for January 10, 1919, state: "The claims of various municipalities and persons in connection with the suppression of the influenza epidemic, some having been referred to the board of poor and hospital commissioners by the Board of County Commissioners and others having been presented directly, were next considered and it appeared to the satisfaction of the board that ^{*these*} ~~that~~ these claims are all for expenses incurred in the matter of control and prevention of contagious diseases and are charges against the various municipalities and the county revenue

fund and not the poor fund and these claims were examined in detail for the purpose of making proper recommendations to the Board of County Commissioners. Payment was recommended for such as were in the proper form of verified claims."

The county board of commissioners, in turn, referred the matter to County Attorney Ralph A. Stone, to determine the legal authority, responsibility and procedure. He reported that the law provided for payment from the revenue fund to aid in the "control and prevention of contagious diseases", but that in this case the county was authorized to pay one-half on presentation of verified claims, and that the other half was a legal charge against a local municipality or community. If the charge should be accepted by the Board of Poor and Hospital Commissioners as a correct expense for the needy, the entire amounts could be paid from the poor fund. Some claims were from individuals located in unorganized territory, others from municipalities that were financially unable to take care of the expense. The matter was finally settled in a joint conference of the ~~Board of Poor and Hospital Commissioners~~ and the county board of commissioners. The county board made a special allotment from the revenue fund to the poor fund, and the poor and hospital commission, after careful investigation, paid such of the bills as they were able to approve.

Even after the "flu" epidemic the capacity of the hospital was often strained, and on April 4, 1919, the poor and hospital commission, in a body, inspected the hospital to determine its needs, and authorized additional beds "for patients and employees", and instructed the superintendent to obtain them.

By 1919 the efforts of the commission to reduce relief costs began to show results. The October 1919 levy for the following year was \$30,000 for the poor fund and \$7,500 for the hospital. On ~~date of~~ December 3, 1919, the salary of the superintendent of the hospital was raised to \$125 per month "from and after December 1, 1919."

In January 1920, the poor and hospital commission lost a very active and able member when Alexander King, third district, retired. His greatest interest was in the hospital, and it was now a going concern. The work of the commission, as handled by King, took a great deal of time and he felt that the generosity of his employers should now be repaid by a greater devotion of his time to company work. His place was taken by Peter Fahey of Coleraine, also an official of the Oliver Mining Company. The minutes of January 6, 1920, record the ^{adoption} ~~passing~~ of a resolution extending a vote of thanks to King for his efforts and his attention to duty as a member of the commission.

too vague
[Affairs moved along smoothly at the hospital in these early years and the relief situation seemed to be coming well under control. Then the effects of the national depression of the early twenties reached Itasca County. *according to* ~~To quote from~~ the February 15, 1922, issue of the Grand Rapids Herald-Review: "For the first time since there has been a Poor and Hospital Commission to administer the poor relief in Itasca County, there have come requests for aid where there is an able-bodied man at the head of the family. At the meeting of the Poor and Hospital Commission held Tuesday there were a number of requests for assistance, instances where the wage earner of the family was not able to provide enough food and clothing to keep the family from suffering even though able and willing to work. The industrial depression that has affected all parts of the country, but has been little felt here, is named as the cause.

"In commenting on this unusual situation M. J. Baker of Deer River, member of the commission, stated that a number of calls, a majority in fact, were for needy in the different mining towns on the range. Work has been scarce there for many months, and cases of actual suffering have been found. There have been several requests for aid, however, that have come from the remoter sections of the county,

because the settlers there are unable to sell their timber products, and when the infrequent logging camps or road graveling crews do not provide work, the family is obliged to ask aid. Though these cases are few in number, they are present for the first time in the history of the Poor and Hospital Commission."

At the regular monthly meeting of the ~~poor and hospital~~ commission held (June 12, 1922), the board was handed the resignation of Anna Manthey as superintendent of the hospital, ~~the resignation to be~~ effective August 15, 1922. Her services had been highly satisfactory, but as she wished to retire, her resignation was accepted with regret. The commission passed a resolution expressing its thanks and appreciation to Miss Manthey for her services. At this same meeting, Lottie Young was appointed to fill the position of Superintendent of Itasca County Hospital.

During the first six years of the commission's existence, its operations had been pleasantly free of major difficulties. The early months of 1923 brought a change in this respect.

For a number of years the county had appointed and paid a county physician whose duty it was to ^{provide for} ~~take care of~~ the medical needs of those ~~in the county~~ ^{a private physician} unable to pay for professional care. This physician was selected from the group practicing in Grand Rapids, the county seat. At times, assistant county physicians were ^{appointed for} ~~designated~~ in other sections of the county. As this county physician was paid from the poor fund, his selection became a duty of the commission. ~~Appointment was usually made at the beginning of the calendar year.~~

At the January meeting in ¹⁹²³ ~~1923~~, the commission received a number of applications for appointment as county physician. After consideration, Dr. Thomas Russell, of Grand Rapids, was appointed. ^{re =} ~~Persons who were members of the commission at the time state that he had acted as county physician for several years and, as satisfactory service had been given, they saw no reason to change.~~

However, one applicant, Dr. M. M. Hursh, claimed right to the appointment under the soldiers' preference law, ^{as he was} ~~he being~~ a veteran. Through another person he made a formal claim against the commission in February. The members postponed action till the next meeting, awaiting advice of the county attorney. County Attorney Stone appeared at the March meeting and ^{related} ~~gave it as his opinion~~ that the poor and hospital commission was required by law to investigate the qualifications and fitness of any such soldier preference applicant, and if found ^{it him properly} ~~qualified and fit~~, to appoint him to the position desired. Action was again postponed to await a ruling by the Attorney General of Minnesota. At a meeting of the commission held May 9, the ^{was} ~~application~~ finally laid on the table.

The county doctor's care was also professional!

Take care of

avoid "hanging" the case!

first name

*see general
outline
report.*

Discontent

Another difficulty had to do with the conduct and management of the county hospital. Over the county there were rumblings of discontent with the hospital management. It was a many-sided situation. Some county commissioners and county officials felt that services of a county hospital should be free to them and even to members of their families. Other county and hospital employees ^{generally} ~~also~~ approved ~~of~~ this idea. Meanwhile, it was the practice of the commission to collect standard hospitalization rates from all who were able to pay. The determination of this ability, they felt, was a matter that fell within their official province. Naturally there was frequent dissatisfaction with decisions of the commission, and the situation was ever complicated by rumors and hearsay, and by the anxious efforts of well-meaning but uninformed groups.

All this of course was fraught with the possibilities of political repercussion. Mindful of this, and weary of the pressure to which they were constantly being subjected, the Board of County Commissioners at a meeting of February 20, 1923, passed a resolution calling a joint meeting of the county board and the poor and hospital commissioners "for the purpose of discussing the management of the county hospital" ⁴ ~~the joint~~ meeting to be held February 28.

^{Commission} At this point, the longheadedness of those early members of the poor and hospital ³ manifested itself. They recognized the wisdom of trying to iron out the creases of dissatisfaction, but it had to be done in a proper way. If an investigation of the hospital management needed to be made, they, and not the county board, were the proper body to take official cognizance of that need. In order to preserve what they regarded as the amenities of the case, the poor and hospital commission adopted this resolution, ~~as~~ offered by their member, George B. Aiton:

indent "BE IT RESOLVED: That the Board of Poor and Hospital Commissioners immediately convene in special session for the purpose of making an investigation

Substant of the management of the county hospital and that the members of the Board of County Commissioners be invited to sit in at said meeting. That interested witnesses be brought before the board and duly sworn to testify and give evidence regarding the management of the county hospital and that said hearing commence forthwith and be adjourned from time to time as necessary and until concluded."

*Y
delete
all
collaboration* At the time, the issue thus raised must have seemed to many to be an unimportant one, or even petty. Yet it is by the constant exercise of such alertness as this that public agencies are able to protect their rightful prerogatives. But for this vigilant attitude of its early members, the Itasca County Poor and Hospital Commission might not have been able to preserve its integrity during those difficult years.

This resolution having been duly adopted, 24
Twenty-four witnesses were then questioned, including seven doctors. *on*
The hearing was thereupon adjourned until March 8. At this later meeting the depositions of three hospital patients were read, together with reports from University Hospital staff members. This completing the witness list, Aiton moved that the joint meeting be adjourned and that the Poor and Hospital Commission "convene at 2 p.m. to discuss and consider the investigation of the county hospital and dispose of regular business."

The investigation was discussed with the hospital superintendent and the commission voted to defer any remedial action until the next meeting. The details of the investigation are not historically important and all issues were settled to the satisfaction of those concerned. The significant angle is the establishment of the independent authority of the commission to deal with hospital affairs.

At a regular meeting held March 8, 1924, Clarence B. Webster, who had been clerk to the poor and hospital commission since its *inception*, ~~first organization~~ presented his resignation, as of April 1, 1924. His requested release was granted, and a vote of thanks extended him for his long service. Viola N. Burke was appointed to succeed Webster, her term beginning April 1, 1924. She served a comparatively short time,

Gathering Cloud
resigning at the meeting of August 8, 1924, effective September 1. Fannie Young was then appointed clerk and served for almost five years.

Lottie Young resigned as hospital superintendent April 8, 1924, effective June 1, and Karen Knutsen *succeeded her* ~~was appointed to the position~~ on June 8, 1924.

Confusion

revised
Proper definition of the broad authority of the Poor and Hospital Commission, with the preservation, at the same time, of its ability to resist external pressures, kept its members constantly on the alert throughout the first nineteen years of the commission's activities. The increased social consciousness of the *State* Minnesota Legislature, paradoxically enough, operated *to* the disadvantage of the Itasca County Poor and Hospital Commission. Something like *80* ~~eighty~~ out of *87* ~~eighty-seven~~ counties in the state had no such organizations. Laws looking to the improvement of social conditions were drawn with the eighty-odd counties in mind. Legal provision was made for child welfare boards, nursing boards, and county nurses, for juvenile work, for mothers' pensions, and for aid to the blind, feeble-minded, deaf and dumb, for University Hospital care, and for many other equally admirable aims and agencies. The Itasca County Poor and Hospital Commission was in complete sympathy with the broad objectives of practically all ~~of~~ this legislation. However, the commission had been given "full, complete and exclusive charge of and control of the poor of ~~the~~ *(Itasca)* county, and the handling, use and paying out and expending of all moneys for poor purposes in such county including the poor fund thereof." Obviously, then, the effect of this new legislation was to set up machinery which could not be harmoniously geared *in* with the operations of the Poor and Hospital Commission, and frequent clashes resulted.

