



St. Paul-Ramsey Medical Center.  
Hospital and Medical Center Records.

## **Copyright Notice:**

This material may be protected by copyright law (U.S. Code, Title 17). Researchers are liable for any infringement. For more information, visit [www.mnhs.org/copyright](http://www.mnhs.org/copyright).

# Medical Education & Research Foundation

Section 4

MERF

#### 4. ST. PAUL-RAMSEY HOSPITAL MEDICAL EDUCATION AND RESEARCH FOUNDATION

##### Background and Purpose

The Medical Education and Research Foundation was incorporated to promote and further develop medical education and research, primarily at St. Paul-Ramsey Hospital.

In furtherance of this purpose, the Foundation makes funds and facilities available to attract and retain highly qualified medical educators and scientific investigators. It also makes funds available, through the respective Medical Departments for the educational and research endeavors of the residents and students as well as allied health personnel.

In 1965 the ten physicians on a salary at the hospital carried on individual private practices of medicine. The building of a new hospital facility in 1965 and the rapid increase in the number of people with health insurance threatened to create a situation in which the demands of the individual practices would conflict with the primary teaching and community service functions of the hospital. These physicians decided that a hospital based group practice structured to maintain the emphasis on teaching, meeting general community needs and caring for all patients, whether or not they could afford to pay, was necessary. With the guidance of the citizens committee advising the welfare board on hospital matters, the Medical Education and Research Foundation was created. It has become a model for the rest of the United States.

The Foundation's funds accrue as a result of two primary roles which it serves. First, it serves as fiscal agent to receive and administer grants, bequests, gifts, etc., from individuals, local, State and

National Health Agencies. Secondly, it serves as a business agent for the Medical Service Plan of the staff. Under this plan the senior staff physician engages in a practice of medicine which is both independent of and in conjunction with the teaching program. All patients are attended by the senior staff and those who can pay (either personally or via third party) are billed for the "attending physician" services of the senior staff.

#### History

On December 27, 1966, the members of the Ramsey County Welfare Board, at that time the governing board of the hospital, incorporated the St. Paul-Ramsey Hospital Medical Education and Research Foundation. The original Board of Trustees was composed of six physicians from the hospital staff and three community leaders who were not members of the governing body of the hospital. In order to assure that the Foundation qualify as a public foundation under the revised Internal Revenue Code the Board no longer contains physicians who are compensated by the Foundation. The Foundation has been held to be a public foundation by the Internal Revenue Service.

#### The Foundations Board

The members of the present August 1973 Board of Trustees are:

- The Honorable Sidney P. Abramson, Chairman (Judge of District Court)
- Mr. Cecil March (Retired Industrialist)
- Mr. Frank H. Delancy, Jr., (Vice President, American National Bank & Trust)
- Dr. Lyle Tongen (St. Paul Surgeon; Clinical Assistant Professor, Department of Surgery, University of Minnesota)
- Mr. Lewis Paper (Chairman of the Board, Paper Calmenson & Company)
- Mr. Meredith J. Heldridge (Division Commercial Manager, Northwestern Bell Telephone Company)

Mr. Goodwin S. Anderson (Assistant Vice President, Northwestern National Bank)

Mr. Richard A. Moore (Attorney at Law, Member, Ramsey County Hospital & Sanitarium Commission)

Mr. Michael F. Ettel - Ex Officio Member (President, Catholic Aid Association; Chairman, Ramsey County Hospital and Sanitarium Commission)

This Board meets regularly to conduct the business of the Foundation passing upon actions taken by the officers, paid administrators, and by an Administrative Committee of physicians elected by the Medical Staff. It has the total responsibility for the operation of the Foundation.

#### Fee Plan-Practice

The governing Board of the St. Paul-Ramsey Hospital, the Ramsey County Hospital and Sanitarium Commission, has entered into a formal affiliation agreement with the Board of the Foundation which requires that all members of the hospital Staff, if they are to attend patients in the hospital, must sign contracts with the Foundation and be participant members in the Foundation's Fee Plan. The Fee Plan requires that any fees collected for the care of patients in St. Paul-Ramsey Hospital be the property of the Foundation and not of the individual physician. In addition, any fees collected from the practice of medicine by any of the full time staff of the hospital, whether this practice was in the hospital or elsewhere, are the property of the Foundation. Thus, the hospital and its teaching program are not exploited for the private gain of a few individuals. The fees so collected are managed in the following manner:

- A. An amount is deducted sufficient to pay for the billing, collection and administrative services of the Foundation

(15%) and to reimburse the hospital for any expenses incurred that are incident to or of benefit to the Foundation (7 1/2%)

- B. An additional 20 per cent of all monies collected goes into a general fund which is used to provide hospital-wide benefits, especially to help those departments whose income is insufficient to meet the needs which they legitimately have if they are to function appropriately in a teaching setting.
- C. The remaining money goes into a departmental account which is used for the following purposes:
  - 1. compensation of physicians who are on the Full or Part Time Medical Staff. It is impossible for the hospital or the University to pay salaries of sufficient size to attract and keep teaching physicians of the first rank. These payments have been a major factor in increasing the number of Full time teaching physicians from 10 to 60.
  - 2. to provide funds for educational purposes including trips to meetings and postgraduate courses, the purchase of books and teaching materials, the paying of honorarium to visiting professors, lecturers, etc.
  - 3. to pay for teaching services rendered by physicians on the Medical Staff who are in private practice in the community. It is no longer possible for a physician in private practice to render voluntary services in a teaching role. Medical education today is very time consuming and requires a greater amount of effort than can reasonably be expected on a voluntary basis. Fees

collected from the care of patients are used to pay physicians to participate in the teaching program.

4. to pay the cost of research activities at the hospital- salaries for research personnel, supplies and equipment are funded from this category.

#### Fiscal Details

It is estimated that approximately 40% of the 4.5 million dollars spent for educational and research activities at St. Paul-Ramsey Hospital were funded by the Foundation in 1972. Of approximately 1.75 million dollars spent by the Foundation, 1.2 million went to pay the salary supplements to the 60 full time and 40 part time physicians and to 50 of the 180 other members of the Medical Staff who participated in patient care and teaching activities. The maximum compensation to any one physician is limited by a ceiling established by the Board of Trustees. Compensation is on the basis of the value of the contribution of the physician to the overall activities of the hospital and to his department. The sums needed to provide a salary competitive with that available in other educational and service institutions of the country is a factor. In 1973 a few physicians are being paid the maximum allowed, \$55,000. Attached is a copy of the Foundation's 1972 Annual Report. This report outlines some of the Foundation's projects as well as giving the fiscal details for the year.

AFFILIATION AGREEMENT  
BETWEEN  
RAMSEY COUNTY HOSPITAL AND SANITARIUM COMMISSION  
AND  
SAINT PAUL - RAMSEY HOSPITAL MEDICAL EDUCATION  
AND  
RESEARCH FOUNDATION

Adopted October 26, 1972

## AFFILIATION AGREEMENT

THIS AGREEMENT, entered into this 26 day of October, 1972,  
by and between the RAMSEY COUNTY HOSPITAL AND SANITARIUM COMMISSION, party  
of the first part, and SAINT PAUL - RAMSEY HOSPITAL MEDICAL EDUCATION AND  
RESEARCH FOUNDATION, party of the second part;

WITNESSETH:

WHEREAS, the Saint Paul - Ramsey Hospital is a public facility jointly  
owned by the City of Saint Paul and the County of Ramsey, both political  
subdivisions of the State of Minnesota; and

WHEREAS, the Saint Paul - Ramsey Hospital is financed by the County of  
Ramsey; and

WHEREAS, Chapter 1104 Session Laws of the State of Minnesota 1969,  
Section 1, provides that the Ramsey County Hospital and Sanitarium Commission  
shall have the duty of administering and managing the Saint Paul - Ramsey  
Hospital; and

WHEREAS, Chapter 1104 Session Laws of the State of Minnesota 1969,  
Section 4, Subd. 4, provides that the Ramsey County Hospital and Sanitarium  
Commission must take all measures necessary and proper to provide hospital and  
medical services for the indigent, the contagiously ill, catastrophically  
injured, and city and county prisoners, and may take measures necessary and  
proper to maintain Saint Paul - Ramsey Hospital as a research and teaching  
institution and empowers the Commission to make affiliation agreements to  
those ends with nonprofit organizations created pursuant to state statute; and

WHEREAS, the Saint Paul - Ramsey Hospital Medical Education and Research  
Foundation was formed as a nonprofit organization under the laws of the State  
of Minnesota on December 27, 1966;

NOW, THEREFORE, IT IS AGREED AS FOLLOWS:

1. That all patients treated at Saint Paul - Ramsey Hospital shall be charged for professional services in accordance with their ability to pay.

2. That no indigent resident of Ramsey County shall be charged for medical care except as provided by and through local, state and federal welfare regulations.

3. (a) That party of the first part shall require that each physician on the active medical staff, as defined by the Medical Staff Constitution of Saint Paul-Ramsey Hospital, as a condition precedent to his or her appointment to or continuation as a member of the full-time, part-time or attending medical staff of Saint Paul - Ramsey Hospital, shall agree to be bound by the terms and conditions of this affiliation agreement and the Articles of Incorporation, Bylaws, rules and regulations of the Saint Paul - Ramsey Hospital Medical Education and Research Foundation.

(b) That all fees or charges for such medical services shall be set by the physician rendering such services and no adjustments thereof shall be made without his approval.

(c) That all medical fees or charges generated as a result of treatment of patients at Saint Paul - Ramsey Hospital by physicians on the active medical staff thereof and all medical fees and charges generated by the full-time medical staff regardless of patient location shall accrue to and be the sole property of the Saint Paul - Ramsey Hospital Medical Education and Research Foundation to be administered by it pursuant to the provisions of its Articles of Incorporation, Bylaws and rules and regulations.

(d) That all bills for fees or charges for medical services shall be billed in the physician's name, either through Saint Paul - Ramsey Hospital Medical Education and Research Foundation or the Saint Paul - Ramsey Hospital.

(e) That such billings shall be made in a manner so as to avoid confusion between the statements for services by the Ramsey County Hospital and Sanitarium Commission and those of the Saint Paul - Ramsey Hospital Medical Education and Research Foundation. The Ramsey County Hospital and Sanitarium Commission reserves the right to require the Saint Paul - Ramsey Hospital Medical Education and Research Foundation to conform to all specifications made by the Ramsey County Hospital and Sanitarium Commission to avoid such confusion for all such separate Foundation billings.

4. That the party of the second part shall adequately compensate the party of the first part at going market prices in the area for the use of real estate owned by the City of Saint Paul and County of Ramsey and administered by the party of the first part, and equipment so owned and administered, and services of the employees of the party of the first part used by the party of the second part in its operation.

5. That the party of the second part shall carry adequate fire, comprehensive malpractice, negligence, liability, burglary, embezzlement and mysterious disappearance insurance to save the City of Saint Paul, County of Ramsey, and the Ramsey County Hospital and Sanitarium Commission individually and as such Committee free from any and all liability arising out of any activity participated in by the party of the second part. Such policies shall be approved as to form by the Ramsey County Attorney.

6. That the party of the second part and all officers thereof shall maintain and keep financial, medical and all other records necessary to fully and accurately portray their activities. Such records shall be kept in such arrangement and condition so as to be readily accessible for convenient use by all patients of the Saint Paul - Ramsey Hospital and by any resident of Ramsey County. Such records shall be reasonably available

during usual and customary business hours to any such person upon written demand except as to such records as may be medically privileged and being demanded by one without authority to waive such privilege. Any such person may enforce his right independently of the party of the first part.

7. That notice shall be given to all the members of the Ramsey County Hospital and Sanitarium Commission and the Ramsey County Attorney of all meetings of the governing body of the party of the second part, and the meetings shall be open to the members of the Ramsey County Hospital and Sanitarium Commission and the Ramsey County Attorney. The minutes of the members of the governing body of the party of the second part on all actions taken in meetings shall be recorded in a journal kept for that purpose, which journal shall be open to the public.

8. That the Saint Paul - Ramsey Hospital Medical Education and Research Foundation shall establish a general fund to support education and research activities including those allocated to its departments. It is agreed that this fund shall receive, in addition to other support, at least twenty percent (20%) of the gross cash receipts of the medical fee plan of the Saint Paul - Ramsey Hospital Medical Education and Research Foundation commencing with its fiscal year beginning December 1, 1972.

9. That the Saint Paul - Ramsey Hospital Medical Education and Research Foundation agrees to contribute up to twenty percent (20%) of the cost of a new building, but not in excess of Two Million Dollars (\$2,000,000.00) from its accumulated funds, if available toward the necessary capital expenditures to develop major ambulatory care and child care facilities, including parking, office, laboratory and teaching space, together with necessary ancillary construction provided that satisfactory evidence of the necessary

additional financing is presented to its Board of Trustees. It is understood that such new building will satisfactorily provide for party of the second part's needs and that party of the second part will be represented on the building committee. Such funds to be contributed by party of the second part shall be made available monthly as needed expenditures toward such new building are incurred on the basis of twenty percent (20%) of such incurred costs.

10. That the President and Vice President-Medical Director of Saint Paul-Ramsey Hospital shall be a member of the Committee of the Saint Paul-Ramsey Hospital Medical Education and Research Foundation responsible for recommending supplements to the salaries of the medical staff of the Saint Paul-Ramsey Hospital. It is further agreed that the President and both Vice Presidents of the Saint Paul - Ramsey Hospital shall be members (ex officio) of the Administrative Committee of the Saint Paul - Ramsey Hospital Medical Education and Research Foundation and shall participate in any and all of that Committee's deliberations.

11. That in the event the Saint Paul - Ramsey Hospital Medical Education and Research Foundation is finally determined to be no longer qualified as exempt under § 501 (c) (3) of the Internal Revenue Code or comparable provision of the Minnesota Income Tax Act, either party to this agreement may terminate the same upon ninety (90) days' advance written notice to the other.

12. That this agreement may be amended at any time by written consent of the parties hereto.

13. That this agreement shall be effective immediately, and shall continue from year to year. In the event either party wishes to terminate the agreement, it may do so upon one hundred eighty (180) days' advance written notice to the other.

IN WITNESS WHEREOF, the parties have executed this agreement the day  
and year first above written.