One of the earliest of these agencies was the County Child Welfare Board, created by the legislature in 1917. In the beginning, there was considerable

Gathering Clouds

co-operation between this group and the poor and hospital commission. The child welfare board, under the State Board of Control, was directed to care for defective, delinquent, dependent and illegitimate children and adult defectives. It worked with the judge of probate, and in 1919, Alexander King, president of the commission, was a member of this welfare board, and the judge of probate was clerk of the commission. By the end of 1926, however, no member of the commission was on the child welfare board, and the judge of probate was no longer directly connected with the commission. In fact, there was much friction between the judge of probate and the commission, on account of mothers' pensions granted by the judge, to be paid from county poor funds.

It is necessary to mention but a few instances to illustrate the various lines along which conflict developed. In 1924, the Board of County Commissioners and the Poor and Hospital Commission differed. Bills from three different sanitoriums, for tubercular patients committed from Itasca County, were referred to the Poor and Hospital Commission. Patients were sent to the ~~se~~ ^{ing} sanitoriums by the County Board of Commissioners without consultation ^{in such cases,} with the Poor and Hospital Commission. The commission ^{Eventually} returned the bills to the county board unpaid. County Attorney Stone was instructed by the county board to take the matter up with the commission and get the tangle straightened out.

In 1925, the Poor and Hospital Commission applied to the county board for an attorney to act for them in cases ^{as to which they desired to appeal} ~~where appeal had been taken~~ from decisions of the probate court. In 1924, 1925, and 1926, doctors' bills for treatment authorized without Poor and Hospital Commission consultation were returned unpaid to the county board.

The law of 1917 had placed the responsibility for the care of defective, delinquent, dependent and illegitimate children and for the care of the adult defectives within the county, upon the child welfare board, an agent of the State Board of

Gathering Clouds

Control. ~~The~~ State institutions were also under the supervision of this State Board of Control, while the nursing advisory committee, under whose orders the county nurses worked, was set up under the county commissioners. There was no provision for regular aid to the blind, but some pensions were being paid to blind persons. The care of the blind and their education was under the State Board of Control, operating through ~~the~~ county welfare boards. The granting of Mothers' pensions was placed in the hands of the juvenile court judge, payments to be made from the county poor fund. University Hospital care was granted under still another special law, and there was also a special law providing sanatorium care for the tubercular.

This multiplicity of agencies/ and the steadily increasing demands for welfare services led to frequent conflicts of authority, with recurrent disputes over the eligibility of applicants and the order in which their needs were to be met. The advisability of employing a well trained and experienced welfare worker to operate under the authority of the Poor and Hospital Commission soon became apparent. The increasing seriousness of the problems to be met and the conflicts of authority and responsibility between ~~the~~ various boards and commissions, created a needless duplication of work, and a lack of efficiency or economy in administration, which it was believed the employment of the trained worker would help to cure.

New demands for relief taxed these welfare agencies in 1925.
The year 1925 seems to have been a peak year. The Grand Rapids

Herald-Review of January 14 of that year states that the child welfare board will

co-operate with the judge of probate to limit mothers' pension expenditures. The

same issue mentions *the reappointment of* Elizabeth Hansen ~~as~~ *as* ~~reappointed~~ county nurse, and salary

~~fixed~~. Issues of the same paper/ from February to July ~~inclusive~~, mention a number of clinics held under auspices of the child welfare board; *included are a* mental clinic, *a* prenatal clinic, *a* lung clinic, *and one for* crippled children clinic, and so on.

Gathering Clouds.

In a February issue of the same paper an editorial states: "Of late there has been considerable buzzing around about county affairs, namely the Mothers' Pension and the poor fund. The financial statement for 1924 shows that Mothers' Pensions cost the county in excess of \$22,000, and other forms of relief for the needy cost much more than that figure.

"While the laws concerning charity are to be charitably administered, yet the county funds must be expended with care. We believe that this is being done at the present time, that an effort is being made to overcome errors of the past.

"There is one thing that the public probably does not understand. That is that relatives are responsible for the assistance of their kinsmen who need aid. Aid should not be given to those who have parents, children, ~~brothers~~ *brothers* or sisters who may support them. By many it is considered a disgrace to have any of their family a public charge. Many nationalities even take care of their own unfortunate members. In this section many have apparently felt that to get county aid for a relative, whom they were legally responsible to support, was not only all right, but an exercise of good business abilities....

"But times will change. They are changing now. Though there is still room for improvement, Itasca County's affairs are in better condition and in better hands today than ever before."

At their regular meeting of September 8, 1925, the commission ~~members~~ discussed a proposed joint meeting with the child welfare board to ~~talk over the~~ *discuss* ~~question of~~ *ment of* employing an experienced social worker and to study the problem of mothers' pensions. This joint meeting was held October 7, and the ~~idea~~ *proposal to hire an investigator met with* general approval, but action was left to ~~be taken at~~ the discretion of the ~~poor and hospital~~ *poor and hospital* commission.

Because they doubted the wisdom of starting a trained social worker in this area in midwinter, the board decided to postpone the actual hiring of such a

Gathering Clouds

a worker until spring. Meanwhile, because of the anticipated difficulty of finding a satisfactory applicant willing to work in this type of locality, ~~an~~ extensive correspondence was carried on throughout the winter and early spring, and in April 1926, Lydia Bucknell, a competent social investigator from Philadelphia, was employed.

Miss Bucknell was retained as investigator until expiration of her contract May 15, 1927. No new contract was drawn, as the "county had decided to dispense with a welfare worker". Economy was cited as the reason, but some members of the commission of that time say that they felt this worker was not sufficiently familiar with the type of situation here presented - that she proved too generous and aimed at a living standard ~~not practicable~~ *that could not be maintained* of maintenance in a rural county.

Retirements

In January 1925, the commission lost the last of its ^{original} "first" members when M. J. Baker of Deer River retired. He ^{had been} ~~was~~ one of the original appointees for the ^{and had been} two year term, ~~was~~ reappointed in 1919 and again in 1922. Of the other original members, Downing ^{had} died in 1918, King ^{had} retired in 1920, Stackhouse ^{had} resigned and left the county in 1922, and Gunn retired in 1923.

Baker has what is probably the largest mercantile business in the county, with headquarters in Deer River and ^{elsewhere} other branches in the county. King, who ^{the} ~~was~~ ^{first} ~~commission president~~ ^{has this to say about his associate:} "Before the time of the poor and hospital commission, Baker, because of the size of his business and territory, probably handled through his store more relief orders than any other store in the county, and at a considerable profit. When he accepted appointment to the commission, and throughout the eight years of his membership, he refused, on principle, to have any relief orders pass through his establishment." Baker declined reappointment in 1925 and was tendered a vote of appreciation by the commission for his service ~~as a member~~.

had all this took place before 1925

A Challenge

The commission always had a number of applicants for appointment as manager of the poor farm or overseer of the poor, and 1926 was no exception. At the yearly meeting, January 8, 1926, after considering all applicants, the Poor and Hospital Commission appointed H. E. Hagen to the position.

At their meeting held February 8, 1926, the county sheriff served the commission with a writ of mandamus in behalf of one William Benzing, who, as one of the applicants, claimed right of appointment to the position under the soldiers' preference laws. No action was taken at the meeting, but at a special ^{session} meeting called later in February to ~~consider the mandamus matter, and~~ on the advice of the county attorney that ^{they were} ~~it was~~ required that ^{to} ~~they~~ investigate the qualifications of the ~~above~~ applicant, this resolution was adopted: -

Whereas, this board has been ordered by the district court to make an examination as to the fitness of William Benzing to hold the office of overseer of the poor, now therefore be it resolved that a committee of the whole board be and hereby is appointed to make such an examination and to report at the next meeting.

The next meeting was held March 8 and a resolution was presented to appoint Benzing to the position. On being put to a vote the resolution did not carry. The meeting adjourned temporarily and reconvened at 7 p.m., same date. On presentation the resolution again failed to carry, and the following substitute resolution was offered: -

WHEREAS this board did heretofore appoint a committee of the whole to make examination into the qualifications of one William Benzing for office of overseer of the poor, and

WHEREAS such committee has made its examination and report and the same has been fully heard and the said matter having been fully heard, discussed and determined

NOW THEREFORE BE IT RESOLVED that this board in the exercise of its discretion has determined and does hereby determine that said William Benzing cannot perform the duties of overseer of the poor in reasonably efficient manner and that the appointment heretofore of H. E. Hagen be and the same hereby is in all things adopted, approved, ratified and confirmed.

Gathering Clouds

This resolution was adopted. The question was not finally settled until fall. On October 8 the commission was informed that the Benzing action had been dismissed and the clerk was instructed to pay to Hagen ^{the which had been} salary held up pending settlement of the matter.

Expansion

Looking toward hospital expansion and improvement, the poor and hospital commission in the spring of 1926 recommended to the County Board of Commissioners that the county purchase some adjoining property for future use. "The recommended area includes eleven lots across the river from the hospital. The plot has one house on it, and the poor and hospital commission propose to use the same for a nurses home." The price asked was \$5,000 for the eleven lots and house. At a county board meeting reported in the Grand Rapids Herald-Review May 19, 1926, the county board decided not to recommend purchase of the property.

Still hopeful of relieving overcrowded conditions at
~~By 1926, the capacity of the hospital was so limited that the commission next~~
considered the building of an addition. Architects' plans were examined at a meeting on August 9, but action was postponed because of the absence of some board members. At a special meeting August 24, the ~~addition~~ ^{again} matter was taken up and the clerk was authorized to advertise for bids.

On consulting the county attorney, the clerk was advised that the authority to erect a building or addition resided in the Board of County Commissioners, and further, that the matter of providing the money for such building must be ^{submitted} ~~put up~~ to the voters.) *The proposal was so submitted and approved at*
WON ~~The voters decided favorably in the November election, and the addition~~
was built by the county board in full co-operation with the commission. *1926*

Karen Knutsen resigned as superintendent of the county hospital as of August 15, 1926, and the commission selected Cecelia Campbell to succeed her.

Minor Troubles

The years 1927 to 1929, while they produced no major ~~difficulties~~ incidents in the operations of the Poor and Hospital Commission, were checkered with persistent difficulties of a lesser nature. There was a constantly growing demand for relief, and a consequent steady increase in tax levies for the poor fund. And rising tax rates usually breed discontent.

Hospital finances were complicated by the growing total of unpaid bills carried on the books. From time to time, various collection agencies were employed, and some headway was made. Activities of the collectors, however, added volume to the undercurrent of public criticism. Of several other handicaps with which the hospital had to contend, two were responsible for most of the trouble. First, there were frequent changes in the superintendency. Again, there is much evidence that professional jealousy existed among the doctors treating or visiting patients at the hospital. The feeling between two of the doctors was particularly acrimonious, reaching the proportions of a feud. Each had his partisans, both within and outside medical circles. Such quarrels made for added confusion at the hospital, often involving members of the staff. Superintendents, for example, were accused of favoring some doctors over others, and the general situation was not one to encourage long tenure in the superintendency.

At times, other agencies assigned patients to the hospital as county cases without consulting the commission, despite the fact that hospital bills of county patients were expected to be paid from the poor fund. The commission had no investigator, and the multiplying calls for relief inevitably placed an undue burden on the members of the unpaid board. Commissioners were not reimbursed even for expenses actually paid out of their own pockets. ~~XXXXXXXXXX~~ Edmond Persons, of the fourth district, after serving a single year, resigned in January 1928 on the plea that he simply could not afford the drain on his time and purse.

June 14, 1929, Hospital Superintendent Campbell was "summarily dismissed on 30 days notice." She was succeeded by the present superintendent, Mabel Korsell. At the

again
the
focus
is
wrong

Gathering Clouds

Commissioner D.M.
the same time the clerk resigned and ~~Gunn, member of the board,~~ acted as clerk for a period of more than two years *thereafter.*

The minutes and records of the commission do not show the details of discussions, recording only motions and resolutions made, lost or carried, but the newspaper files of the period give a fairly clear picture. In an editorial, the Herald-Review, January 11, 1928, states: "In 1927 the county poor fund was \$64,000. Twenty thousand dollars of this was used for relief of poor people. There has been considerable criticism of the ^{the} management of the poor fund and of the Poor and Hospital Commission. While we appreciate the difficulties of the commission some suggestions for improvement might be: (1) Make sure applicant is a resident. (2) See if relatives can help applicant. (3) Make poor farm more nearly self-supporting. (4) More general cooperation with and understanding of the Poor and Hospital Commission."

Another editorial from the Herald-Review August 21, 1929, says: "One group of public officials has our sympathy. We refer to the members of the Poor and Hospital Commission. They serve without pay. They spend their time listening to sad tales and giving what relief they can. The thing that has doubtless given them much to worry about is the hospital. That very worthy institution has always been a source of contention among groups which should work together in complete harmony. If it is not one thing it is something else."

"Everyone concerned with the hospital in any way owes an obligation to the public and the taxpayers of the county. That obligation is one to work in complete harmony for the welfare of the sick and the afflicted. The management of this useful institution should be a delightful service, not a burden, to the taxpayers and their conscientious servants."

An editorial in the same paper, issue of February 26, 1930, comments on the "much improved handling of financial affairs of the hospital."

Gathermy Clouds

An effort was made in 1929 to obtain a ruling of the commission allowing chiropractors to practice at the Itasca County Hospital. This action was opposed by the American Medical Association, the American College of Surgeons, the Minnesota State Medical Association and the Minnesota State Hospital Association. Permission was denied by the commission.

The week before, ^{on} February 19th, the Herald-Review reported the organization of the commission for the year. It listed the commission's duties:

1. Look after the management, conduct and care of the county hospital and the outside care of the county's sick.
2. Has poor farm under its care.
3. County tubercular patients at Lake Julia Sanitorium.
4. Make collections from patients sent to University Hospital.
5. Oversee payments made for feeble minded, epileptics and deaf, dumb and blind.
6. Burial of indigents.
7. Regulate dispensing of relief to those in temporary need.

where was this?

Each of these duties involved complications. ^{Both} Hospital matters and outside care of the sick suffered from ^{dissension among the} ~~differences between~~ members of the medical profession practicing in the county. On February 8, 1930, the commission passed the following resolution:

"RESOLVED that the County Physician be required to perform all surgical operations for and furnish all medical attention to county dependents, but that any doctor in the county having a patient who may become a county charge, may, if he choose, continue to treat such patient or perform any necessary operation without charge and be it further

"RESOLVED that no bills for treatment at the University Hospital will be allowed by the poor and hospital commission unless the applicant has been passed on by the County Physician in the County Hospital at Grand Rapids."

At the meeting of April 8, 1930, the minutes relate that "communications were read and placed on file. The letter or bill from Dr. Hursh in regard to a would-be county charge cared for him during February, 1930, was left for further investigation."

Pressure

Gathermy Clouds

In regard to the poor farm, there was increasing pressure from the State Board of Control for improvements to the county home buildings. The commission, however, did not feel able at that time to assume this additional financial burden.

The care of county tubercular patients at the sanatorium was a large annual charge against the poor fund, yet the commission did not always have the opportunity to ^{or disallow} authorize commitments to the sanatorium. In fact, some members of that time say they often had no knowledge of a commitment until the bills began to come in. The same was sometimes true in respect to patients sent to the University Hospital at the expense of the county poor fund.

Although it seems that other agencies than the commission exercised the right to send needy patients from the county to the University Hospital, yet the duty of collecting from those able to pay was ^{always} considered to be that of the commission.

State laws providing for the care of ^{the} feeble-minded, epileptics, ^{the} deaf, dumb and blind, and other unfortunates had been passed and put into effect. To fit the situation then existing in most Minnesota counties, the authority and responsibility for all this was placed in the County Board of Commissioners, county child welfare board, or probate judge. At the same time, costs incurred in providing these welfare services were expected to be paid out of the county poor fund, and in Itasca County the poor and hospital commission had been given, by law, the full, complete and exclusive control of that fund.

Burial expenses of county indigents also were paid from the poor fund, yet others assumed the right to order such county burials without authorization by the commission. ~~But~~ ^{though,} It was nearly always the commission that had to stand the brunt of public criticism whenever county burial orders were unjustifiably issued.

Regulating the dispensation of direct relief to "those in temporary need" was a ^{Source of endless trouble} ~~never-ending "headache."~~ Commission members, serving as they did without

Gathermy Cloud

pay, could not afford personally to investigate each application. An article in the Herald-Review of June 25, 1930 / stated / in part: "County board authorized the county auditor to communicate with township officers to ascertain condition of families now receiving aid". The article pointed out that the poor and hospital commission did not always have access to necessary facts, and said many instances had been cited where aid was not justified.

Another heavy county relief item was ~~the~~ mothers' allowances. Until 1931 these allowances ^{was only indirectly} ~~had not been~~ a charge on the poor fund, ~~except indirectly~~. The allowances were made under order of the judge of probate. ~~The~~ ^{Cases} were investigated by the judge himself or by the county child welfare board. The total amount paid out by the county for these allowances had been increasing each year. The allowances, paid from the revenue fund of the county, were largely responsible for a growing deficit in that fund. Some thought the allowances should be paid from the poor fund; the commission naturally refused to accede to that unless it be given full control of the granting of the allowances.

Clarification

Increasing pressure by taxpayers on the county board finally brought about a full disclosure of the confused state of authority and responsibility in these various matters, so that by the end of 1930 everybody was ready for an attempt to resolve the difficulties.

On January 8, 1931, ^{was held by} ~~there was held~~ a joint meeting of the county board, poor and hospital commission, judge of probate, county auditor, county attorney and various interested citizens. Foremost among the problems brought up was the matter of mothers' allowances. It was reported that approximately \$35,000 had been withdrawn from county funds in 1930 to pay these allowances, and that there was a heavy deficit in the revenue fund because of the allowances paid out during 1928, 1929, ^{and} 1930.

Gathermy Clouds

After examining the many conflicts of authority and responsibility arising out of the state laws passed since 1917, the county board decided the proper solution was to have all kinds and types of relief dispensed by the poor and hospital commission. This met with the general approval of those present, and County Attorney W. B. Taylor undertook to promote new legislation amending the 1917 law to provide for the concentration of relief in Itasca County in the hands of the poor and hospital commission. It was left to the commission to decide whether or not to employ a paid investigator.

A bill carrying these provisions was introduced and approved by the state legislature March 14, 1931. In addition to placing full control of county relief machinery in the hands of the poor and hospital commission, this measure provided for reimbursement out of the county poor fund of necessary expenses incurred by members of the commission. The full text of the 1931 bill is given in the appendix.

The purpose of this new legislation was to ^{cure working defects of} plug the gaps the 1917 law ^{Left} had occasioned in Itasca County and to enable the poor and hospital commission to perform with efficiency and justice the task assigned to it by the public and by the county board. The commission's experience of fourteen years had revealed many defects in the old instrument and the new one ^{was} designed to remedy these faults. Enactment of the 1931 law placed heavier and more clearly defined duties on the board, while experience had already demonstrated the need for a full time investigator.

Critics, so far as appears, had never questioned the honesty or sincerity of the commission members in the granting of aid, but they were frequently critical of the methods employed. A request for relief was customarily investigated by the commissioner of the district in which the applicant resided; if the petitioner was found deserving of assistance, he was then placed on the relief list of that district. From then on, he received his check automatically each month, in an amount based on the original investigation, and account was seldom taken of any subsequent change of status. In the absence of a system of periodic re-check, minor scandals were frequently stirred up through the discovery that clients had been retained on relief lists after the need for assistance had disappeared.

Investigator Employed

For these reasons the commission decided to hire a paid investigator, and at the April 8, 1931 meeting, they considered the applications of R. H. Milne and Albert K. Seckinger for this position. Seckinger, having had some previous experience, was hired at \$100 per month, with a travel allowance of eight cents a mile, and meals while out of town. The commission now entered upon a new phase of its existence.

Seckinger, from 1922 to 1930, had been an official representative of the Disabled American Veterans. In 1930 he was service officer for the American Legion. It was doubtless with great sighs of relief that the commission members

+ in social work
an unimproved concept

turned their order books and case lists over to him for proper attention. All subsequent requests for aid were placed in his hands.

Although he had had no previous professional training as a welfare worker, Seckinger's experience with service organizations had given him some comprehension of the principles underlying that type of work. It is said of him, moreover, that he already possessed a genuine understanding of broad social and economic problems, allied with a keen sense of justice. A natural alertness to new trends, abetted by faithful attendance ^{at} welfare conferences, helped him to overcome the handicap of limited academic training. An able organizer, he enlisted the cooperation of allied organizations, while his readiness to accept full personal responsibility for the acts of subordinates earned him the undivided loyalty of the welfare staff. Last but not least of his qualifications for the job was the ability to resist outside pressures firmly and at the same time diplomatically. This appraisal, first made by an early associate of his in Itasca County welfare work, represents an opinion which would be quite generally echoed in welfare circles in Minnesota today.