RAMSEY COUNTY HOSPITAL AND  
SANITARIUM COMMISSION

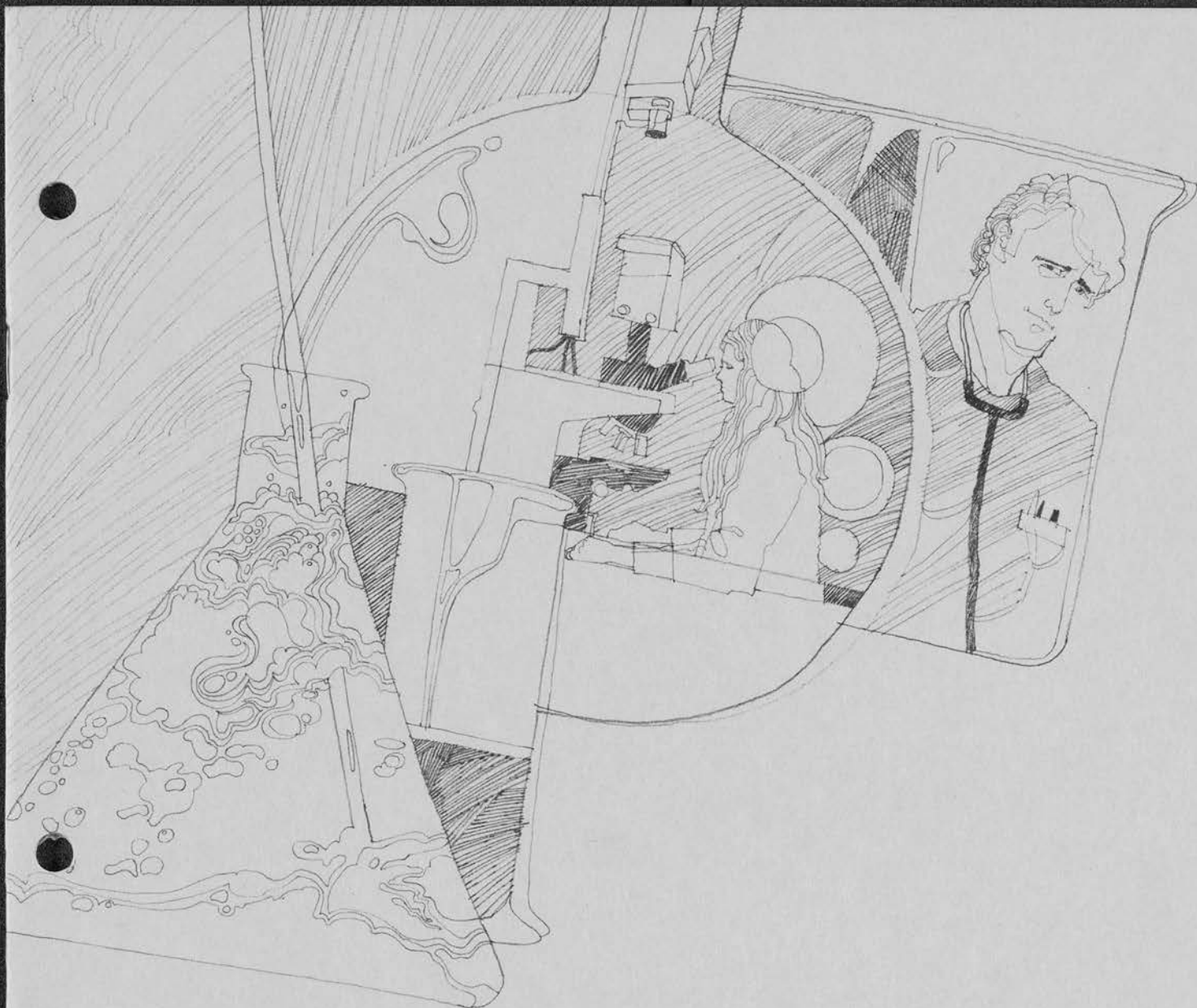
By *Frederick F. Etzel*  
Its Chairman

By *Ellen M. Miller*  
Its Secretary

SAINT PAUL-RAMSEY HOSPITAL MEDICAL  
EDUCATION AND RESEARCH FOUNDATION

By *[Signature]*  
Its *[Signature]*

By *[Signature]*  
Its Secretary



SAINT PAUL - RAMSEY HOSPITAL  
MEDICAL EDUCATION AND  
RESEARCH FOUNDATION

ANNUAL REPORT 1972

## TRUSTEES

### CHAIRMAN:

The Honorable Sidney P. Abramson  
Judge of District Court of Ramsey County  
*Member:* Ramsey County Hospital and  
Sanitarium Commission

### MEMBERS:

Mr. Frank H. Delaney, Jr.  
*Vice President*  
American National Bank & Trust Company

Mr. Cecil March  
*Retired Industrialist*  
*Member:* Ramsey County Hospital and  
Sanitarium Commission

Doctor Lyle Tongen  
*Attending Staff Surgeon*  
Saint Paul-Ramsey Hospital  
*Clinical Assistant Professor of Surgery*  
University of Minnesota

Mr. Lewis Paper  
*Chairman of the Board*  
Paper Calmenson & Company

Mr. Meredith J. Heldridge  
*Division Commercial Manager*  
Northwestern Bell Telephone

Mr. Goodwin S. Anderson  
*Assistant Vice President*  
Northwestern National Bank of Saint Paul

Mr. Richard A. Moore  
*Attorney at Law*  
Moore, Costello and Hart

### EX OFFICIO:

Mr. Michael F. Ettel  
*President*  
Catholic Aid Association  
*Chairman:* Ramsey County Hospital and  
Sanitarium Commission

## 1972

The year 1972 has been one of growth for the Medical Education and Research Foundation. Financial success has allowed the Foundation to contribute greater amounts to medical education and research at Saint Paul-Ramsey Hospital than ever before. The following pages outline the major areas of the Foundation's work in 1972 and include some projections for the future.

## GOALS & OBJECTIVES

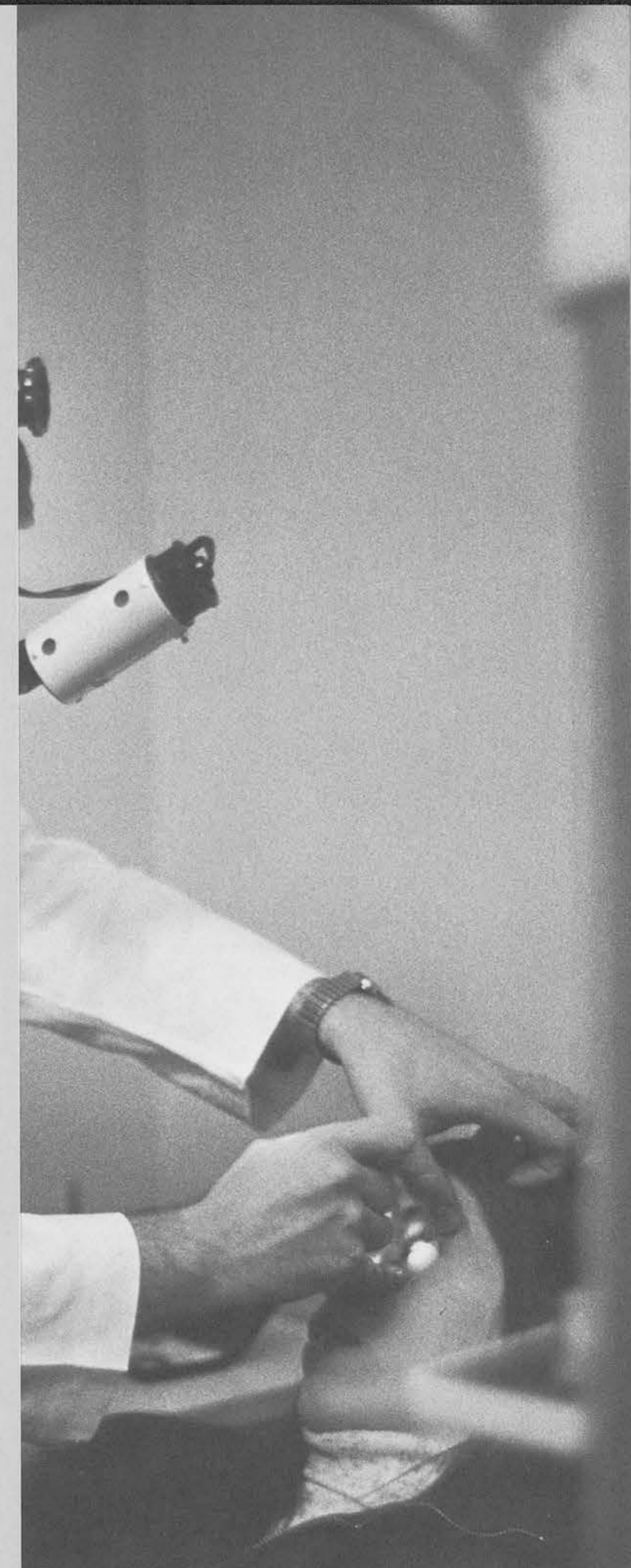
The Medical Education and Research Foundation of Saint Paul-Ramsey Hospital is a non-profit public foundation devoted to furthering medical education and research. All staff physicians at Saint Paul-Ramsey Hospital are associated with the foundation.

The purpose of the Foundation is to make its funds available to attract and retain qualified physician teachers and research workers to the staff of Saint Paul-Ramsey, and to fund specific research, education, and community health services in Saint Paul and Ramsey County.

The Medical Education and Research Foundation's funds come from two major sources. First, all physicians' fees charged to patients in Saint Paul-Ramsey Hospital by the full-time, part-time, and attending hospital staff are collected by the Foundation. The Foundation then uses these funds to supplement physicians' salaries and to support much of the work of the Foundation.

Secondly, the Foundation serves as the fiscal agent to receive and administer grants, bequests, and gifts for use at Saint Paul-Ramsey Hospital for education and research programs.

The Foundation is governed by an independent Board of Trustees of nine citizens of Saint Paul and Ramsey County. This Board must approve all Foundation activities. It sets maximum levels of compensation for all physician members and oversees the Foundation's fiscal operations.



## TRUSTEES

### CHAIRMAN:

The Honorable Sidney P. Abramson  
Judge of District Court of Ramsey County  
*Member:* Ramsey County Hospital and  
Sanitarium Commission

### MEMBERS:

Mr. Frank H. Delaney, Jr.  
*Vice President*  
American National Bank & Trust Company

Mr. Cecil March  
*Retired Industrialist*  
*Member:* Ramsey County Hospital and  
Sanitarium Commission

Doctor Lyle Tongen  
*Attending Staff Surgeon*  
Saint Paul-Ramsey Hospital  
*Clinical Assistant Professor of Surgery*  
University of Minnesota

Mr. Lewis Paper  
*Chairman of the Board*  
Paper Calmenson & Company

Mr. Meredith J. Heldridge  
*Division Commercial Manager*  
Northwestern Bell Telephone

Mr. Goodwin S. Anderson  
*Assistant Vice President*  
Northwestern National Bank of Saint Paul

Mr. Richard A. Moore  
*Attorney at Law*  
Moore, Costello and Hart

### EX OFFICIO:

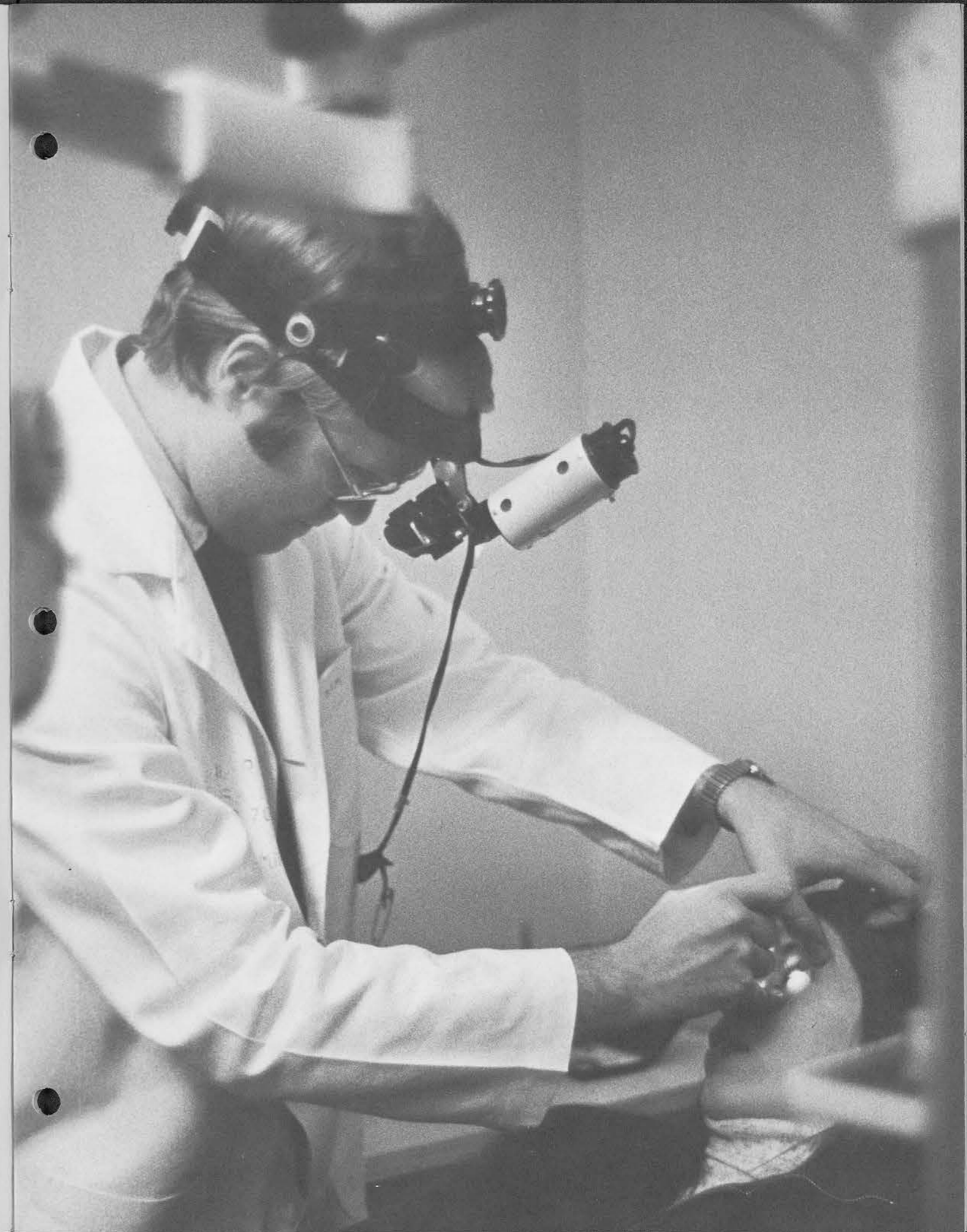
Mr. Michael F. Ettel  
*President*  
Catholic Aid Association  
*Chairman:* Ramsey County Hospital and  
Sanitarium Commission