During the commission meeting at which Seckinger was employed, the minutes relate that "Judge McQuat (judge of probate) was present and mothers' allowances were discussed." At a meeting held on July 10, 1931, a resolution was passed providing that "changes ~~made~~ in mothers' allowances be made from investigator's recommendations." The clerk of the commission was absent from the meetings of May and June 1931~~1~~ on account of illness, and the minutes were signed by Seckinger as clerk. Minutes of July, August, September and October ⁸ ~~1931~~ were signed by Seckinger as acting clerk.

The commission, at its June 1931 meeting, raised Seckinger's salary to \$110 per month, and in July he was placed under \$1,000 bond. In late July or early ~~in~~ August the investigator was given an "office assistant," and arrangements were

were made that he should have the use of "part of Mort Taylor's office." Before this time he had filed his reports at the hospital.

An article appearing in the Grand Rapids Herald-Review, issue of August 12, 1931, states in part: "Work of investigation by A. K. Seckinger for the Poor and Hospital Commission shows some interesting things. Eighteen families, all connected by relation or marriage, have received aid in the past few months, and three more families of this group were receiving aid in Cass County.* * * * *Eight families have left the county, some have been cancelled. Mr. Seckinger states that (at this time) Itasca County aid is greater per family and greater per single individual than in surrounding counties."

August 31, 1931, Seckinger was made superintendent of the hospital and secretary of the commission. Then, on November 12, 1931, he was appointed executive secretary for the [#]Board of Poor and Hospital Commissioners at a salary of \$125 per month, and Winniford Scribner was installed as head nurse of the hospital at \$110 per month. At the December, 1931, meeting R. M. Milne was employed as assistant investigator at \$75 per month and mileage.

By this time, direct relief had been brought well under practical control, although the demand for aid was increasing monthly because of growing unemployment. Hospital affairs ^{had} been improved by standardizing the recording system, by the appointment of a head nurse, and as a result of a campaign to collect unpaid hospital accounts.

Medical Services

However, the poor and hospital commission still ^{had} a few unsettled problems. For one thing, there was a great deal of confusion in the handling of county medical aid. The commission ^{took} the ^{position} ~~stand~~ that medical services for which a claim was to be made against the county should not be rendered until after the wel-

7

fare office had made a proper investigation of need. While it was admitted that this procedure might not be practicable in occasional emergency cases, the commission was determined to eliminate the criticism that the poor fund was being habitually used by doctors to clear up their "slow" accounts.

At the January meeting in 1932, the commission rejected a doctor's bill of \$1,080 for failure to comply with the provisions of the resolution adopted February 8, 1930 to govern grants of medical aid. The text of this resolution appears on page 47.

On February 10, 1932 it was decided that Itasca County was too large to be satisfactorily served by a single county physician. The county was therefore divided into four medical service districts, and an assistant county physician appointed for each, as follows:

- District 1 - Keewatin, Nashwauk, and Pengilly: Dr. I. H. Kresling,
Salary: \$35 a month.
- " 2 - Calumet, Marble, Taconite: Dr. J. C. Fueling, \$25.
- " 3 - Bovey, Coleraine: Dr. R. V. Jolin, \$25.
- " 4 - Deer River: Dr. G. A. Minor, \$35.

A glance at the map discloses that the county physician at Grand Rapids and all four of his assistants were located in the southern one-third of the county. This is explainable on the score that there were then no resident physicians practicing in the northern part of the county. To provide medical care in that area therefore entailed extensive travel, and the commission, in appointing these assistant physicians, provided also for an allowance of seven cents

^a ^{being} per mile for calls on patients residing more than fifteen miles from the doctor's office.

Poor Farm

Another source of periodic complaints to the poor and hospital commission was that relic of the days of Queen Elizabeth, the county poor farm. The farm, 176.10 acres in area, is situated just outside Grand Rapids, adjoining the village limits on the northwest. The county, through the years, has erected buildings and made various other improvements on the farm. ~~At one period there was hope of developing deposits of iron ore there, and options were taken for that purpose, but ore of paying quality was not found and the options were permitted to lapse.~~

Before 1932, there had been frequent public expressions of dissatisfaction with the manner of conducting the county farm. Taxpayers felt the institution ought to be made more nearly self-supporting. Care of inmates, as well as management methods, came in for criticism from time to time.

Elderly needy residents who had no relatives in the county, or whose relatives were unable to provide assistance, were customarily removed to and maintained at the poor farm. Those who owned property were expected to transfer title to the county to help defray the cost of maintaining them at the county home. It was perhaps natural for these persons to regard themselves as "paying guests", in a sense, and to feel that they were entitled to preferential treatment over inmates who were entirely destitute at the time of admittance. To the overseers, charged as they were with maintaining discipline under clearly formulated rules, this feeling was a source of constant trouble.

Inmates, as a general rule, were not permitted to leave the farm premises except by consent of the superintendent, and it was considered wise to withhold such consent unless particularly good reason could be shown for granting the privilege. On the other hand, it was a rule that any inmate who refused to do work

assigned by the superintendent would be summarily dismissed from the farm, and there is no suggestion anywhere in the records that exceptions were ever made, in applying this rule, in favor of those who had transferred property to the county at the time of admittance. It was a traditional practice of the sick to make death-bed transfers of their personal possessions, such as watches, to other inmates; the farm management contended that the county was rightfully entitled to such property on the death of the owner. On November 12, 1931, it was found necessary to reduce the wage allowed workers at the county farm to 20 cents an hour, and this action aroused discontent among the workers.

Complaints arising out of these internal troubles occupied much of the time and attention of the poor and hospital commission. Still more ^{disturbing} ~~worrisome~~, though, was the critical attitude of the State Board of Control. Even as early as November, 1931, Executive Secretary Seckinger had received a letter from L. G. Foley, inspector of the board of control, stressing the unsatisfactory condition of the poor farm building and recommending that it be replaced with a modern, fire-proof structure.

Mothers' Allowances.

Mothers' pensions, or allowances, constituted another recurrent problem. While these were paid from the county revenue fund, and therefore did not affect the poor fund directly, the distinction was one which the public generally failed to recognize, and much criticism of the handling of mothers' allowances was unjustly directed at the poor and hospital commission. Mothers' pensions were usually more generous in amount than grants made by the commission to ordinary relief clients with an equal number of dependents.

There is of course a sound philosophical distinction between poor relief and mothers' allowances. Relief is granted to a family when the customary bread winner is temporarily without regular employment. He is still able to work,

is an emergency measure until he is again self-supporting

and the public assistance ~~is just a bridge, smoothing the path of the family toward~~ rehabilitation. Mothers' pensions, on the other hand, are granted as a relatively permanent means of adjustment to the loss of the family wage earner.

Naturally, the distinction is a difficult one for welfare clients to understand. The general public, too, in Itasca County as elsewhere, saw little reason why mothers' allowances should not be paid out of the poor fund, the same as other forms of public assistance. But the poor and hospital commission, vested by law with full and exclusive control of the poor fund, insisted that the same general principles should govern all payments made from that fund, whether those payments were called relief grants or mothers' pensions. Besides, they knew how prominently increased grants to mothers had contributed to the growing deficit in the county's general revenue fund.

Unemployment

rapidly
By 1932, relief demands attributable to unemployment were increasing ~~with impressive rapidity~~. An old building that had housed a veneer plant was requisitioned and turned into a boarding house for the unemployed, and efforts were made to employ these "guests" on local public work projects. The increasing number of families in need of assistance heaped an unprecedented financial burden on the county, and it was out of the question to give immediate attention to extensive improvements at the county farm. However, arrangements were made to have plans drawn and in the meantime necessary repairs were made on the old buildings.

Rising relief demands meant more work to do, and on May 10, 1932, the salary of Assistant Investigator Milne was raised to \$100 per month, Seckinger's to \$140, and that of Head Nurse Scribner to \$125.

An interesting communication received by the commission during this period was read at the meeting of March 23, 1932. The letter, signed by the

"Minneapolis Committee for Direct Relief," asked for an allotment of not less than twenty thousand acres of cheap land, to be employed in colonizing two hundred city families in a cooperative community. Land was to be sold to the colonists on a ²⁵⁻twenty-five year payment plan, with interest and taxes abated during the early years. The proposal was rejected by the Poor and Hospital Commission and by the county commissioners, on the score that it would augment the number of county dependents.

By October, 1932, the Poor and Hospital Commission staff included, according to commission records: "....Seckinger, at \$140 per month, 7¢ per mile, and out of town expense; Milne, at \$100 per month with same mileage and expense allowance; ~~Miss~~ Gladys Stiles, clerk at \$55 per month; and ~~Mrs~~ Florence Proulx at \$30 per month." In addition nineteen voluntary groups were rendering assistance of various types in county investigations.

October 10, 1932, the Poor and Hospital Commission requested a levy of \$120,000 for the poor fund, and \$26,977 to reimburse the county revenue fund. No levy was made for the hospital that year.

Burials

Another frequently troublesome issue, definitely settled in 1932, was the matter of county burials. For several years there had been persistent pressure on the commission by the county undertakers, to obtain an increased allowance by the county for relief burials. In some cases, where more elaborate services were desired by relatives or friends, the undertakers had accepted the county allowance as part payment, collecting the remainder from the other interested parties. So much misunderstanding and criticism resulted that, in November 1932 these rules were laid down by the poor and hospital commission to govern burial grants:

1. Authority for such burial must be obtained from commission.
2. No "part payment" arrangements will be permitted.
3. Rates: children up to 13, \$25 - Adults, \$40, to include everything.

4. Burials must be made in neighborhood of decease.
5. Burials without authority at risk of undertaker.
6. Undertaker must furnish sworn statement of all personal effects taken up.

The newly appointed investigator had scarcely made a start toward reconciliation of the conflicting interests and functions of state and county agencies, when depression on a nation-wide scale introduced still another complicating factor, wholly unfamiliar up to that time. Relief rolls suddenly outgrew local and state resources, and the Federal Government had to come to the rescue. By the fall of 1932, conditions throughout Minnesota were so serious that the Reconstruction Finance Corporation allocated relief funds to the State, for distribution to individual counties. Unfortunately, these funds had to be disbursed under rules which were drawn to fit, not Itasca County, but the great majority of Minnesota counties, in which no such agency as the Poor and Hospital Commission existed.

In accordance with the State Emergency Relief Act, an emergency relief committee was set up in Itasca County. This committee, appointed by the county commissioners with concurrence of the State Board of Control, had as its members: Peter Fahey[#] of Coleraine; John Forsythe, Cohasset; Mrs. Mata Bennett, Grand Rapids; Mrs. R. C. Fitzpatrick, Nashwauk; H. E. Linde, Deer River; Harry Holmes, Coleraine; and Fred McCullough of Nashwauk. The duties of the committee were to requisition R.F.C. funds for the county and to distribute this money in the form of work relief. An attendant function was the approval of appropriate work projects.

In Itasca County, R.^F.C. moneys passed through the poor fund, and the Poor and Hospital Commission, legally vested with control over that fund, was represented on the emergency relief committee by its chairman, Peter Fahey. Also, Seckinger acted as non-voting secretary for the committee, and the minutes of all its early meetings bear his signature as secretary.

The distribution of these Federal funds had to be undertaken with the barest minimum of basic planning. Although the emergency committee was a direct agent of the State Board of Control, it had no detailed instructions from either

Federal or State agencies. It was merely informed that the money had to be placed in circulation without delay, with the warning that if it could not be used immediately in Itasca County it would be spent elsewhere.

The committee, acting in good faith on these instructions, forthwith started a number of work projects. As was inevitable under the circumstances, some of these were hastily conceived and makeshift in character. Inevitably, too, many of those who received employment on the projects were designated merely because they were out of work, with no questions asked as to their actual need of public assistance. In consequence of all this, the disbursement of Federal grants through the county poor fund was so greatly at variance with the practices of the Poor and Hospital Commission that both Fahey and Seckinger thought best to resign from the emergency relief committee.

*observed no way of the thing
"your statement" - paper & other
"many other"*
~~There was nothing unique about this Itasca County situation; it was~~
many duplicated in ~~almost every~~ *is* other county throughout the state and nation. Local relief committees were being called into being everywhere on short notice, their members served without pay and virtually without instructions, and they had no machinery for investigation of individual need. They faithfully discharged their prime function, which was to get men working, and without delay.

*Through*out the life of the Itasca County committee, from late 1932 to October 1935, its relations with the Poor and Hospital Commission were mutually pleasant. The two agencies functioned amicably side by side, on the broad theory that aid to the unemployed able-bodied was the responsibility of the Federal Government, while the care of those who were physically handicapped or chronically indigent, or *who* for other reasons required permanent assistance, fell properly upon the local relief authorities - in this case, the Poor and Hospital Commission.

From 1932 to 1935, then, the commission devoted its time to the

*didn't they have care +
pensions thru the
Veterans Administration?*

management of the county hospital and the poor farm, and dispensed aid to physically handicapped persons, with particular attention to partially or totally disabled World War veterans, and to pensioners of various types.

State Analysis

In late 1933, the State Board of Control made what it called a "formula analysis," of county and city agencies of the state. The purpose of this survey was to determine the relative need of the various agencies for aid from state and federal funds in their relief activities. The counties and cities were placed under six classifications A, B, C, D, E, F.

Itasca County was given "A" classification. To quote the State Board of Control bulletin: "The counties which fall in classification 'A' are those whose tax and financial conditions are the highest or best of all counties in the state. Their general, all-around position indicates that they are not only financially capable of continued performance of established governmental functions, but that they are in a much better financial position, relatively speaking, to pay for practically all of the cost of new programs originated by both the Federal and State governments. These counties, from all factors indicated, are in a sound financial condition and should therefore render the State and Federal governments sufficient proportionate returns to meet emergency needs, special aids, subventions and grants."

Basing its action on this analysis, the State Board of Control asked the Poor and Hospital Commission to meet one-half the cost of relief in Itasca County. Such an agreement could not be reached, and the State Board of Control closed the Itasca County relief office, as of February 1, with the announcement that no further distribution would be made through the emergency relief office until a satisfactory settlement could be reached.

The Herald-Review for February 21, 1934 reports an agreement under

*is this correctly
quoted - it is
not clear ?*

which the county emergency relief office was reopened: "Emergency Relief office will handle all outside relief. That is, where appeals are made for food and clothing, the E. R. A. office will handle, and Poor and Hospital Commission or county will take care of its share of cost of relief."

Coordination

Up to October 1935, there were at various times as many as five distinct social agencies administering specific forms of public assistance in Itasca County. The Poor and Hospital Commission was responsible for hospitalization of county indigents and of clients in a few other categories. The S.E.R.A. office cared for the unemployed and administered general relief, while the S. E.R.A. representative was also certification officer for the Works Progress Administration - a function of great importance at that time. The child welfare board still exercised legal authority over all matters affecting the welfare of children and of handicapped adults. The judge of probate granted mothers' pensions, and the county board still retained a few welfare functions. This situation had some weird consequences. For example, there were actually cases in which a needy family would entertain five official visitors in a single day. As each visitor represented a different agency, the same distressing circumstances would have to be related in equal detail to each. Eventually, too, the plan worked out to meet the family's financial problem would of course have to be reviewed and approved by each of the five agencies.

By a Minnesota statute adopted in 1935, welfare functions were returned to the county boards - which meant, in Itasca County, to the Poor and Hospital Commission. Under this law, the county S.E.R.A. Office was to be discontinued on October 1. In the few intervening weeks, a program was drawn up which still stands as a milestone in the welfare history of Itasca. Under it, the consolidation in a single agency of the authority and prerogatives previously exercised by five groups was accomplished

with scarcely a hitch.

Principal authors of the new plan were L. Merritt Brown and John Poor, who had been charged respectively with S.E.R.A. and state old age assistance in Itasca, A. K. Seckinger as clerk of the Poor and Hospital Commission, Mary Connery, representative of the State Board of Control and member of the Coordinated Field Service, and Herbert Crummy, representing the State Relief Administration. Briefly, it provided for the merger in the Poor and Hospital Commission of all the functions previously performed by several welfare agencies. Because continued receipt of state and federal aid was contingent upon the keeping of prescribed records and compliance with other rigid requirements, some members of the S.E.R.A. staff, who were conversant through experience with these complex requirements, were transferred to the expanded administrative force which the Poor and Hospital Commission now found it necessary to employ.

Whether or not these transferred employees had had any part in the authorship of the coordinated program, they must certainly be given due credit for the fact that the new machinery functioned smoothly almost from the start. Still another new appointee who was perhaps as responsible as any for the efficient operation of the expanded agency during the transitional period was Josephine Wilson, whose employment as case supervisor was made possible by means of a grant from the Federal Children's Bureau through the "Special Service to Children" fund. Miss Connery, who had a prominent part in the reorganization and who, as a representative of the State Division of Social Welfare, has been closely in touch with subsequent developments, says particularly that "credit for the success of the merger should go to Mr. Seckinger and Miss Wilson..... They took ^{three} completely disorganized staffs, whose members were fearful of their jobs and of their futures, ^{were} and welded them into one splendid functioning unit for the care and welfare of the dependent people of the county."

The successful coordination of welfare activities, bringing order out

Not the function of this to allocate credit.

and confusion, was of primary benefit within the county, but its effects were felt far beyond Itasca's boundaries. Quoting Miss Connery again: "Itasca County, by thus taking the lead in successfully coordinating several agencies into one, played a prominent part in guiding subsequent state legislation in the welfare field." It is probably no accident, then, that ^{generally} prominent credit is given to two Itasca County citizens for much of the enlightened social legislation adopted by the state assembly then in session. Mrs. Lyman Huntley, of the League of Women Voters, and Dr. J. Lawrence McLeod, then senator from Itasca, are often mentioned in this connection.

New Official Title

In 1937, further social legislation was under consideration at the State House in St. Paul. By this time, it was generally realized in Itasca County that there was an element of danger in new laws, because state lawmakers could not be expected to keep constantly in mind the unique welfare organization existing in that county. On March 10, 1937, the Herald-Review said editorially: "The State Administration proposes a welfare board for each county. There is merit in the plan, but Itasca now has the Poor and Hospital Commission. The state plan includes that state will nominate or suggest and approve who will be appointed by the Board of County Commissioners. This will be uncertain and more political than our present set-up."

Such watchfulness had results. Into the new law setting up county welfare boards was inserted the provision that in Itasca County the Poor and Hospital Commission should act as the welfare board. Upon passage of this act in 1937, the commission therefore became officially "The Itasca County Poor and Hospital Commission and Welfare Board."

see report [The theoretical duty of the Itasca County Poor and Hospital Commission is to conserve the county poor fund while at the same time providing adequate relief to the deserving needy. In practice, there is an inherent inconsistency in the two objectives. To add to its difficulty, county tax levies are established some months in advance of the beginning of the year during which they are to be expended, and it is obviously impossible to foresee with any accuracy what needs are going to arise so far in the future. In discharging its threefold role of prophet, conservator and benefactor, all the commission can hope to do is to strike a fair compromise between the conflicting interests of the taxpayers and the needy, with the disquieting knowledge that if the compromise arrived at is really a fair one, almost nobody will be satisfied.

an outmoded concept. It is spending public funds. There have been times since 1932 when more than one fourth of the population of Itasca County were receiving public assistance in one form or another. Naturally, such periods of unusual strain ^{have} given rise to intensified unrest among taxpayers and relief clients alike, with the result that ^{more or less well organized} militant groups have from time to time ^{made known their demands} descended bodily upon the commission, or given expression to their discontent in other ways.

Earlier in its history, the commission had had to deal with the concerted demands of smaller groups. First, it was the ^{II}undertakers, seeking higher allowances for county burials. At other times, the doctors of the county complained that the commission was holding too tight a pursestring on the poor fund. Starting in 1933, *Now came several* ~~there were~~ sporadic attempts to organize the unemployed and the needy for the purpose of obtaining more liberal treatment.

The ~~self-styled~~ United Farmers and Workers called a meeting in Grand Rapids on April 5, 1933, at which a number of demands were voiced. ~~There was a demand for work relief at an hourly wage of 45 cents, with at least four 8-hour days each month for single men and eight for heads of families, and distributions of Red Cross flour and clothing in addition; for a general ban on evictions, and against the~~

*entirely unnecessary.
This was its name.*

shutting off of water and light; ~~for~~ free garden seeds, and hot lunches served free at schools to the children of the unemployed and of impoverished farmers. It was further demanded that the miners have the privilege of selecting their own mine inspectors.

~~Apparently the United Farmers and Workers expended all their steam during the meeting.~~ At any rate, ^{any of these} there is no indication either in the commission records or in subsequent newspaper accounts that ~~the~~ demands voiced that day were ever followed ^{acted upon or pressed further} up, and the organization itself does not seem to have survived beyond the adjournment of the meeting.