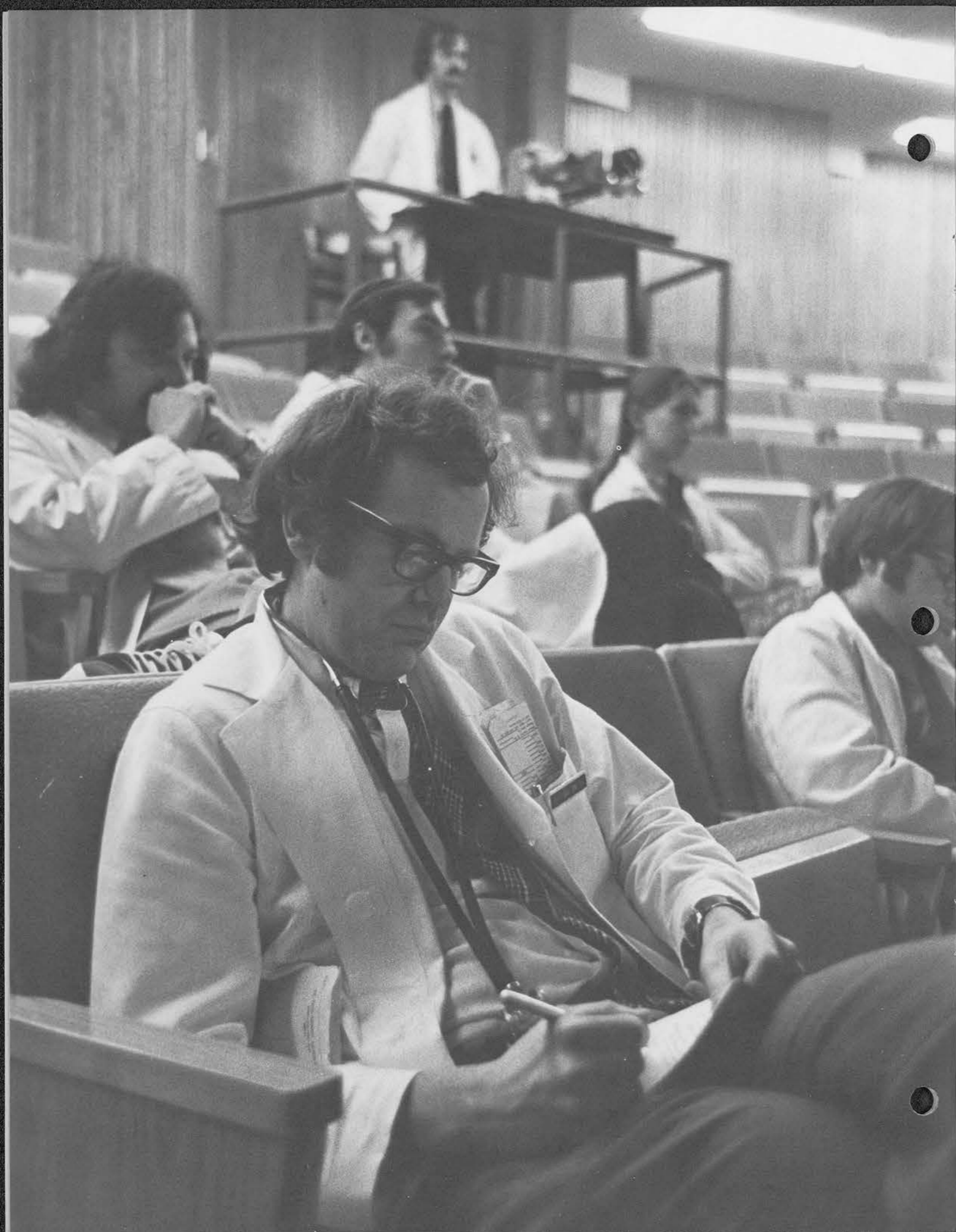
## PATIENT CARE

The purpose of any hospital and medical center is quality patient care. The work of the medical Education and Research Foundation is closely tied to Saint Paul-Ramsey Hospital's in-patient and out-patient care through the doctors themselves. Each Foundation doctor is either a full time, part-time or attending physician on the hospital staff. In all, there are approximately 300 Foundation member doctors working at the hospital.

The Medical Education and Research Foundation helps support patient care at Saint Paul-Ramsey Hospital through its system of salary supplements to physicians and by reimbursing the hospital for the day-to-day operating expenses incurred by the Hospital's medical departments on behalf of the Foundation. In 1972 over one and one-half million dollars of the Foundation's funds were used in this way. These contributions, as well as the individual work of each doctor associated with the Foundation, have helped bring quality health care to the citizens of St. Paul and Ramsey County.

*A Foundation physician examines a young girl's eyes at the ophthalmology out-patient clinic of Saint Paul-Ramsey Hospital.*





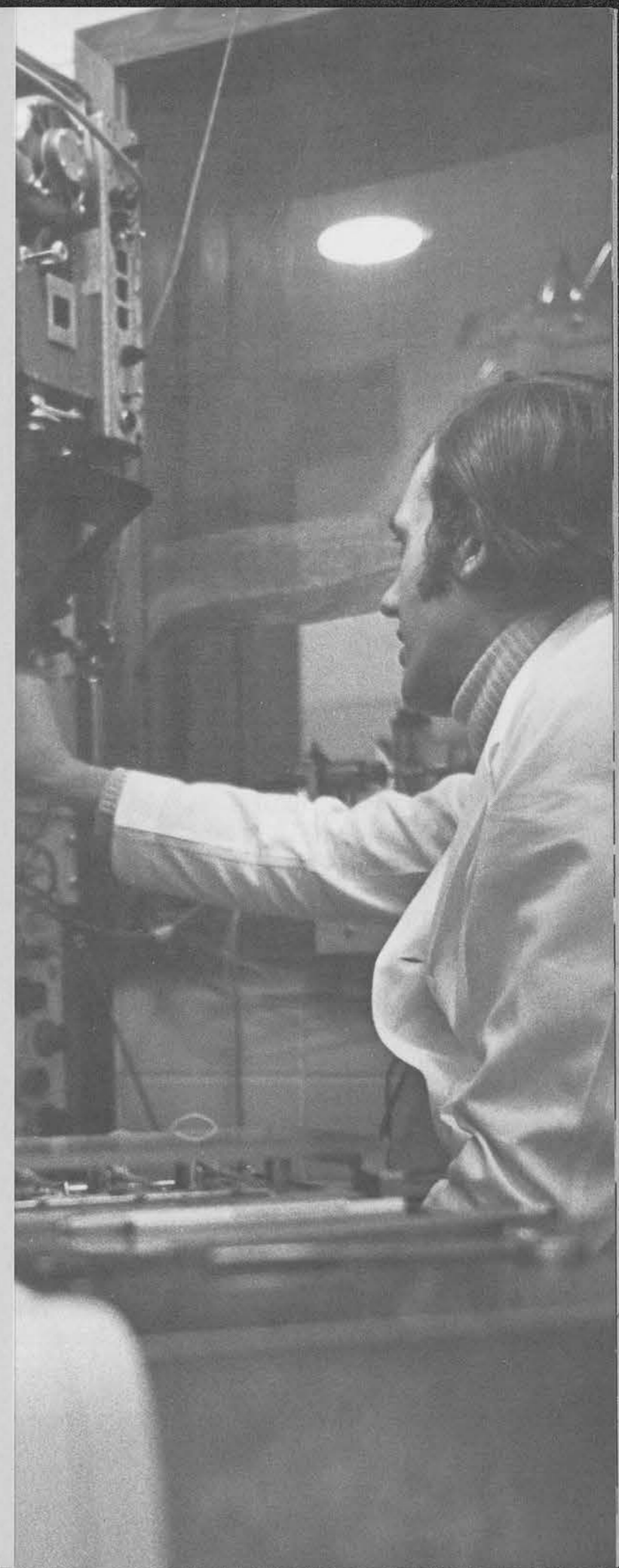
## MEDICAL EDUCATION

Saint Paul-Ramsey Hospital is also a teaching hospital where doctors, nurses, and allied health personnel receive their training. Each senior staff physician holds a teaching appointment from the University of Minnesota as well as at Saint Paul-Ramsey. The senior staff engage in teaching as part of their day-to-day hospital work.

In order that the physicians can continue to bring Saint Paul-Ramsey's medical students up-to-date information in the rapidly changing field of medicine, the Medical Education and Research Foundation contributed almost \$100,000 to the continuing education of staff physicians in 1972.

The Foundation also supported education in 1972 through contributions to the Medical Nursing Library, through fellowships for medical students, and by supporting medical art and photography to be used in classroom teaching. More than \$25,000 was dedicated for these purposes in 1972. In addition the Medical Education and Research Foundation purchased viewing equipment worth over \$28,000 to help in general education programs.

*Resident doctors listen to a lecture on cardiology from a teaching physician. The Medical Education and Research Foundation has contributed toward audio-visual equipment and medical photography to aid in classroom teaching.*





## RESEARCH

A great deal of the Foundation's funds are used to support medical research efforts at Saint Paul-Ramsey Hospital. In 1972 almost \$650,000 was used to pay technicians' salaries, provide equipment and supplies, and to make contributions for research at the hospital.

The Foundation physicians, in addition to their duties in patient care and education, design and carry out medical research as part of their work at Saint Paul-Ramsey Hospital. The Foundation's salary supplements allow each physician to dedicate this portion of his time to research projects. The outcome of this research has been published in an impressive number of articles by Foundation doctors in the past five years and, as a result, Saint Paul-Ramsey Hospital has become known as a center for medical research in the upper-Midwest.

*The neurology research laboratory is only one of the research areas staffed and equipped with Medical Education and Research Foundation funds.*



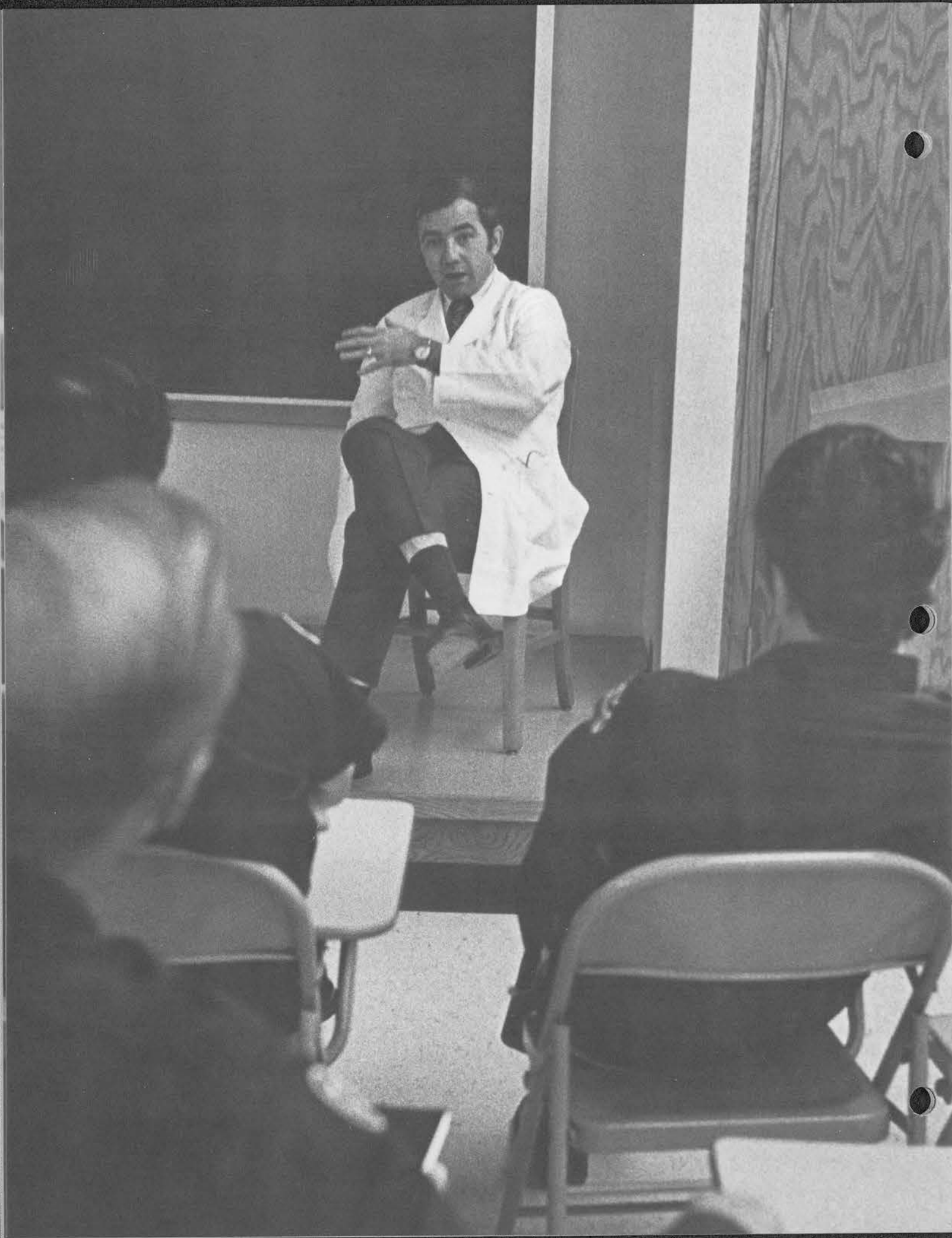
# SAINT PAUL-RAMSEY HOSPITAL MEDICAL EDUCATION AND RESEARCH FOUNDATION

## BALANCE SHEET

YEARS' END NOVEMBER 30, 1972 and 1971

ASSETS	1972	1971	LIABILITIES	1972	1971
<b>CURRENT ASSETS:</b>			<b>CURRENT LIABILITIES:</b>		
Cash .....	\$ 29,062.00	\$ 6,425.00	Accounts payable .....	\$ 8,763.00	\$ 9,876.00
Savings Deposits and Certificates .....	375,237.00	1,253,427.00	Accrued salaries and wages .....	11,262.00	6,679.00
*Receivables—					
Accounts receivable, less allowance for			Total Current Liabilities .....	\$ 20,025.00	\$ 16,555.00
doubtful accounts of \$800,000 in 1972					
and \$1,100,000 in 1971 .....	1,331,138.00	1,801,863.00	<b>DEFERRED REVENUE FROM UNEXPENDED</b>		
Interest Receivable .....	25,574.00	27,755.00	RESTRICTED GRANTS .....	\$ 43,675.00	\$ 44,595.00
Prepaid Expenses .....	44,023.00	34,085.00			
Total Current Assets .....	<u>\$1,805,034.00</u>	<u>\$3,123,555.00</u>	<b>FUND BALANCES:</b>		
			Appropriated—		
<b>SAVINGS CERTIFICATES</b> .....	<u>\$1,894,763.00</u>	<u>\$ 220,246.00</u>	General and research .....	\$2,237,807.00	\$ 289,135.00
			Departmental .....	16,656.00	31,773.00
<b>FURNITURE AND EQUIPMENT, at cost</b> .....	\$ 437,546.00	\$ 236,827.00	Unappropriated—General and research .....	1,774,709.00	3,176,917.00
Less-Accumulated depreciation .....	44,471.00	21,653.00			
	<u>\$ 393,075.00</u>	<u>\$ 215,174.00</u>	Total Fund Balances .....	<u>\$4,029,172.00</u>	<u>\$3,497,825.00</u>
	<u>\$4,092,872.00</u>	<u>\$3,558,975.00</u>		<u>\$4,092,872.00</u>	<u>\$3,558,975.00</u>

\*These balance sheet statistics are reported on an accrued basis.  
The Foundation maintains its internal figures on a "cash" basis.



## COMMUNITY SERVICES

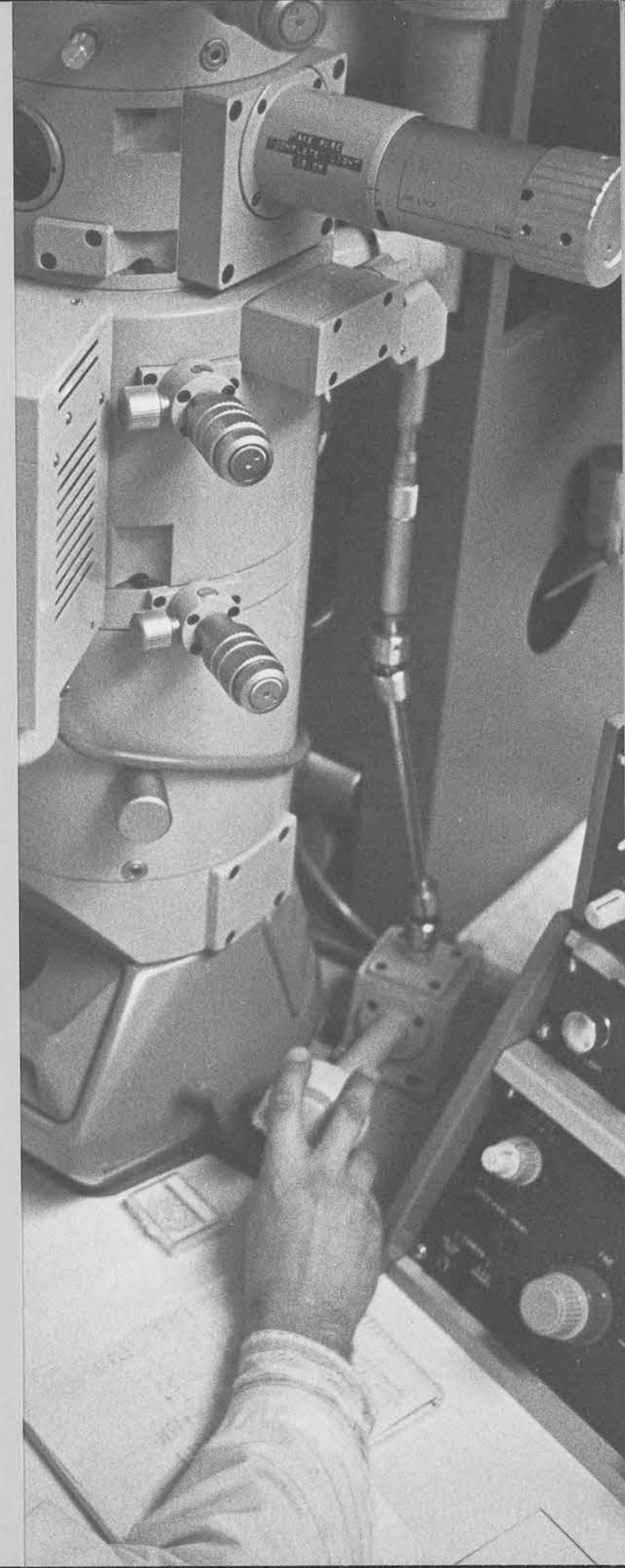
In the past year Saint Paul-Ramsey Hospital and the Medical Education and Research Foundation began several programs to help bring medical outpatient care closer to the patients.

The Family Tree, a companion services clinic in the Midway area of Saint Paul, was one of the first community projects to receive physician services and financial support from the Foundation.

Last year the Foundation contributed towards the growth of three new community service programs; a Family Practice Clinic on the East Side, a community clinic on the West Side, and the Mechanics Arts High School Comprehensive Health and Day Care Center. In addition, the Foundation's community service funds were used to support the community drug forum of the Drug Use and Abuse Program and the Advanced Emergency Aid Seminars at Saint Paul-Ramsey Hospital.

In 1972, \$20,000 of the Medical Education and Research Foundation general fund was dedicated to these community medical services, and, if funds allow, the Foundation plans to double its contribution to other worthwhile community projects in 1973.

*Saint Paul firemen attend classes sponsored by the Medical Education and Research Foundation on emergency care. This session gives important information on treating victims of heart attacks.*

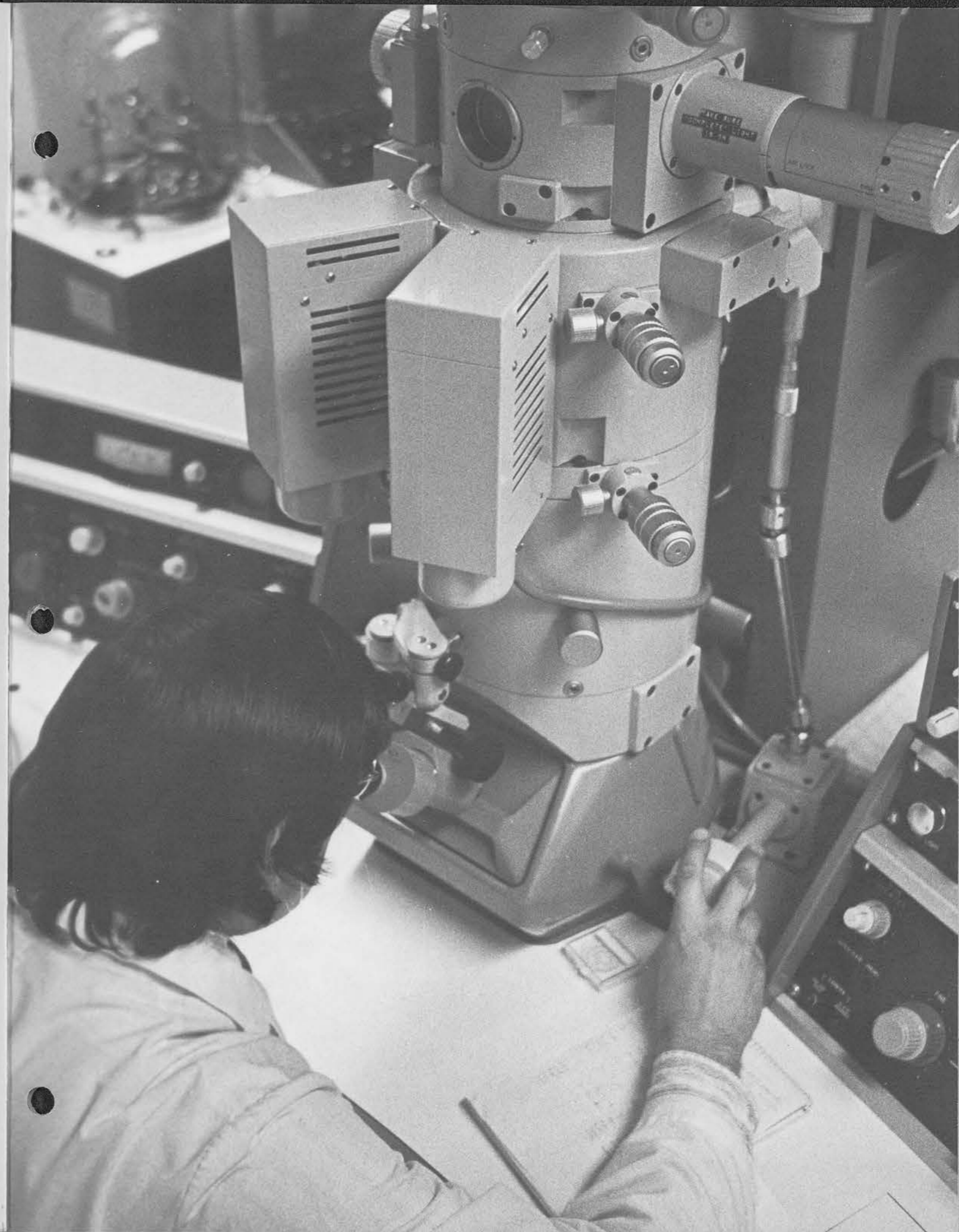


## MEDICAL & RESEARCH EQUIPMENT

Every modern hospital and every medical teaching and research facility requires the equipment and instruments to do its work. The cost of modern equipment has limited some hospitals to only the most necessary equipment for patient care. The Medical Education and Research Foundation, since its start in 1966, has invested almost \$350,000 in medical equipment to be used for the benefit of the hospital, its patients, and for the education and research carried on there.

An example is the electron microscope purchased last year for \$67,000. This microscope, while also a research tool, is used to help diagnose patients' illnesses and in the education of future doctors.

*The electron microscope purchased through Medical Education and Research Foundation funds is used in diagnosis of patients' illnesses and in research.*





# HOSPITAL BUILDING FUND

Since 1966, when the Medical Education and Research Foundation was founded, both the hospital and the physician staff has grown rapidly. New space is needed especially for ambulatory and outpatient care. Because of the close union between the hospital and its physicians, the Foundation members and Board of Trustees believe that any new hospital building should be partially financed by the Foundation. Toward this goal, the Foundation pledged \$2 million toward a new hospital building.

At the end of 1972, the Foundation appropriated \$1,894,000 from their reserve assets for the Foundation building fund. Plans for the new building include major ambulatory care facilities for Saint Paul-Ramsey Hospital, office, parking, laboratory and teaching space for the hospital staff, space for the Foundation business office, and facilities for Gillette State Hospital for Crippled Children. These plans will be presented to the 1973 state legislature.

*Foundation funds supporting education and research at Saint Paul-Ramsey Hospital help bring quality care to the citizens of Saint Paul and Ramsey County.*

# THE FOUNDATION'S GENERAL FUND

Each year 20% of the gross Medical Education and Research Foundation income and any surplus dollars after budgeted expense are transferred to the general fund. Most of the research, education, and community service work of the Foundation is financed through the monies in this general fund.

From the Foundation's beginning in December, 1966 through the fiscal year ended 11/30/72 the general fund has cumulative current assets of \$2,300,000. These assets are currently dedicated as follows:

Research projects, appropriated .	\$ 343,000.00
Dedicated departmental research . . .	16,000.00
Unspent restricted outside research grants . . . . .	47,000.00
Contribution to Saint Paul-Ramsey Hospital building program . . . . .	1,894,000.00
<b>Total . . . . .</b>	<b>\$2,300,000.00</b>

All assets currently in the general fund have been dedicated to research and the building fund. Therefore, the Foundation begins 1973 without a surplus from the year before. However, the 20% of the Foundation's fiscal year 1973 gross income will replenish the general fund by approximately \$700,000. This fund is presently being budgeted for further research, educational, and community service projects.

## MEDICAL DEPARTMENTS AND CHAIRMEN

### AMBULATORY CARE

Dale L. Anderson, M.D.

### ANESTHESIOLOGY

G. Thomas Wier, M.D.

### DENTISTRY

Kenneth Richter, D.D.S.

### DERMATOLOGY

Harold G. Ravits, M.D.

### FAMILY PRACTICE

Vincent R. Hunt, M.D.

### INTERNAL MEDICINE

John W. Frost, M.D.

### NEUROLOGY

Robert J. Gumnit, M.D.

### NEUROSURGERY

Donald L. Erickson, M.D.

### OBSTETRICS & GYNECOLOGY

Erick Y. Hakanson, M.D.

### OPHTHALMOLOGY

Robert Hugh Monahan, M.D.

### ORTHOPEDICS

Thomas H. Comfort, M.D.

### OTOLARYNGOLOGY

Lawrence R. Boies, Jr., M.D.

### PATHOLOGY

Erhard Haus, M.D.

### PEDIATRIC NEUROLOGIST

Robert L. Kriel, M.D.

### PEDIATRICS

Homer D. Venters, M.D.

### PHYSICAL MEDICINE & REHABILITATION

Michael Kosiak, M.D.

### PSYCHIATRY

Vicente B. Tuason, M.D.

### RADIOLOGY

Robert G. B. Bjornson, M.D.

### SURGERY

John F. Perry, Jr., M.D.

### TUBERCULOSIS

Madeline S. Adcock, M.D.

### UROLOGY

Alexander S. Cass, M.B.B.S.

## FULL TIME STAFF MEMBERS

Dale L. Anderson, M.D.

Ismail Barrada, M.D.

Robert G. B. Bjornson, M.D.

Lawrence R. Boies, Jr., M.D.

Brian C. Campion, M.D.

Alexander S. Cass, M.B.B.S.

Thomas H. Comfort, M.D.

Eunice A. Davis, M.D.

Robert A. Derro, M.D.

Raj Dutt, M.D.

Laura E. Edwards, M.D.

Lloyd A. Fish, M.D.

David W. Florence, M.D.

John W. Frost, M.D.

Joseph M. Gacusana, M.D.

Robert P. Gruninger, M.D.