^{On December 26, 1934} ~~Late in 1934,~~ a meeting was called in Grand Rapids for the discussion of relief matters. ~~The meeting date, ironically enough, was the day after Christmas.~~ The Herald-Review reports that there were between 60 and 70 persons present, only five of whom were employed at the time. Under the chairmanship of H. E. Hagen, an attempt was made to form a permanent organization.

Chief complaints registered at this meeting were ~~(a)~~ undue delay in the investigation of applications for aid, and ~~(b)~~ arbitrary limitations in the granting of county clothing orders, under which the client had no choice of material or place of purchase. The meeting was adjourned to re-convene on December 28, at which time permanent officers were to be chosen and a grievance committee named. But this movement, ^{also} ~~like its predecessor in 1933,~~ ^{at any rate} was shortlived. There is no record even that the meeting called for December 28 was ever held.

In the ^{following} ~~ensuing~~ three or four years, steadily increasing pressure was exerted upon the commission by various ~~special interest~~ groups, representing almost every shade of opinion. [Even within the county government itself, there was at least one instance of attempted usurpation of some commission prerogatives by another county agency. The issue involved was an old one, now about to experience its final flare-up, like a volcano nearing extinction.]

omit unless it is worth factual details - avoid generalities

This section seems out of place here - transfer to preceding chapter.

Pensions to Widows

For many years preceding adoption of the 1931 Poor Law, there had been clashes of authority between the Poor and Hospital Commission and the judge of probate, who was technically charged with the granting of mothers' allowances. After the 1931 law placed the commission in full control of the county poor fund, the commission asserted its right to review these cases, and to increase, decrease, or disallow the grants on the basis of information reported by the commission's investigator.

At the commission meeting of June 13, 1933, Judge of Probate R.A. McQuat came ⁱⁿ to file a protest. He was accompanied by County Attorney Mort Taylor, who informed the commission ^{that} the judge of probate, in his opinion, had sole legal authority to name beneficiaries of mothers' allowances and to determine the amounts ^{to be} granted. The commission stood its ground. It was charged by law with responsibility for the poor fund; if it could not review mothers' grants, then it insisted that they must be paid from some other fund.

A resolution adopted by the commission at a special session held later that same day bears evidence that the issue involved a conflict of philosophy, as well as authority:

RESOLVED: Whereas, it has appeared for some time that mothers getting allowances were faring better than many men with families of similar size, and

Whereas, such payment of allowances from the poor fund, which is already overdrawn, increases the difficulty of taking care of those in dire need

Therefore, Be It Resolved that, as an emergency measure, all payment of mothers' allowances be discontinued, as of June 1, 1933, and until further ordered, and that all such mothers as are in need be taken care of out of the poor fund on the basis of real need as in all other cases.

By 1935, all northern Minnesota counties and most of those in other sections of the state had discontinued payment of mothers' allowances. Assistance

was rendered as actually needed, through S.E.R.A. Local officials and taxpayers, knowing Itasca to be one of a very few counties still paying these grants, were naturally critical of continued payment from the county poor fund of grants in assistance which in other counties were being paid out of Federal funds. July 10, 1935, the commission[#] instructed its clerk to notify Judge McQuat that it would honor no further allowances. When such payments were resumed, some time before 1937, the records seem to indicate general acquiescence in the principle^{be} that all cases were subject to review by the commission.

Workers' Alliance

Let this follow immediately after 1.67 - "shade of opinion"

The most ambitious of ~~all~~ the outside pressure groups, the Workers' Alliance, reached Itasca County in 1938. The organization, reputedly representing the unemployed, was accepted with some enthusiasm in the mining towns as it swept westward along the Mesabi Range. ~~Within the borders of Itasca, though, it met a sudden setback.~~

cut

The new factor which entered at that point is explained in interesting fashion by a resident of northern Itasca, who attended one of the early Workers' Alliance meetings as the representative of a W.P.A. road crew. "On the Range", he says, "there is a large foreign born and first generation group. Maybe they have been a little spoiled by the fact that village and school funds are very plentiful and therefore all government groups are looked upon as Santa Claus. They are apt to go off the deep end over any freak argument that makes them seem 'the poor, oppressed peepul'."

"But the northern part of Itasca County", he continues, "lives much as did the people of Illinois following the Civil War. Except for an occasional flivver or battery radio, a visit to one of these cutover neighborhoods is much like going back to the days of forty years ago. ^{these} ~~These~~ people are made of sterner stuff. The range group is easily led; this group is not. Their sturdy common sense is what calmed things down in 1938."

This long quotation from an unidentified resident is worthless - delete

do not take a left handed poke - from all accounts I did represent the unemployed.

check what is the source?
out

Following successful mass meetings in Hibbing and Virginia, organizers were sent to various points in Itasca County to recruit members for the Alliance. In rural Itasca, there was no such stampede to join as had been met with in the Range towns. The organizers were questioned closely as to the use which was to be made of membership funds. When it was explained that such money would go into the common treasury, ~~and that~~ ^{where} local chapters would have little control over it, the prospective members lost interest. At one such meeting in Bigfork, a local man arose after the organizers had been heard, and proposed that the matter be taken under consideration for action at a subsequent meeting. One organizer, unaccustomed to having his eloquence so rebuffed, flew into a rage. "You can't do this to us!" he shouted. In desperation, he undertook at last to browbeat the audience into defraying his expenses for the trip to and from Nashwauk, a move which was so unpopular that he was lucky to get back to Nashwauk at all. Other meetings throughout the county, except in the Range towns on the eastern border, were similarly unfruitful.

A favorite claim of the Alliance organizers in these Itasca County meetings was that the organization, if properly supported and financed, would "make life miserable for the Poor and Hospital Commission." Attempts were made from time to time to fulfill at least the spirit of this promise. Dissident groups were organized to storm the relief office, but Secretary Seckinger laid down the rule that issues must be presented by delegations of not more than three, due to lack of space for more - and extremist demands, previously voiced by mobs, had a way of petering out when presented by two or three men in the relative calm of the conference room.

The Alliance maintained headquarters for a time in the mining village of Keewatin, in eastern Itasca, from which it ^{sent} ~~served~~ occasional written demands ^{to} ~~upon~~ the Poor and Hospital Commission for assistance to its members. ~~For example, one letter from the Keewatin office, dated September 18, 1938, lists~~ what would amount

delete "one letter unless you can simply quote the request"

out
to more than a freight carload of clothing which was "desired by" the poor families of two thinly-settled rural townships. [On the whole, the requests made by the Alliance were so exorbitant as to be self-condemnatory.]

That, however, was not always the case. In certain instances, demands made by the Workers' Alliance and by other groups were found to have substantial basis. Be it said for the commission ^{is} ~~that its~~ procedures were repeatedly subjected to re-examination and revision to correct weaknesses disclosed through these complaints. Possibly this readiness to give careful consideration to just complaints was responsible, at least in part, for the failure of ^{general} ~~pressure~~ groups to ~~undermine the authority of the commission.~~

You are not
defending the
commission -

press their
demands.

is this the
writers' view
or did someone
in authority
say so. Better
delete.

*too vague
what does it mean?
is there less need for
relief; less illness?*

Since 1940, there has been an apparent leveling off of welfare activities in Itasca County. The path of the Poor and Hospital Commission, in past years so rocky and full of pitfalls, has now reached what looks to be smoother ground. Obviously, though, nobody knows what is ahead, and it would be unsafe to accept too implicitly the pronouncement of one competent observer who has followed the progress of the commission almost from the beginning: "In a quarter of a century, the agency has grown from infancy to maturity." The commission may have many profound lessons still to learn through experience, new adjustments to make through intelligent experimentation. Of the future, time alone can tell; all we can undertake to do here is to appraise the progress which has already been made.

During the quarter century of its existence, the Commission has made progress along two lines:
That progress has had two main phases: (a) better correlation of work with other welfare agencies, and (b) improvement in policies and operating methods.

Today, the authority of the Poor and Hospital Commission is clearly defined in its relation to the county board and the judge of probate. The county child welfare board has passed out of existence, and all its onetime functions are now performed by the commission. Old age pensions and assistance to the aged have likewise been placed by law in the exclusive charge of the commission. As to other social agencies, the functions of some have been absorbed by the commission, while others are being continued by mutual agreement as units in a carefully correlated welfare program.

It has not been an easy matter ^{for} to achieve consistency of policy ^{on} the Poor and Hospital Commission. The complete roster of the commission, printed in the Appendix, contains the names of 27 different citizens of the county who have served for varying periods as members. An appointive board of only five members, it was inevitable that personnel changes should develop wide differences of philosophical viewpoint over a period of 25 years, and broad variations in the degree of social training and experience represented.

It has been found, ~~in view of all this~~, that the only way to maintain

the needed consistency in policies and practices is to delegate the details of operation and management to the executive secretary and his staff, and to hold them fully answerable for performance. In practice, the commission is largely an advisory body, seldom exercising its directional and veto power over actual operating procedures.

As operating units, both the county hospital and the welfare office itself are today reaping the benefits of the long tenure in office of Superintendent Korcell and Executive Secretary Seckinger. In dealing with current problems, the accumulated experience gained by these two as guiding heads during the troubled decade just past cannot fail to be of value.

That once-dubious social asset, the poor farm, has now become an adjunct to the county hospital. Formerly a place to be shunned, half-almshouse and half-jail, it is conducted today as an infirmary, where adequate nursing the medical care is provided for aged needy people. Buildings have been remodeled and re-equipped to serve this new purpose.

compressed — ~~As related in an earlier chapter,~~ the welfare office staff in 1932 was four persons, an investigator, an assistance investigator, and two clerks. Today, ten years later, it has grown to include:

Albert K. Seckinger, Executive Secretary.
Harmon Grabert, Assistant Executive Secretary.
M. Josephine Wilson, Case Supervisor.
Xavier E. Luiten, Department Supervisor of Collections and Special Investigations.
Mildred Weber, Assistant to the Case Supervisor in charge of Office Intake and Medical.
C. N. Nesseth, Department Supervisor in charge of Federal Veterans' Investigations.
Emma Nelson, Child Welfare Worker.
John R. Schwirtz, Senior Visitor.
Geraldine Griffin, Senior Case Worker.
Virgilia Moats, Senior Case Worker.
Inez Madson, Senior Visitor.
J. Clark Kellett, Senior Case Worker.
Agnes Backeus, Junior Visitor.
Mary Lauterbach, Visitor.
Marion Kumlin, Visitor.

any more dependent aged taken care of here?