Robert J. Gumnit, M.D.

Erick Y. Hakanson, M.D.

Erhard Haus, M.D.

W. Allen Hauser, M.D.

Ray C. Hippchen, M.D.

James E. Hoffman, M.D.

Vincent R. Hunt, M.D.

Gerald W. Ireland, M.D.

Paul B. Johnson, M.D.

F. Donald Kapps, M.D.

Robert L. Kriel, M.D.

David J. Lakatua, M.D.

Thomas D. Maher, M.D.

Andrew Mallory, M.D.

Donald G. Marsh, M.D.

Robert R. McClelland, M.D.

John A. McLeod, M.D.

Patrick E. Mottram, M.D.

Albert Mowlem, M.D.

Po Myaya, M.D.

John F. Perry, Jr., M.D.

Robert D. Pilgrim, M.D.

Zoltan Posalaky, M.D.

Frank W. Quattlebaum, M.D.

Manuel Ramirez-Lassepas, M.D.

Jose C. Reyes, M.D.

Jose B. Romero, M.D.

Kusum Saxena, M.D.

John M. Scanlan, M.D.

Michael T. Spilane, M.D.

Richard G. Strate, M.D.

Claude R. Swayze, M.D.

Luigi Taddeini, M.D.

Richard R. Teeter, M.D.

Vicente B. Tuason, M.D.

Robert A. van Tyn, M.D.

Homer D. Venters, M.D.

Norman L. Virnig, M.D.

Thomas E. Weier, M.D.

G. Thomas Wier, M.D.

Daryl P. Williamson, M.D.

Bertram F. Woolfrey, M.D.

Pradub Sukhum, M.D.

## PART TIME STAFF MEMBERS

Madeline S. Adcock, M.D.

John E. Bergstedt, M.D.

F. Blanton Bessinger, M.D.

Irene Duckett Cass, M.D.

Donald L. Erickson, M.D.

Manuel O. Jaffe, M.D.

Yale C. Kanter, M.D.

Michael Kosiak, M.D.

J. Curtis Kovacs, M.D.

Robert Hugh Monahan, M.D.

Donald H. Peterson, M.D.

Kenneth J. Richter, D.D.S.

Charles L. Roach, M.D.

Jon P. Tierney, M.D.

Elliott V. Troup, M.D.

Max E. Zaring, M.D.

## ATTENDING STAFF MEMBERS:

Frank A. Adair, M.D.

Harold R. Adams, M.D.

John F. Alden, M.D.

Robert L. Altman, M.D.

David W. Anderson, M.D.

Stanley J. Antolak, Jr., M.D.

Frederick D. Arny, M.D.

Peter D. Arny, M.D.

David B. Auran, M.D.

Sol Austrian, M.D.

Gary H. Baab, M.D.

Frank S. Babb, M.D.

Thomas C. Bagnoli, M.D.

Walter L. Bailey, M.D.

Eugene L. Bauer, M.D.

William J. Bergstrom, M.D.

Charles S. Bland, M.D.

Henry B. Blumberg, M.D.

John B. Brainard, M.D.

John J. Breen, M.D.

William S. Brennom, M.D.

James A. Brockberg, M.D.

Christopher J. Brown, M.D.

John M. Brown, M.D.

Martin G. Bruhl, M.D.

Roger J. Burke, D.D.S.

John M. Burns, M.D.

Manuel Bustos, M.D.

Conrad S. Butwinick, M.D.

Terrance D. Capistrant, M.D.

Richard B. Carley, M.D.

David J. Chizek, M.D.

Byron B. Cochrane, M.D.

Roger S. Colton, M.D.

Coleman J. Connolly, M.D.

David M. Craig, M.D.

Barclay M. Cram, M.D.

Charles E. Crutchfield, M.D.

John A. Culligan, M.D.

Donald D. Dahlstrom, M.D.

Alfred E. Daly, M.D.

Donald E. Derauf, M.D.

James P. Dunn, M.D.

Everette J. Duthoy, M.D.

Jesse E. Edwards, M.D.

Phillip L. Edwardson, M.D.

Vincent E. Eilers, M.D.

Cassius M. C. Ellis, M.D.

Ronald W. Ellis, M.D.

Rodney W. England, M.D.

Rolf R. Engel, M.D.

John D. Farr, M.D.

John G. Fee, M.D.

Davitt A. Felder, M.D.

Robert S. Flom, M.D.

Richard T. Foreman, M.D.

John J. Galligan, M.D.

Walter P. Gardner, M.D.

Robert W. Geist, M.D.

Joseph L. Gendron, M.D.

Delmar R. Gillespie, M.D.

William R. Glenny, M.D.

Leonard W. Goldman, M.D.

Bernard Goott, M.D.

Patrick J. Griffin, M.D.

Ernest M. Hammes, Jr., M.D.

Donald W. Hannon, M.D.

Max E. Harris, M.D.

Charles W. Hauser, M.D.

Frank G. Hedenstrom, M.D.

Wilbert J. Henke, M.D.

James S. Henry, M.D.

Donald W. Herrick, M.D.

Mark I. Hewitt, M.D.

Jerome A. Hilger, M.D.

Jane E. Hodgson, M.D.

Albert Hohmann, M.D.

George C. Hottinger, M.D.

Rollin J. Houle, M.D.

John R. Hoyer, M.D.

Donald B. Hunninghake, M.D.

Samuel W. Hunter, M.D.

Archie Hurwitz, D.D.S.

Thomas L. Huseby, M.D.

Kjeld O. Husebye, M.D.

Roscoe P. Hylton, D.D.S.

Linneus G. Idstrom, M.D.

Harry S. Jacob, M.D.

Maynard E. Jacobson, M.D.

James Janecek, M.D.

Martin E. Janssen, M.D.

Rupert M. Jastram, M.D.

Alan R. Johnson, M.D.

Herbert W. Johnson, M.D.

Rodger L. Johnson, M.D.

Everett H. Karon, M.D.

Irvine M. Karon, M.D.

Joseph R. Kelly, M.D.

Roy C. Knowles, M.D.

James D. Kramer, M.D.

Brian M. Krasnow, M.D.

Thomas K. Krezowski, M.D.

Bradley W. Kusske, M.D.

Douglas R. Kusske, M.D.

Roswith I. Lade, M.D.

James W. LaFave, M.D.

Randall A. Lakosky, M.D.

Ronald M. Lampert, M.D.

Bernard G. Lannin, M.D.

Kevin M. Lawler, M.D.

Dennis M. Leahy, M.D.

Richard O. Leavenworth, Jr., M.D.

Hsien-Hwa Hsieh Lee, M.D.

Lloyd L. Leider, M.D.

Stanley A. Leonard, M.D.

Irving J. Lerner, M.D.

John I. Levitt, M.D.

Michael D. Levitt, M.D.

Robert E. Lindell, M.D.

Michael Lobell, M.D.

Thomas A. Love, M.D.

Murray W. Luffkin, M.D.

Richard G. Lunzer, M.D.

Raymond P. Lynch, M.D.

Edward C. Maeder, Jr., M.D.

J. Anthony Malerich, Jr., M.D.

John M. Matsen, M.D.

Charles Manlove, M.D.

John W. McBride, M.D.

Charles McCafferty, M.D.

Donovan L. McCain, M.D.

Charles J. McCarthy, M.D.

C. Naumann McCloud, M.D.

James McClellan, M.D.

Gerald D. McEllistrem, M.D.

Burtis J. Mears, M.D.

Fred E. Mecklenburg, M.D.

Phyllis R. Meloff, M.D.

Robert L. Merrick, M.D.

Michael A. Messenger, M.D.

Ramon Milan, M.D.

A. Fletcher Miller, M.D.

Winston R. Miller, M.D.

Zondal R. Miller, M.D.

Ernesto Molina, M.D.

Jurgen J. Moller, M.D.

Beatrice A. Mulford, M.D.

Frederick M. Neher, M.D.

C. Randall Nelms, M.D.

Loren E. Nelson, M.D.

Louis A. Nelson, M.D.

Kenneth O. Nimlos, M.D.

David D. Norman, M.D.

ST. PAUL-RAMSEY HOSPITAL MEDICAL EDUCATION AND RESEARCH FOUNDATION

*Business Office:* 529 Jackson Street  
Saint Paul, Minnesota 55101  
(612) 224-5407

*Hospital Office:* 640 Jackson Street  
Saint Paul, Minnesota 55101  
(612) 222-4260

# Education & Community Service Programs

Section 5

## 5. EDUCATION AND COMMUNITY SERVICE PROGRAMS

The following pages include departmental summaries of the various educational and community service programs carried on at the hospital. Education and community service are important functions that aid the hospital in dissemination of medical knowledge and services to the community at large. Also included in these pages are statistics on the number of patients treated by each department plus a reference to research programs where appropriate.

DEPARTMENT OF AMBULATORY CARE

Chief: Doctor Dale L. Anderson

This department encompasses the Emergency Unit, the Walk-in Clinic, Employees' Health Services, Evening Clinics for Routine and Civil Service Physicals, and provides the staffing for the Ramsey Health Plan, Inc. The nature of this department makes it the primary window for the public to view the hospital's community service. The department strives to develop an outpatient health care delivery system that is readily accessible and acceptable to the patient at the lowest possible cost and, within this system, to conduct quality educational programs.

Patients presenting to the Emergency Unit are triaged into one of four areas; surgery-trauma, medicine, pediatrics or the Walk-In Unit for minor illnesses or follow-up. The Emergency Unit is the primary receiving center for major trauma in the East Metropolitan area. It also serves many corporations, organizations, including the St. Paul Fire Department, as the primary treatment center for work-related injuries. The department maintains radio contact with ambulances and fire departments for emergencies within the metropolitan community. It is the only emergency room in the Twin Cities area which has 24-hour a day medical staff coverage.

The Director of the Emergency Unit conducts Advanced Emergency Aid Classes for members of the Fire Departments, Police Departments, Ski Patrols, Security Guards and like personnel once every year. Medical, Nursing and pharmacy students receive training in this unit also. Interns at SPRH spend two months of their intern year in the department. A training program for paramedics is conducted in this department for the St. Paul Fire Department. Staff physicians in the department frequently instruct and lecture on emergency care

throughout the state. Members of the department are also involved in the industrial medicine product development being researched at the 3M Company. Physicials are available in the Evening Clinics by appointment for job physicals, athletic physicals, DVR referrals, etc. A.S.L.I.M. Clinic is available by appointment for patients wishing to lose weight. The department provides weekly nursing home visits by one of the staff physicians for all St. Paul-Ramsey Hospital patients who are in a nursing home.

The Poison Control and Information Center for Ramsey County is headquartered in the Emergency Unit. Close contact is maintained with the St. Paul Bureau of Health regarding control of venereal disease, tuberculosis, etc.

During the first six months of 1973, the department provided treatment for 36,014 patients in the Emergency Unit (including the Walk-In Clinic) and 44,981 in the Outpatient Department, a total of 80,995. In addition, 1,781 patients were seen in the Evening Clinics.

DEPARTMENT OF ANESTHESIOLOGY

Chief: Dr. G. Thomas Wier

This department provides patient care and education within the areas of inhalation anesthesia, regional blocks and pulmonary function evaluation.

Interns rotate through the department on an elective basis.

Surgery medical students are assigned to the department for two-week periods and the department regularly has eight student nurse-anesthetists enrolled in an accredited two-year program.

These nurse-anesthetists are paid a stipend of \$250 per month and are eligible to be certified by the American Association of Nurse Anesthetists upon the successful completion of the program.

Doctor Wier participates in the teaching of anesthesia at the University. He and other members of the department conduct and participate in anesthesiology conference seminars, nurse-anesthetist conferences, anesthesiologist lectures and other educational endeavors throughout Minnesota and adjacent states.

During the first six months of 1973, 2,149 anesthetic procedures were conducted. The department also serves as the Department of Anesthesiology for the Gillette State Hospital and Divine Redeemer Hospital.

DEPARTMENT OF DENTISTRY

Chief: Doctor Kenneth J. Richter

The Department of Dentistry has one third-year resident at SPRH on a four-month rotation from the University of Minnesota School of Dentistry, Division of Oral Surgery. The resident is supervised by a part time staff, the director of whom is an associate professor of oral surgery in the School of Dentistry at the University.

The scope of dentistry offered is limited to oral surgery because of the limitation in staff and facilities. Plans for the possible expansion of the educational program and patient care service are currently being discussed by the Faculty Steering Committee's subcommittee on long range planning.

During the first six months of 1973, the department provided treatment for 1,239 outpatients and 22 inpatients for which the Department of Otolaryngology provided the medical supervision.

In addition, the Department of Dentistry provided surgical treatment for 16 maxio-facial trauma patients.

DEPARTMENT OF DERMATOLOGY

Chief: Doctor Harold G. Ravits

The Department of Dermatology has two residents on a six-month rotation from the University of Minnesota Medical School, Department of Dermatology. The professor and head of the department at the University is a member of the SPRH voluntary attending staff. A part time assistant professor provides ongoing supervision. Medical education for up to twenty medical students is carried on with clinics and conferences scheduled for a full day once a week. The department is involved in the Saint Paul Health Department's VD screening clinic on a consultative basis. It also provides the same service for the Family Tree, Inc. Attending staff dermatologists will conduct outpatient dermatology consultations twice monthly at the Stillwater Prison. Members of the department participate in the training of Family Practice residents. During the first six months of 1973, the department treated 17 inpatients and 2,116 outpatients.

## DEPARTMENT OF FAMILY PRACTICE

Chief: Doctor Vincent R. Hunt

The Department of Family Practice is responsible for the education of eight interns and fourteen residents. Its main teaching facility is a model neighborhood clinic located on the lower East Side of St. Paul. Comprehensive health services are provided to the residents in this medically disadvantaged area. In addition, the department is responsible for the care of patients in a Mexican-American community satellite clinic on the West Side of St. Paul and for the ambulatory health care of approximately 1,500 prisoners per year in the Ramsey County Workhouse and approximately 8,000 per year in the Ramsey County Jail.

Plans are being finalized for a senior citizens high-rise project several blocks from the model clinic. Members of the department are also responsible for teaching medical students in Phases A, B, and D. The department is active in developing ambulatory care records systems, researching health care delivery needs, working closely with community representatives to assure a cooperative approach towards health care and development of nurse practitioners. During the first six months of 1973, the Department provided treatment for 726 patient visits at the West Side Clinic, 1,576 patient visits at the East Side Clinic, and it is anticipated they will be handling 50 patient visits per week upon completion of the new East Side High Rise for senior citizens.

For a description of the development of this program, see section 6.

DEPARTMENT OF MEDICINE

Chief: Doctor Robert O. Mulhausen

Within the Department of Internal Medicine, patient care service, education and research is supervised by ten full time staff physicians. At any given time 10 interns and 10 junior residents participate in general medical activities within the Department and seven senior residents and fellows participate in subspecialty activities (hematology, endocrinology, pulmonary and cardiology). Throughout the year the Department of Internal Medicine is responsible for the education of 24 Phase-A medical students, 20 Phase-B medical students and 48 Phase-D medical students.

The Department has a major commitment to activities in the outpatient area with approximately 35% of its effort directed to clinic service. The Department conducts daily general medicine clinics and in addition provides service through 11 different subspecialty clinics.

The Department is also responsible for the treatment of tubercular patients in Ramsey County and accepts patients from other counties by referral. An active outpatient Tuberculosis Clinic is maintained.

In addition to the standard inpatient and outpatient activities, the Department of Internal Medicine is also involved in numerous additional service and education endeavors both within the hospital and within the community:

- Supervision of training program at St. Paul-Ramsey Hospital for inhalation therapy technicians.

- Participation in education of dietetic interns.

- Inservice education of nurses, nursing students.

- Supervision of special education program and rehabilitation program for coronary patients and their families.

- Intensive care nursing training program at St. Joseph's (lectures and demonstrations).
- Mobile Emergency Care System (supervision of program and education of firemen participants).
- Ramsey County Tuberculosis Association participation in pulmonary rehabilitation program at St. Luke's Hospital and smoking education program for grade school children and adults at St. Paul-Ramsey Hospital and other community location.
- Individual members of the full time staff in the Department of Internal Medicine provide medical care at the Lake Owasso Home for Retarded Children and sit on advisory boards for community free clinics.

During the first six months of 1973, the department provided treatment for 1,475 inpatients (including tuberculosis) and 9,239 outpatients (including TB).

DEPARTMENT OF NEUROLOGY

Chief: Robert J. Gumnit, M.D.

Educational programs are conducted for occasional Phase A medical students, six phase B medical students, four to six Phase D medical students, three residents in adult neurology, often for two neurology residents in their special rotation in EEG, and one resident on a pediatric neurology rotation. In addition there are a post-doctorate research student, a social work student and students from the School of Pharmacy on their clinical rotations, student nurses and diabetic interns. The five members of the Department are active in all phases of the University of Minnesota educational programs and serve on many University educational committees. The department is also very active in the various St. Paul-Ramsey Hospital inservice training programs, lecture courses, etc. We lecture regularly to the Ramsey Hospital first aid course, and to medical society, first aid courses and hospital inservice programs throughout the state. The Department serves as the Department of Neurology at the Gillette State Hospital and frequently receives requests to serve as consultants at other St. Paul hospitals. In addition we provide consultation and are active in the direction of the Minnesota Epilepsy League and other voluntary health agencies.

An active research program is maintained in the causes and treatment of stroke and into the basic physiology as well as the causes of treatment of epilepsy. Members of the Department are active in the national societies dealing with neurology and related areas and participate regularly in national meetings.

During the first six months of the year 1973, the department provided treatment for 410 inpatients and 1,624 outpatients. Also 250 inpatients were seen in consultation to other services; 175 special diagnostic operative procedures were performed and the EEG laboratory examined 950 patients.

#### Section of Pediatric Neurology

The section of pediatric neurology is a joint responsibility of the departments of neurology and pediatrics. Pediatric residents from St. Paul-Ramsey and neurology residents receiving instruction in the problems of children are trained on the service. Medical students assigned to pediatrics also see these patients.

Dr. Kriel and other members of the neurology department serve as the neurology department for the Gillette Childrens Hospital also are called into consultation at St. Paul Children's Hospital.

Special clinics for the neurologic problems of children, especially seizure, retardation and genetic defects, are run at St. Paul-Ramsey and at Gillette.

DEPARTMENT OF NEUROSURGERY

Chief: Doctor Donald L. Erickson

The Department of Neurosurgery at SPRH provides neurosurgical care and consultation for inpatients and outpatients of the hospital. Instruction is provided for residents from the Department of Surgery who rotate through the department. Residents from the Family Practice program may also participate in this manner. Neurosurgical Fellows from the Mayo Clinic and the University of Minnesota may serve elective rotations in the department. In addition, medical students rotating through SPRH may elect to spend time in neurosurgery. The department actively participates in joint teaching programs at the hospital, such as combined neurology/neurosurgery conferences in clinical areas in the neurosciences, neuroradiology, neuropathology and other related fields. Through such combined programs, medical students, resident and allied health science professionals from other departments at SPRH and affiliated hospitals are exposed to neurosurgical principles. During the first six months of 1973, the department provided treatment for 148 inpatients and 268 outpatients.

DEPARTMENT OF OBSTETRICS AND GYNECOLOGY

Chief: Dr. Erick Y. Hakanson

On an outpatient basis, this department is responsible for approximately 23 clinics per week, both within and outside of the hospital and in the evenings. We actively participate in the care of Ramsey Health Plan patients and see patients by consultation from the outside at any time. In the Department as a whole, we see in excess of 2,000 patients monthly. We do 595 operative procedures a year, of which 371 are considered major. An important part of the Department's surgery is in the field of cancer.

The Department has four Phase B students and four to six Phase D students continuously. In addition to this, there are approximately six advanced Phase D students per year in the Department. The Department has two Rotating 3 interns on the service at any given time. In addition, the Department has its own four-year, accredited training program for obstetrics and gynecology. We take two residents each year into the program. We are also involved in periodic individual training of students in various paramedical and other health related fields, such as social work, sociology, and health education.

The Department has a Maternal-Infant Care Project which is federally financed and is connected with the St. Paul Bureau of Health. This project provides comprehensive obstetrical care to low income and out-of-wedlock patients. The clinics are held at St. Paul-Ramsey, Martin Luther King Center, St. Paul Bureau of Health, and the Neighborhood House. We also are currently working on combined Family Planning Project with the St. Paul Bureau of Health which involves a comprehensive approach to family planning and all of its

aspects. In addition, we have had, since 1966, a Pap smear clinic offering free Pap smears to patients and a comprehensive follow-up. The Department also runs a special teenage counseling clinic. In addition we provide medical consultation and professional services to the St. Paul Bureau of Health, Family Tree, Inc., and Planned Parenthood.

We have also been successful in beginning a health care clinic at Mechanic Arts High School.

#### Research

Our research projects are at present as follows:

Egg enzymology and Biochemistry of Fertilization

Relationship between Oral Contraceptives, the Pap smear,  
and Carcinoma of the Uterus.

Development of a New Amniocentesis Needle

Effects of Alcohol on Pulmonary Surfactant in Rabbits

Effects of Amniotic Fluid Contamination with the Vagina  
on the L/S ratio.

## DEPARTMENT OF OPHTHALMOLOGY

Chief: Doctor Robert Hugh Monahan

The Department of Ophthalmology has three residents on rotation from the University of Minnesota Medical School, Department of Ophthalmology, and one or two Phase D medical students at any given time. They also have fifteen Phase B medical students once a week. The department conducts an accredited two-year school for ophthalmological technicians (twenty-five first year students and nineteen second year externs). The department also conducts a target area ophthalmology clinic and glaucoma screening clinics which are included in the education program. Members of the department provide consultation for the Anoka State Hospital, Stillwater Prison and Minnesota Veterans Home. Special eye case patients are referred to SPRH from Children's Hospital. The ophthalmology faculty assists in the training of Physician Assistants in the Fire Department. Three members of the faculty participate in and direct the Ophthalmic Pathology Laboratory at the University of Minnesota. Doctor Monahan also provides consultation on a regular basis to the Minnesota State Services for the Blind, Pre-School Medical Survey, St. Paul School Health Advisory Council, Minnesota Society for the Prevention of Blindness and the Governor's Committee on Employment of the Handicapped.

For the first six months of 1973, the department treated 80 inpatients and 4,201 outpatients.

DEPARTMENT OF ORTHOPEDICS

Chief: Doctor Thomas H. Comfort

The Department of Orthopedics has three orthopedic residents who rotate here from the Veterans Administration Hospital and the University of Minnesota Medical School, Department of Orthopedics, plus one resident on rotation from the Department of Surgery at SPRH. Interns rotate through the department on an elective basis and medical students may elect to come here on six-week rotations. An affiliation with the Kirkwood Community College of Cedar Rapids, Iowa has been established for the training of orthopedic assistants. A total of twelve students will receive clinical orthopedic training in the Emergency and Operating Rooms. Orthopedic department personnel contribute in part to the advanced course in first aid conducted twice a year by the staff of the SPRH Department of Ambulatory Care for ambulance and emergency vehicle drivers, nurses, industrial personnel, etc. Members of the department also contribute time and service on a regular basis to the Gillette State Hospital and will be involved in providing health care to the inmates of the Stillwater Prison.

During the first six months of 1973, the department has provided treatment for 596 inpatients and 4,242 outpatients.

DEPARTMENT OF OTOLARYNGOLOGY

Chief: Doctor Lawrence R. Boies, Jr.

The Department of Otolaryngology has three residents on rotation from the University of Minnesota Medical School, Department of Otolaryngology (one second-year, one third-year and one fifth-year resident). There are one-two Phase D medical student clerks present at all times. A consulting audiologist is present in the Otolaryngology clinic one day a week who is involved in the training of a graduate student from the University at that time. A two-month rotation is offered to each third-year Family Practice resident. The department provides the majority of the outpatient Ear, Nose & Throat care at the Stillwater Prison. In addition, a relatively large number of minor surgery Ear, Nose & Throat cases are operated upon at the prison hospital. Finally, the department provides consultation for the Ramsey Health Plan and Gillette State Hospital in the field of otolaryngology.

For the first six months of 1973, the department treated 295 inpatients and 2,738 outpatients.

DEPARTMENT OF PATHOLOGY

Chief: Doctor Erhard Haus

The Department of Pathology currently has seven residents and will add one on October 1st, 1973. Interns rotate through the department on an elective basis. University of Minnesota medical students are currently participating in electives in pathology and endocrinology. Electives in hematology and clinical chemistry are also offered. The department has two Rotating 5 (pathology emphasis) interns and one medical student fellowship (three months at a time). The department is affiliated with Hamline University in a three-year accredited laboratory technician training program. Fifteen students are here for their one year internship (they must first complete two years of basic science education at Hamline). Upon completion of the three-year program, they are eligible for certification by the American Society of Clinical Pathology and a Bachelor Degree in Medical Technology.

The Department is involved in interdepartmental conferences with medical students at SPRH. In addition, Doctor Haus conducts five core lectures for 220 Phase B students at the University of Minnesota Medical School, Department of Pathology, Doctor Lakatua conducts six electives for 220 Phase B students and Doctor Kapps teaches a course in hematology at the University. We also offer our own elective in morphologic hematology at SPRH. The department provides community service by processing PAP smears and VDRL tests for the St. Paul Bureau of Health.

During the first six months of 1973, the department processed 282,838 inpatient laboratory requests and 113,721 outpatient laboratory requests.

Chief: Dr. Homer D. Venters

During the first six months of 1973, the department has treated 425 inpatients, 337 newborns and 4,878 outpatients. The department has three residents on rotation from the University of Minnesota Medical School, five interns (two rotation four with pediatric emphasis, and two or three rotation 0 with mixed emphasis), six Phase B medical students and three Phase D medical students plus an occasional senior elective. Dr. Venters, Chief of the department, was co-founder of the pediatric nurse practitioner program, Division of Nursing, School of Public Health. The department is involved in the teaching of pediatric nurse associates through this program. Social work students are also involved in our pediatric programs. Saint Paul-Ramsey Pediatrics is involved in a combined program with Children's Hospital in both undergraduate and postgraduate level conferences. The program includes education in child abuse and treatment of rheumatoid patients. Dr. Venters is involved in the Dial-Access program which makes tapes available for postgraduate education and the rheumatology continuation course for physician education. Members of the department are active in the SPRH/Community Mental Health Battered Child Team, the Maternal Infant Care Clinic. They also provide service and care on a regular basis to patients of the Gillette State Hospital and accept patients referred frequently by the Saint Paul School System.

The department is currently in the process of establishing a teenage counseling clinic at the Mechanic Arts High School. A neonatal intensive care unit has recently been established and a maternal high-risk program is planned by obstetrics.

### Child Development Section

The Child Development Section, Department of Pediatrics, offers a comprehensive, usually out-patient, evaluation to children from birth to about adolescence. Our patients typically have abnormal or retarded physical, intellectual and/or neurological development. We follow pre-school children yearly or more often, after the initial evaluation is completed. School children may be followed, if indicated, after the initial evaluation.

### Section on Pediatric Neurology

This is a joint program with the Department of Neurology and is described under that heading.

## DEPARTMENT OF PHARMACY

Director: Mr. Leonard Lang

The Department of Pharmacy is involved in a formal affiliation between the College of Pharmacy and the School of Health Sciences. One pharmacy intern is present at all times. Twenty students rotate through the hospital from the College of Pharmacy per quarter for five weeks at a time. The program is also offered on an elective basis. It is conducted by Mr. Leonard Lang, Director of Pharmacy and Doctors Martin Jinks and William Parker, Assistant Professors at the University of Minnesota College of Pharmacy who are at the hospital on a half-time basis.

The department is involved in a pairing program with interns and medical students in the Department of Medicine. Inservice education is offered to Neurology and Psychiatry nurses and staff, and Neurology-based physicians, while patient drug education programs are in the implementation stage for neuro-psychiatric inpatients. Inservice education is also offered to dietetic interns and coronary care nurses. Lectures in pharmacology are offered to the Ancker School of Nursing. The department participates in drug abuse programs through the School of Public Health. The department also participates in patient education through the HEART program conducted by the hospital.

For the first six months of 1973, the department filled 51,295 inpatient and stock prescriptions and 71,109 outpatient prescriptions (42,366 ER & OPD, 19,899 refills and 8,844 take-home).