Helen Syrjamaki, Visitor.
Louis Christofferson, Visitor.
Agnes Skelly, Supervisor of Clearance.
Edward O'Malley, Surplus Commodity Clerk.
Sylvia Joy Secretary to Executive Secretary
and Supervisor of Stenographers.

Additional clerical help includes two senior clerks, three junior clerks, two file clerks, one intake clerk, one senior stenographer, three junior stenographers, and two typists.

The staff, as may be seen, is now highly departmentalized under a ~~system of aid categories~~. This permits a degree of specialization which was not possible with the undermanned force of a decade ago.

Similar, though proportionately smaller, expansions have occurred in the county hospital and infirmary staffs since 1932, in the hospital to accomodate additional patients, and at the county home to supply such new services as nursing care of aged and infirm inmates.

Improved recording and filing systems have been adopted in the hospital and the welfare office, greatly increasing the public and institutional usefulness of the records. ~~Many of the research problems which attended the compilation of this history would not have been encountered if current recording methods had been followed in the early years.~~

It is rather ~~surprising~~ ^{worthy} to note, ~~in the membership roster published in the Appendix~~, that all but one of the 27 who have served as members of the Poor and Hospital Commission were residents of the southern one-third of Itasca County. Naturally, that fact is a source of increasing dissatisfaction in the neglected northern area, and residents of the upper townships are bringing a great deal of pressure to bear on the appointing body, the county board, to remedy ~~the oversight~~ ^{this situation} in future appointments.

~~With that one exception, organized pressure groups are no longer active~~

probably not an oversight

no infirmaries mentioned in 1932

in welfare matters in Itasca County. Surely, the fact may be regarded as significant, as bearing strong inferential evidence that a difficult and more or less thankless task is being performed equitably and without unfair discrimination.

Establishment of the Itasca County Poor and Hospital Commission in 1917 was a promising experiment ~~in social science~~. Out of its wide and varied experience have developed important lessons which are ^{of} general, and not merely local, ~~in~~ ⁱⁿ ~~their~~ applicability ~~to~~ the conduct of public welfare work. By means of this experiment, Itasca has blazed a trail which leads at least a part of the way toward the solution of many social and economic problems in rural areas. And the Poor and Hospital Commission, through the faithful, unselfish service of its members, has lent strength to the helping hand which Itasca County has been able since 1917 to extend to the less fortunate of its citizens.

see report

Chapter 187 - S. F. No. 635.

The Pioneer Law, 1917

(An act to create a Board of Poor and Hospital Commissioners in counties having not less than eighty congressional townships, and an assessed valuation of not less than twenty million dollars and not to exceed fifty million dollars and to define the powers and duties of such board.)

Be it enacted by the legislature of the State of Minnesota -

Sec. 1. Appointment of Board of Poor and Hospital Commissioners.

Qualifications - In all counties in this state containing not less than eighty congressional townships and having an assessed valuation of not less than twenty million dollars and not exceeding fifty million dollars there shall be appointed, as herein provided, a board of poor and hospital commissioners consisting of five members who shall be electors of said county. Such board shall be appointed by the board of county commissioners of such county, with the approval of the judges of the district court of the judicial district in which the county is located, by resolution in writing duly adopted by said board of county commissioners and filed in the office of the county auditor of such county. No member of the board of county commissioners shall be eligible to such appointment. The terms of two of the members of the first board so appointed shall expire on the first Monday in January of the second year after their appointment and the terms of three members of the first board so appointed shall expire on the first Monday in January of the third year after their appointment. Upon the expiration of such first terms their successors shall be appointed in like manner for terms of three years each. Vacancies shall be filled by like appointment for the unexpired terms. All appointments, including those to fill vacancies and those for regular term, shall be by resolution, and approved by the judges of said district court, as aforesaid. Such board of poor and hospital commissioners shall elect one of its members to be president and one of its members to be vice-president each to serve one year and until their successors are elected and qualified. Such board shall also appoint a clerk, as hereinafter provided. Such election of president and vice-president shall be by the vote of a majority of the members of said board, showing the election of said officers and the appointment of said clerk, shall be filed in the office of the county auditor. Said board shall also adopt bylaws and make all necessary rules and regulations for its conduct and government including the times and places for holding its meetings, and may amend such bylaws, rules and regulations at any time at any legal meeting of the board.

The members of said board shall receive no compensation for their services or expenses. The board of county commissioners shall provide a suitable room in the courthouse of such county, for the meetings of such board of poor and hospital commissioners.

Sec. 2. Powers, Duties. - Such board of poor and hospital commissioners shall have all the powers and duties relative to the care of the poor which, in counties having the county system, appertain to the county board. All moneys arising from the labor of poor persons in its care, or from the produce of the poor farm, shall be paid to the board and by it to the county treasury to the credit of the poor fund. No moneys shall be paid from such fund except on vouchers of the board signed by its president or vice-president, and countersigned by its clerk. On the first Monday of January, April, July and October of each year the board shall file with the county auditor an itemized statement of its receipts and expenditures for the preceding three

months. Said board shall have full, complete and exclusive charge of and control of the poor of such county, and the handling, use and paying out and expending of all moneys for poor purposes in such county including the poor fund thereof. In each of said counties having a county hospital, or in which there shall be established or provided a county hospital under the laws of this state, such board shall have the full, complete and exclusive control, care, management, maintenance and operation of such hospital and shall operate the same as a county hospital. Such board shall provide such bylaws, rules and regulations in reference to such hospital, as to the control, management, maintenance and operation thereof, as it shall deem necessary, proper or desirable. It shall fix the rates to be charged all patients cared for in such hospital including the rates to be charged against the county for paupers or poor persons cared for at the request of such county. It shall appoint a superintendent of such hospital who shall hold his office at the pleasure of said board, fix his salary, and prescribe his powers, duties and responsibilities. It shall have the power to employ and pay such other assistants, servants, physicians, surgeons, nurses, and other employees as may be necessary or desirable for the maintenance and operation of such hospital. The amounts due or to become due, from patients and others who may be served by said hospital shall be collected by and paid to said board. Said board shall require to be kept accurate and complete books of account of all receipts and disbursements in the matter of the maintenance of such hospital and on the first Monday of January of each year shall file with the county auditor an itemized statement of all such receipts and expenditures for the preceding year, which statement shall be appended to and published with the financial statement of such county.

Sec. 3. Clerk, appointment of, Duties and Compensation - Such board of poor and hospital commissioners shall appoint a clerk, to serve during the pleasure of such board, and fix his compensation which shall not exceed one hundred twenty-five dollars (\$125.00) per month, to be paid out of the county poor fund. Such clerk shall keep a record of all the doings of the board, preserve all documents relating to its business, keep an account of all receipts and expenditures, the names and addresses of all persons by or for whom application is made for relief, and report to the board thereon. The board may authorize such clerk to grant temporary relief in cases of emergency, without previous action by the board, but it shall by proper resolution limit the amount of such temporary relief to be so granted. Such clerk shall perform all the duties and services both as to such hospital and to the matter of the poor as shall be prescribed by said board. They may appoint such other assistants as may be necessary to discharge its duties.

Sec. 4. Taxes, How Levied - Taxes shall be levied by said board for the support of the poor and for said hospital, as follows: On or before the first day of October in each year said board shall determine, by separate resolution duly passed, the amount of taxes to be levied for the ensuing year for the support of the poor in such county, the maintenance of the poor house and other buildings provided for the care of the poor, including the erection of any building or the making of any improvements for such purpose, and for the care, support, maintenance and operation of said hospital. The adoption of such resolution shall constitute a levy on the taxable property in such county to the full amount named therein, provided, however that the tax so levied for said hospital purposes shall not exceed five-tenths of one mill (5/10 of \$.00.) upon the said taxable property in said county. On or before the fifth day of October in each year, said board shall file a certified copy of each of said resolutions with the county auditor of such county, who shall thereupon enter the amount upon the tax

list, and thereafter proceed to the assessing and collecting of such tax in the same manner as village or corporation taxes. Such taxes when collected shall be placed in, or credited to the hospital fund and to the poor fund respectively.

Sec. 5 - Should any paragraph or separate provision of this act be held invalid by any court having jurisdiction thereof so to determine, such decision or judgment shall not be held to affect any other paragraph or provision hereof or herein.

Sec. 6 - All acts and parts of acts inconsistent with this act are hereby repealed.

Sec. 7 - All existing laws, not hereby expressly repealed, shall be construed in such a way as to effectuate and carry out the terms, conditions, spirit and purpose of this act, and to that end such laws shall be made to conform to and assist in carrying out this act.

Sec. 8 - This act shall take effect and be in force from and after its passage.

Approved April 10, 1917.

The ~~1931~~ Poor Bill, 1931

CHAPTER 60 - S. F. No. 281. An Act to Amend Sections 1, 2, 3, & 4, of Chapter 187, Laws of 1917, relating to the creation of a board of poor and hospital commissioners in certain counties, extending the powers and duties of said boards, providing for the payment of mothers' pensions from the poor fund in such counties, and authorizing the levy of taxes to reimburse the revenue fund of such counties for certain past expenditures.

Be it Enacted by the Legislature of the State of Minnesota:

Sec. 1. Sec. 1 of Chapter 187, laws of 1917 is hereby amended to read as follows:

Sec. 1. Appointment of Board of Poor and Hospital Commissioners.

Qualifications. - In all counties in this state containing not less than eighty (80) congressional townships, and having an assessed valuation of not less than twenty (20) millions, and not exceeding fifty (50) million dollars, there shall be appointed, as herein provided, a board of poor and hospital commissioners, consisting of five members, who shall be electors of said county. Such board shall be appointed by the board of county commissioners of such county with the approval of the district court of the judicial district in which the county is located, by a resolution in writing duly adopted by the said board of county commissioners and filed in the office of the county auditor of such county. No member of the board of county commissioners shall be eligible to such appointment. The term of two of the members of the first board so appointed shall expire on the first Monday in January of the second year after their appointment, and the terms of three members of the first board so appointed shall expire on the first Monday of the third year after their appointment. Upon the expiration of such first terms their successors shall be appointed in like manner for a term of three years each. Vacancies shall be filled by like appointment for the unexpired terms. All appointments, including those to fill vacancies and those for regular term shall be by resolution, and approved by a judge of the said district court, as aforesaid.

Such board of poor and hospital commissioners shall elect one of its members to be president and one of its members to be vice-president, each to serve for one year, and until their successors are elected and qualified. Such board shall also appoint a clerk, as hereinafter provided. Such election of president and vice-president shall be by a vote of a majority of said board, which vote shall be duly recorded in the minutes and proceedings of said board, and the appointment of said clerk shall also be entered in the minutes, records and proceedings of said board. A certified copy of such minutes and records of said board, showing the election of said officers and the appointment of said clerk, shall be filed in the office of the county auditor.