DEPARTMENT OF PHYSICAL MEDICINE AND REHABILITATION

Chief: Doctor Michael Kosiak

The Department of Physical Medicine and Rehabilitation has one student each quarter in Physical Therapy which is a four-year course at the University of Minnesota. The department has two students in Occupational Therapy. These students are enrolled in a four-year course and come here for a three-month rotation. The department is also involved in the education of occupational and physical therapy assistants sponsored by the Junior College system. Such students serve a five-week rotation and pay tuition at their "home" school. Senior students treat patients under supervision and this treatment is a chargeable item to the patient. St. Paul-Ramsey Hospital nursing students also rotate through the department but their involvement is limited to observation. They accompany patients to therapy and attend rounds. Dietetic interns also attend rounds but no formal education program is provided.

Doctor Kosiak provides community service by way of acting as medical consultant to the 3M and American Hoist and Derrick Companies and conducting classes in proper use of the back. He also provides instruction to residents in the Family Practice program at St. Paul-Ramsey Hospital and at St. John's Hospital, and Physical and Occupational Therapy students from the University on rotation at St. John's. During the first six months of the year, the department provided treatment for 117 inpatients (4,302 visits) and 1,073 outpatient visits.

## DEPARTMENT OF PSYCHIATRY

Chief: Doctor Vicente B. Tuason

The Department of Psychiatry conducts and provides educational programs in the adult inpatient psychiatry, child psychiatry, the mental health center, and chemical dependency service and the St. Paul Drug Rehabilitation Center.

Undergraduate and postgraduate medical education is carried out under the health science affiliation with the University of Minnesota. A clinical educational program in concert with the medical school curriculum is provided for all phases of the undergraduate medical education. A psychiatric residents program has begun with four first-year residents in attendance as of July 1, 1973. Field placements of social work students are available. The department regularly has at least one student in each discipline on a quarterly, biannual or yearly assignment.

The department also cooperates in the training of nursing students and mental health workers.

The Clinical Dependency Service has an active educational curriculum solely devoted to an internship for those seeking completion of a counseling certificate.

During the first six months of 1973, the department provided treatment for 1,077 inpatients and 13,256 outpatient visits.

DEPARTMENT OF RADIOLOGY

Chief: Dr. Robert G. B. Bjornson

The Department of Radiology provides services in radiographic and fluoroscopic x-ray diagnosis; x-ray, cobalt and radium treatment; nuclear medicine (radioactive isotope) diagnosis and treatment; and, beginning this year, in ultrasonic diagnosis. In a "special procedures" section of the department, located close to the operating rooms on the hospital's third floor, the Department of Radiology provides highly specialized studies of the heart, blood vessels and central nervous system.

The physician staff includes, five full time physicians, and one who serves on an 80% basis as of September 1, 1973. There are four part time physicians and another who is a consultant in nuclear medicine. All of these physicians are specialists, certified by the American Board of Radiology. In addition, a radiation physicist provides part time services to the department and serves as the Radiation Safety Officer of the hospital.

Diagnostic and treatment services for the Family Practice Health Center in St. Paul's East Side are provided by this department. A staff radiologist visits that clinic two or three times weekly for film reading conferences with the clinic staff. Referrals for specialized studies or treatment are made to the hospital department.

Members of the Department of Radiology staff are also involved in other medical activities of importance to the community. The chief of the Department of Radiology serves on the Admissions Committee of the University of Minnesota Medical School. He is a member of the subcommittee on Alcoholism and Drug Abuse of the Minnesota State Medical Association; a member of the board of Drug Education for

Youth in St. Paul; and he is co-director of the Health Professionals Drug Abuse Education Project, a three-year educational project funded by the National Institute of Mental Health and involving health professionals in Minnesota, North Dakota, South Dakota and parts of Iowa and Wisconsin. He started and is currently responsible for the Fortnightly Forum on Drugs, a program carried on at Saint Paul-Ramsey Hospital and funded by the Medical Education and Research Foundation, to provide a source of ongoing drug education for the community.

Saint Paul-Ramsey Hospital's Department of Radiology is a part of the specialty training program in radiology of the University of Minnesota, and two or three radiology residents are regularly assigned to this department. In addition, the department offers a regular elective course in diagnostic radiology for Phase D students in the University of Minnesota Medical School.

A training school for radiologic technologists is now under serious consideration perhaps to start in 1974.

During the first six months of 1973 the department conducted 14,857 inpatient procedures and 24,248 outpatient procedures.

DEPARTMENT OF SURGERY

Chief: Doctor John F. Perry, Jr.

The Department of Surgery has four full time staff members, 29 attending staff members and 13 resident surgeons in an independent accredited residency training program. Three residents complete the program each year. Three to five interns are assigned to the Service at any given time as are six or seven Phase D medical students who are assigned surgical electives at the hospital. The department maintains a research laboratory as part of the residency training program which is also utilized by other clinical departments. Residents also serve a rotation at the Children's Hospital. There is a regularly scheduled, ongoing educational program for residents, interns and other undergraduate medical students which consists of conferences, seminars and lectures. The department participates in the hospital's inservice education programs and in functions of the county and state medical societies and physician's continuing education program.

The University of Minnesota Burn Unit is located at St. Paul Ramsey Hospital. The department maintains a twenty-four hour emergency room service for accident victims from the east metropolitan area, surrounding Minnesota counties and western Wisconsin. The department also participates in the training of Phase A and B medical students, in the training of paramedical personnel and provides consultation on a regular basis to the inmates of Stillwater Prison.

During the first six months of 1973, the department performed 497 major surgeries and 496 minor surgeries and provided treatment for 1,126 inpatients and 3,284 outpatients.

DEPARTMENT OF UROLOGY

Chief: Doctor Alexander S. Cass

The Department of Urology has four residents (one first-year, one second-year, one third-year and one fourth-year) and four Phase B medical students when scheduled for three-week rotations. Interns may attend on an elective basis. The department serves as the Department of Urology for the Gillette State Hospital, provides consultation for the St. Paul Bureau of Health's VD clinic and Family Tree, Inc., the St. Paul Bureau of Health's Infectious Disease clinic, the Regional Kidney Foundation, conducts a vasectomy clinic and operates a kidney dialysis unit for patients awaiting a kidney transplant. Members of the department provide lectures for continuing educational courses at the University. Several inservice educational conferences are conducted, including GU Radiology, GU-Gyn and a urological case conference. A pathophysiology conference and journal discussion alternate monthly from October to June.

During the first six months of 1973, the department treated 405 inpatients and 2,938 outpatients.

BULLETIN

**The  
Arthur B. Ancker  
Memorial  
School of Nursing**

**ST. PAUL, MINNESOTA**



**1974-1975**

BULLETIN

**The  
Arthur B. Ancker  
Memorial  
School of Nursing**

ST. PAUL-RAMSEY HOSPITAL & MEDICAL CENTER  
640 JACKSON STREET  
ST. PAUL, MINNESOTA 55101



**1974-1975**

## TABLE OF CONTENTS

Academic Regulations . . . . .	9,10
Accreditation . . . . .	1
Administration . . . . .	22
Admission . . . . .	5,6,7
Course Descriptions . . . . .	14,15,16,17
Curriculum Objectives . . . . .	4,5
Curriculum Plan . . . . .	14,15,16,17,18
Eligibility for Licensure . . . . .	10
Enrollment Information . . . . .	5,6,7
Facilities for Instruction . . . . .	12
Faculty . . . . .	19,20,21
Financial Assistance . . . . .	8
Financial Information . . . . .	7,8
Grading . . . . .	9
Graduation Requirements . . . . .	9,10
Health Program . . . . .	11
Historical Statements . . . . .	
School . . . . .	1
St. Paul-Ramsey Hospital . . . . .	1
Housing . . . . .	11
Information on Cost of Program . . . . .	7,8
Library . . . . .	12
Philosophy . . . . .	2,3
Scholarship and Loans . . . . .	8,9
Student Activities . . . . .	12,13
Withdrawal . . . . .	9

## HISTORY OF THE SCHOOL

The Arthur B. Ancker Memorial School of Nursing was founded in 1891 as the City and County Hospital Training School for nurses. In 1923 the name was changed to Ancker Hospital Training School for Nurses, and in 1965 when St. Paul-Ramsey Hospital replaced Ancker Hospital, the present name was adopted.

Two thousand four hundred men and women have completed the course since the first student graduated in 1893. Approximately 270 students are currently enrolled in the education program. Graduates of the School are prepared to practice as registered nurses (R.N.) after successful completion of the licensure examination.

## ACCREDITATION

The Arthur B. Ancker Memorial School of Nursing is accredited by the Minnesota Board of Nursing and by the National League for Nursing. It is a member agency of the National League for Nursing in the Department of Diploma Programs.

## ST. PAUL-RAMSEY HOSPITAL AND MEDICAL CENTER

Established in 1873 as the City and County Hospital, named Ancker Hospital in 1923, the present complex of buildings was occupied in 1965 and renamed St. Paul-Ramsey Hospital and Medical Center. The dedication plaque proudly proclaims its timely purpose: "...It was conceived and constructed for the purpose of furnishing to all persons regardless of income, race or creed, the most comprehensive care the healing arts provide." Its primary purpose is service to its patients; its involvement in the community includes health education and research.

The 560 bed hospital is part of a complex of four buildings located near the State Capitol on an eighteen acre plot. The governing board of the hospital and medical center is the Ramsey County Hospital and Sanitarium Commission. The medical teaching program is a fully integrated unit of the University of Minnesota Medical School. The hospital is approved by the Council on Medical Education of the American Medical Association and the Joint Commission on Accreditation of Hospitals.

## PHILOSOPHY

The Arthur B. Ancker Memorial School of Nursing is under the jurisdiction of the Ramsey County Hospital and Sanitarium Commission and operates within the framework of the St. Paul Ramsey Hospital and Medical Center, whose primary purpose is service to its patients and whose involvement in the community includes health, education and research.

The faculty believes nursing is a direct service to people which expresses man's compassion for man. It is based on the belief that every human being has dignity and worth, and that the nurse has a commitment to contribute to the patient's sense of identity.

Nursing is an art through which the nurse uses skills, judgment, knowledge and attitudes to administer comforting measures which establish mutual trust and respect and help individuals achieve and maintain their maximum state of well being.

Nursing is a science since the knowledge which enables the practitioner to give skilled technical care, to assist the physician and to provide comfort and support for the patient is based on the application of principles learned in the physical, biological and behavioral sciences.

We believe the nurse assumes the responsibility for assessing the patient's nursing needs and planning and administering skilled care with creativity, warmth and concern for the patient. The nurse tries to involve both the patient and his family in planning, executing and evaluating care, helping them to accept their situation and to progress toward the highest level of wellness. The basis for evaluation of nursing care is the patient's response to his care. The nurse functions with the health team in helping to carry out the plan for total care and participates in communicating with community agencies for continuing care as indicated.

We believe that in nursing the practitioner strives continually for self-fulfillment as well as a sense of shared purposes with the profession.

We believe in the diploma program which prepares the graduate to function in community health care facilities as a technical nurse (as defined by the ANA position paper) with certain professional abilities.

The faculty believes that nursing education is a planned sequence of instruction that recognizes the accumulation of knowledge and experiences and which prepares the student to function responsibly.

The faculty believes that learning is change in behavior brought about by the interaction of intellect with internal and external stimuli. It is an individual process in which each person progresses at a varying rate. Because motivation is

one of the conditions upon which learning depends, learning is more effective when motives and goals are associated with the student's needs and interests. Transfer of learning is facilitated when similarities and differences between situations are recognized. To meet the needs of each nursing student the faculty believes provision should be made through the curriculum for differences in abilities and appreciations.

Recognizing that evaluation is essential to the teaching-learning process, the faculty believes in establishment and maintenance of a comprehensive, systematic and objective plan of evaluation. This plan begins with the selection of the student for admission and continues through the student's adjustment as a graduate. It includes continuous evaluation of the curriculum according to the student's achievement of school, local and national standards of nursing, in light of the changing needs of society. We believe that the student and instructor should work cooperatively to evaluate student achievement of mutually acceptable goals, identifying strengths to be utilized and recognizing limitations. Through this process the instructor assists the student to become increasingly self-directive and secure in his role as a student and as a graduate.

The students and instructors work toward recognizing each other as individuals. Their relationship reflects interest, knowledge, respect and trust. The role of the student is to acquire knowledge and develop attitudes and skills which prepare him to meet and deal with professional and social problems of physical and mental health. The student is responsible for total participation in the learning process, growing in initiative and responsibility for his own learning.

The instructor, to assist the student in the attainment of his personal educational goals and realization of his capabilities, creates and maintains an effective learning environment that extends beyond the classroom and laboratory. The instructor recognizes the student's individual needs and provides opportunities for self-expression. He develops methods and approaches that insure continuity of learning. He seeks to remain knowledgeable and aware of trends in health care and education, assumes a leadership role in striving toward excellence in patient care and accepts his role as a citizen.

The faculty has the responsibility to develop and support the philosophy; to plan, implement, evaluate and revise the curriculum; to co-ordinate the activities of the department of nursing education with allied groups for the purpose of excellence in education and patient care. The faculty maintains a functioning organization that strives for successful performance of its members by providing for adequate communication, continuing education and involvement in the general welfare of the student.



## CURRICULUM OBJECTIVES

The curriculum has been planned to enable the student to:

1. Acquire knowledge of the human organism and its basic needs through study of physical, biological and behavioral sciences.
2. Develop an understanding of the legal and ethical aspects of the nursing profession.
3. Understand the functions of the members of the health team and promote effective communication among them.
4. Develop and maintain interpersonal relationships through effective communication.
5. Demonstrate understandings, skills and attitudes necessary for functioning as a member of the nursing profession.
6. Recognize and support or maintain physical development, needs and environment necessary for physical health of all ages from conception to death.
7. Recognize signs and symptoms and understand the etiology, diagnosis, pathology and prognosis of abnormal conditions.
8. Understand and apply the principles of health promotion, prevention, control of disease and rehabilitation.

9. Acquire knowledge of what contributes to mental health, emotional and spiritual well being.
10. Develop a positive attitude toward health for self and others.
11. Develop and carry out a nursing care plan for the patient and his family in hospitals, community health facilities and the home.

## ENROLLMENT INFORMATION

### NEW STUDENTS

The School of Nursing admits one class annually in September, consisting of approximately 115 students. The Admissions Committee has the responsibility for selecting candidates for enrollment from applications submitted. Each applicant is given individual consideration; no single criterion is used to admit or deny entrance to a prospective student. The school accepts qualified applicants until the class is filled.

### EDUCATIONAL QUALIFICATIONS

Graduation from an accredited high school in the upper third of the class is desired, with ACT test scores to support the rank. Additional consideration may be given an applicant below the above-named rank if scholastic achievement test scores are exceptionally high or if satisfactory achievement in a college course with a minimum grade of C has been demonstrated.