Said board shall also adopt by-laws and make all necessary rules and regulations for its conduct and government, including the times and places for holding its meetings, and may amend such by-laws, rules and regulations at any time at any legal meeting of the board. The members of the said board shall receive no compensation for their services, but shall receive their actual expenses, the same to be audited by the board of poor and hospital commissioners and paid from the poor fund of said county. The board of county commissioners shall provide a suitable room in the courthouse of such county for the meetings and use of such board of poor and hospital commissioners.

Sec. 2. Sec. 2 of Chapter 187 Laws of 1917 is hereby amended to read as follows:

Sec. 2. Powers, Duties. - Such board of poor and hospital commissioners shall have all the powers and duties relative to the care of the poor which, in counties having the county system appertain to the county board, including the duty of investigating the need for allowance to mothers for the support of dependent children, the duties imposed on the county board with reference to the care and treatment of persons afflicted with tuberculosis, and also including the duties imposed on the county board relating to the treatment of indigent persons in the Minnesota General Hospital. All money arising from the labor of poor persons in its care, or from the produce of the poor farm, shall be paid to the board and by it into the county treasury to the credit of the poor fund. No money shall be paid from such fund except on vouchers of the board, signed by its president or vice-president and countersigned by its clerk. On the first Monday of January, April, July and October of each year the board shall file with the county auditor an itemized statement of its receipts and expenditures for the preceding three months. Said board shall have full, complete and exclusive charge and control of the poor of such county, and the handling, use, paying out and expending of all moneys for poor purpose in such county, including the poor fund thereof. In each of said counties having a county hospital, or in which there shall be established or provided a county hospital under the laws of this state, such board shall have full, complete and exclusive control, care, management, maintenance and operation of such hospital and shall operate the same as a county hospital. Said board shall provide such bylaws, rules and regulations in reference to such hospital, as to the control, management, maintenance and operation thereof, as it shall deem necessary, proper or desirable. It shall fix the rates to be charged all patients cared for in such hospital, including the rates to be charged against the county for paupers or poor persons cared for at the request of such county. It shall appoint a superintendent of such hospital who shall hold office at the pleasure of said board, fix his salary and prescribe his powers, duties and responsibilities. It shall have the power to employ and pay such other assistants, servants, physicians, surgeons, nurses and other employees, as may be necessary or desirable for the maintenance and operation of such hospital. The amounts due or to become due, from patients and others who may be served by said hospital, shall

be collected by and paid to said board. Said board shall require to be kept accurate and complete books of account of all receipts and disbursements in the matter of the maintenance of such hospital, and on the first Monday in January of each year shall file with the county auditor an itemized statement of all such receipts and expenditures for the preceding year, which statement shall be appended to and published with the financial statement of such county.

Sec. 3. Sec. 3, Chapter 187, Laws of 1917 is hereby amended to read:

Sec. 3. Clerk, Appointment of, Duties and Compensation - Such board of poor and hospital commissioners shall appoint a clerk, to serve during the pleasure of such board, and fix his compensation, the same to be paid out of the county poor fund. Such clerk shall keep a record of all the doings of the board, preserve all documents relating to its business, keep an account of all receipts and expenditures, the names and addresses of all persons to whom relief has been granted, with the amount of such relief, investigate the conditions and needs of all persons by or for whom application is made for relief, and shall investigate the need for allowance to mothers for the support of dependent children, the need for treatment of persons afflicted with tuberculosis and of indigent persons requesting care in the Minnesota General Hospital when application has been made therefore, and report to the board thereon. The board may authorize the clerk to grant temporary relief in cases of emergency, without previous action by the board, but it shall by proper resolution limit the amount of such temporary relief to be so granted. Such clerk shall perform all the duties and services, both as to such hospital and to the matter of the poor, as shall be prescribed by said board. The board may appoint such other assistants as may be necessary to discharge its duties.

Sec. 4. Sec. 4, Chapter 187, Laws of 1917 is hereby amended to read as follows:

Sec. 4. Taxes, How levied - Taxes shall be levied by said board for the support of the poor, including allowance to mothers for the support of dependent children and for said hospital as follows: On or before the first day of October in each year said board shall determine, by separate resolutions duly passed, the amount of taxes to be levied for the ensuing year for the support of the poor, including allowance to mothers for the support of dependent children in such county, the maintenance of the poor house and other buildings provided for the care of the poor, including the erection of any building or the making of any improvements for such purpose, and for the care, support, maintenance and operation of said hospital including the construction or repair of any buildings therefor.

The adoption of such resolution shall constitute a levy on the taxable property in such county to the full amount named thereon, provided, however, that the tax so levied for said hospital purposes shall not exceed five tenths of one mill (5/10 of \$.001) upon the said taxable property in said county. On or before the fifth day of October in each year said board shall file a certified copy of each of said resolutions with the county auditor of such county, who shall thereupon enter the amount upon the tax list, and thereafter proceed to the assessing and collecting of such tax in the same manner as village or corporation taxes. Such taxes when collected shall be placed in, or credited to the hospital fund and to the poor fund, respectively. All allowances to mothers for the support of dependent children in such counties. Provided further, that in each of such counties the board of poor and hospital commissioners is hereby authorized and directed to levy against the taxable property in its county,

by resolution, as above provided, in the year of 1931, in addition to other authorized levies, an amount equal to the aggregate sum paid to mothers for the support of dependent children from the revenue fund of such county during the years 1928, 1929, 1930 and 1931, said levy to provide that the collection thereof shall be equally spread over a period of three years, and that the proceeds thereof, when collected, shall be, by the auditor of such county, transferred to the revenue fund of such county.

Sec. 5 - This act shall take effect and be in force from and after its passage.

Approved March 14, 1931.

POOR AND HOSPITAL COMMISSION BOARD MEMBERS

	Term Expired
M. J. Baker - (Deer River) - - - - -	-Jan. 1919
J. M. Stackhouse - (Cohasset) - - - - -	-Jan. 1919
D. M. Gunn - (Grand Rapids) - - - - -	-Jan. 1920
Alexander King - (Coleraine) - - - - -	-Jan. 1920
R. L. Downing - (Keewatin, died 10/31/1918) - - - - -	-Jan. 1920
R. N. Blackburn - (Keewatin appointed to replace Downing) - - - - -	-Jan. 1920
M. J. Baker - (reappointed) - - - - -	-Jan. 1922
J. M. Stackhouse - (reappointed, resigned, left county) - - - - -	-Jan. 1922
George O'Brien - (Stackhouse) - - - - -	-Jan. 1922
D. M. Gunn - (reappointed) - - - - -	-Jan. 1923
R. N. Blackburn - (reappointed) - - - - -	-Jan. 1923
Peter Fahey - (Coleraine) - - - - -	-Jan. 1923
M. J. Baker - (Reappointed) - - - - -	-Jan. 1925
George O'Brien - (Reappointed, resigned Dec. 1922) - - - - -	-Jan. 1925
Morris O'Brien - (Cohasset, replaced O'Brien) - - - - -	-Jan. 1925
George B. Aiton - (Grand Rapids) - - - - -	-Jan. 1926
R. N. Blackburn - (reappointed) - - - - -	-Jan. 1926
Peter Fahey - (reappointed) - - - - -	-Jan. 1926
Mike Guthrie - (Deer River) - - - - -	-Jan. 1928
J. G. McDaniel - (Cohasset) - - - - -	-Jan. 1928
Peter Fahey - (reappointed) - - - - -	-Jan. 1929
R. N. Blackburn (reappointed) - - - - -	-Jan. 1929
Edward Persons - (Grand Rapids, Resigned) - - - - -	-Jan. 1929
D. M. Gunn - (replaced Persons) - - - - -	-Jan. 1929
Mike Guthrie - (reappointed) - - - - -	-Jan. 1931
J. G. McDaniel - (reappointed, resigned Jan. 1929) - - - - -	-Jan. 1931
John Forsythe - (Grand Rapids, replaced McDaniel) - - - - -	-Jan. 1931
D. M. Gunn - (reappointed) - - - - -	-Jan. 1932
Peter Fahey - (reappointed) - - - - -	-Jan. 1932
Carl Cusciotto - (appointed, refused to qualify) - - - - -	-Jan. 1932
Jake Jaffe - (replaced Cusciotto) - - - - -	-Jan. 1932
John Forsythe - (reappointed) - - - - -	-Jan. 1934
J. W. Gardner - (Grand Rapids) - - - - -	-Jan. 1934
Peter Fahey - (reappointed) - - - - -	-Jan. 1935
Jesse Madson - (resigned 12/6/32) - - - - -	-Jan. 1935
Tate Seibenthal - (in place of Madson) - - - - -	-Jan. 1935
D. M. Gunn - (died before completing term) - - - - -	-Jan. 1935
Wallace Aiken - (replaced Gunn) - - - - -	-Jan. 1935
J. W. Gardner - (reappointed) - - - - -	-Jan. 1937
F. J. Skocdopole - (resigned 1/7/35) - - - - -	-Jan. 1937
Agnes Skelly - (Grand Rapids, replaced Skocdopole) - - - - -	-Jan. 1937
Wallace Aiken - (reappointed, resigned 9/1/35) - - - - -	-Jan. 1948
Otto Gildemeister - (Aiken) - - - - -	-Jan. 1938
Walter Sterling - (Grand Rapids) - - - - -	-Jan. 1938
I. H. Kiesling - (Grand Rapids) - - - - -	-Jan. 1938
Mrs. Gust Westvik - (Big Fork) - - - - -	-Jan. 1940
W. R. Giberson - (Deer River) - - - - -	-Jan. 1940

^{the}
~~LIST OF~~ CLERKS OF POOR & HOSPITAL COMMISSION

Clarence B. Webster, Judge of Probate - ~~from~~ ^{give date} beginning to April 1, 1924.

Viola N. Burke - April 1, 1924, to September 1, 1924.

Fannie Young - September 1, 1924 to July 31, 1929.

D. M. Gunn - member of P. & H. Board, clerk - July 31, 1929 to November 12, 1931.

A.K. Seckinger - November 12, 1931 to April 10, 1935.

F. J. Scodopole - Board member, acting clerk - April 10, 1935.

A. K. Seckinger - ~~Became~~ ^{to} "Deputy clerk" April 10, 1935, ^{? month & days} continued as such until 1936.

~~A. K. Seckinger~~ Clerk and executive secretary, 1936 to date. ^{month & days}

not clear -
served for
only this one
day?