Four years of English, one year of chemistry, one year of mathematics are required. A foreign language and physics are desirable. The balance of the high school course should include social sciences and electives.

### TRANSFER STUDENTS

Transfer students are given individual consideration. A favorable recommendation from the former School of Nursing is required. A transfer student must meet all requirements of new applicants. The applicant's reasons for transferring from one school to another are taken into consideration.

### SELECTION OF STUDENTS

Data to be included in the application file include:

1. The completed application form.
2. A high school transcript, including number of students in the class and rank in the class. College transcript if attended.
3. If applicant is a transfer student, a complete school of nursing transcript.
4. Results of ACT and all other standardized tests taken. Any additional tests if requested.
5. Completed medical and dental forms.
6. High school recommendations.
7. Birth certificate—after acceptance.
8. Photograph—after acceptance.
9. A personal interview may be requested by the Admissions Committee before a decision is made regarding their application.

### PERSONAL QUALIFICATIONS

Both women and men are accepted without distinction as to race, religion or national origin. The minimum age is 17.

Good physical and mental health including evidence of good moral character, emotional stability, and the ability to work with others are essential. Physically handicapped applicants are given careful consideration. Consultation with the Health Service physician is desirable; the applicant may be asked to have a physical examination by this physician before acceptance, to determine ability to do the scholastic and clinical work required without danger to the student or to patients. Conditions which can be remedied shall be corrected by the student before admission and at the student's expense. Overweight applicants may be required to reduce their weight.

### PROCEDURE FOR MAKING APPLICATION

The school enrolls one class each year. Applicants should begin the application procedure in the summer or early in the fall of the year preceding September enrollment. Evaluation of applicants begins with the Admissions Committee in September. Application materials may be procured by writing to:

Registrar  
Arthur B. Ancker Memorial School of Nursing  
St. Paul-Ramsey Hospital and Medical Center  
640 Jackson Street  
St. Paul, Minnesota 55101

Application materials include Application for Admission, Secondary School Record, Pre-entrance Medical Record, and Pre-entrance Dental Record.

No application is reviewed until the completed application form, high school transcript, ACT test score, and recommendations are received. If applicant has attended college, transcript of all courses taken must also be received before application is reviewed. Medical and dental records are required before final acceptance of the candidate as a student. After acceptance into the school, the student is requested to submit a billfold size photograph, birth certificate or certified copy of certificate, and the registration fee. The registration fee is not refundable if the application is later withdrawn by the student.

After registration is complete the student receives an invitation to a spring orientation session which includes measurement for uniforms and a tour of the dormitory, education building, and hospital. During the summer, further instructions and assignment of a "Special Friend" are sent to the incoming student. An invitation is also sent for parents to attend the Parent-Faculty Tea on admission day.

### **INFORMATION ON COST OF PROGRAM**

Tuition and fees listed below are for the 1973/74 school year and should be used as only an approximation of costs.

<i>ESTIMATED COST OF PROGRAM</i>					
<i>Itemized Expenses</i>	<i>Pre Entrance</i>	<i>First Year</i>	<i>Second Year</i>	<i>Third Year</i>	<i>Total</i>
Registration Fee	\$50.00				\$ 50.00
Uniforms	75.00				75.00
Tuition		\$951.00	\$951.00	\$951.00	2,853.00
Incidental Fees		60.00	60.00	60.00	180.00
Room Rent (For students who wish to live in the Residence)					
*Security Deposit	30.00				30.00
Double Room		285.00	285.00	285.00	855.00
Single Room		450.00	450.00	450.00	1,350.00
Graduation Fee				50.00	50.00
Books		181.00	120.00	110.00	411.00
**Health Insurance		134.00	134.00	134.00	402.00
	\$155.00	\$1,326.00†	\$1,265.00†	\$1,305.00†	\$4,051.00†

\*Security Deposit is returned when student leaves the program providing there is no damage to the room.

\*\*Optional—Student may elect to be covered by parents' family policy.

†These totals do not include room rent.

In addition to the itemized expenses, students should be provided with a monthly allowance to meet personal expenses, including meals, white shoes, white nylons, and transportation to and from field trips. Laundry

of uniforms is provided by the hospital. Students may purchase meals at cost in the hospital cafeteria.

The registration fee is paid at the time the student acknowledges appointment to the school by returning the signed agreement. The registration fee is not refundable. If a student withdraws from the school within four weeks after entrance, 50% of the first quarter's tuition is refunded. After the student has been in the school for four weeks there will be no refund of fees. Room rent will be refunded for the remaining weeks of the quarter.

Students required to repeat a quarter or semester pay the tuition rate in effect at the time the term is repeated.

## FINANCIAL ASSISTANCE

The purpose of the Ancker Financial Aid Program is to supplement family resources to the best of our ability.

Financial assistance is granted on the basis of estimated need as determined by the College Scholarship Service (CSS). Approximately 750 colleges and universities use the CSS in the belief that this service provides a fair, objective, and unbiased estimate of the student's need for financial assistance. Ancker School of Nursing and College Scholarship Service believe primary responsibility for meeting educational costs lies with the student and her parents. The recommendations of CSS are used as guidelines to determine the extent of the family income and assets that should be used to meet educational expenses.

The Parents' Confidential Statement form may be obtained from the student's local high school or from College Scholarship Service, Box 176, Princeton, New Jersey 08540.

Students who are residents of Minnesota and who have been accepted into a school of nursing in Minnesota are eligible to apply for Minnesota State scholarships for nursing student which are granted on the basis of academic achievement and financial need. Application forms may be obtained by writing the Minnesota Board of Nursing, 393 North Dunlap, St. Paul, Minnesota 55104 or may be obtained from the school where the student has been accepted.

The St. Lukes and St. Joseph's Hospitals Financial Aid programs are available to Ancker School of Nursing students and the students should contact these institutions directly.

Ancker participates in the Federal Loan Program for nursing students which makes limited funds available. Other limited grants and loans are available for students who have successfully completed one or two years in the school.

Second and third year nursing students may accept part-time employment in St. Paul Ramsey Hospital as nursing assistants if it is available. The number of hours per week they may work are limited and the student's health and scholastic average are factors considered in employment.

Applications for financial aid are made by students after being accepted into the school of nursing and the Parents' Confidential Statement from the College Scholarship Service must be on file before any financial aid application is given consideration.

## ACADEMIC REGULATIONS

### PROMOTION POLICIES

Satisfactory completion of each term is necessary before the student advances to the next term. The Committee on Promotions may recommend at any time, the withdrawal of a student whose academic progress, health, conduct or personal qualities indicate that she lacks essentials necessary for safe nursing practice.

A student who wishes to withdraw from the school is requested to notify the Director of the School in writing. Requests for a leave of absence are made to the director and are considered on an individual basis.

### GRADING POLICIES

A – Superior	4 quality points per unit
B – Above average	3 quality points per unit
C – Average	2 quality points per unit
D – Below average (lowest passing mark)	1 quality point per unit
F – Failure	0 quality points per unit
I – Incomplete is a temporary report indicating that for some reason the essential work in the subject (a) has not been completed, (b) has not been completed satisfactorily. The incomplete must be removed by the end of the quarter or semester.	

Satisfactory progress for students enrolled in the program is considered to mean maintaining or exceeding a grade point average of 2.00 or C cumulatively in all courses completed, and in each quarter or semester of study. A grade of C is necessary for each nursing course for promotion to the next course.

If a student's cumulative grade point average falls below 2.0 the student will be put on scholastic probation and be given one quarter or semester

of study to raise the cumulative grade point average to 2.0 or better. Failure to do so will result in automatic suspension from the school.

A grade point average is the quotient obtained by dividing the number of grade points earned by the number of hours attempted (i.e., those hours for which A,B,C,D,F, are recorded).

### GRADUATION STANDARDS

Successful completion of all courses is required before the student receives a diploma.

The student who graduates from the school is prepared to write the state board examinations for licensure as a registered nurse or "R.N."

The graduate is prepared to accept a position as a beginning staff nurse in a hospital, in a clinic, in industry, in a physician's office, in the armed services, or in certain community agencies.

The registered nurse is eligible for membership in the Ancker Alumnae Association, the American Nurses Association, and the National League for Nursing.

The student who graduates is able to give safe, intelligent nursing care but will continue to seek, to learn, and to develop new skills through experience. The graduate is prepared to function effectively as a member of the nursing team, to work cooperatively with other members of the health team, and to accept professional and social responsibilities.



## HOUSING

Housing for women students is available in the student dormitory at a reasonable rate. There are no rooms available for men students.

The Student Residence, connected by enclosed corridors to the Education-Research Building and the hospital, is equipped with double rooms. It has an attractive lounge for entertaining guests, storage space and laundry facilities. The rooms, shared by two classmates are completely furnished; linens are provided. The gymnasium-auditorium located in the Education-Research Building, has a seating capacity of 500, is suitable for dances, plays, and other entertainment and recreation. It is equipped for shuffleboard, badminton and basketball.

The Student Counselor and Residence Director, who is a member of the faculty, has an apartment in the dormitory, and is responsible for the continuous supervision and counseling of students, for providing an environment conducive to wholesome group living, and for coordinating extra curricular activities.

## STUDENT HEALTH PROGRAM

Planned to help the student maintain optimum health, the student health program is coordinated by the Director of the School and carried out through the Employees Health Service of the hospital.

Students are expected to carry hospitalization and medical insurance at their expense. A comprehensive health insurance plan is available to nursing students at a group rate through the hospital's insurance carrier.

During the orientation period each student is given a complete physical examination by the Health Service physician and necessary immunizations are completed. Included in the health program are bi-annual chest x-rays, follow up of students with positive Mantoux tests, preventive inoculations as needed, and a physical examination before graduation.

Students are encouraged to consult the physician or the Health Service nurse at any time. For minor short term illnesses, the student may be permitted to remain in her dormitory room, with the residence director being notified.

## FACILITIES FOR INSTRUCTION

The School of Nursing has well equipped classrooms, laboratories and library located in the Education-Research Building, with additional classrooms and instructors' offices in the clinical areas of the hospital. The Medical-Nursing library contains approximately 4000 volumes and 165 periodical titles. Upon request, the librarian obtains additional materials from the St. Paul Public Library, the Ramsey County Library and the Bio-Med Library, University of Minnesota.

The St. Paul-Ramsey Hospital, where students have clinical practice in medical-surgical, maternity, pediatric, psychiatric, outpatient and emergency nursing, has a capacity of 560 beds. Outpatient and emergency departments have a daily average census of 513. Numerous local community services are utilized for observation and practice for the nursing students.

The teaching faculty is comprised of twenty-four full time instructors teaching nursing courses, one full-time instructor teaching physical and biological sciences, one part-time instructor teaching nutrition and five part-time instructors from local colleges teaching biological sciences, social sciences and communications. Physical education classes, conducted by a part-time instructor, are required for first year students.

## STUDENT ACTIVITIES

All students in the School of Nursing are members of the Student Association, the objectives of which are to:

Assist in maintaining discipline, morale, and a high standard of scholarship.

Foster wholesome social relationships and student activities.

Be a medium through which the opinions and wishes of the student body may be expressed.

Facilitate communication between the student body and the faculty.

Encourage participation in the district, state and national student associations in order to prepare the nursing students to assume responsibility in the professional organizations after graduation.

While the school is non-sectarian in administration and support, students are encouraged to continue active membership and participation in the church of their choice. Catholic and Protestant services are conducted in the hospital chapel by the chaplains, with special week day services for students.

Each class sponsors social functions such as dances, banquets, picnics, and exchange parties. Parents are requested to chaperone dances.

Students may produce two publications, the newspaper *Transfusion* and the yearbook *Hospes*.

The Residence Director encourages, organizes and coordinates extra curricular activities and arranges for students to attend community events.

A school choir may provide music for capping and graduation ceremonies, participate annually in the St. Paul Christmas Choral pageant and in other community activities.

Maintaining a lively relationship with the school, the Ancker Alumnae Association honors the seniors in the spring, invites them to become members, makes an annual gift to the library, and provides a scholarship fund.

Students from the three classes are included in the membership of some faculty committees.

The Twin City area, with its many colleges, universities, theaters and civic functions, offers a wide variety of stimulating programs.



## **CURRICULUM PLAN \***

The program of the school is planned for three academic years, with terms beginning in early September and ending in early June. All courses and clinical laboratory practice are offered at St. Paul-Ramsey Hospital and Medical Center and selected community facilities.

The basic physical and social sciences and beginning nursing courses are scheduled during three 12 week terms the first year. Clinical laboratory in nursing begins in the first quarter and throughout the year the student works with patients of all age groups. Some of the clinical areas utilized are the operating room, medical-surgical units and nursing homes.

In the three quarters of the second year, students apply the theory offered in the nursing course in clinical laboratory in medical-surgical, outpatient clinics and communicable disease areas.

In the third year the focus is on the family. Clinical areas in which the students apply the theory learned are Maternity, Nursing of Children, Mental Health, Ambulatory Care, and Intensive Care Areas. Nursing Trends at Home and Abroad, Social Psychology and Senior Seminar are offered consecutively.

## **DESCRIPTION OF COURSES \***

### **1st Year**

#### **NURSING I, II, III**

Sequential courses to introduce the student to the use of the nursing process in identifying and assisting patients to meet their basic needs as they appear in all age groups.

Nursing I concentrates on introducing the student to St. Paul-Ramsey Hospital and Medical Center, basic nursing skills and Maslow's hierarchy of needs.

Nursing II and III continue with the use of the nursing process. Students will apply theory in the operating room, prenatal clinics, nursing homes and selected child care facilities as well as medical surgical units in the hospital. New nursing skills are introduced, including administration of medications.

#### **ANATOMY AND PHYSIOLOGY**

Study of the normal structure and function of the human body; prerequisite for nursing courses.

#### **CHEMISTRY**

Content selected from general inorganic, organic, and physiological chemistry with emphasis on development of application of the principles of chemistry in professional nursing and in everyday living.

#### **SOCIOLOGY**

Introduces the scientific method of behavioral research. Study of social organization and culture, social stratification, collective behavior and groups. Social change, planning, problems; relates study to health care.

#### **COMMUNICATIONS**

Aimed to develop ability to read, think, communicate; provides experience in library research, grammar review, writing.

#### **PHYSICAL EDUCATION**

Designed to reinforce principles of good body mechanics and to assist students in acquiring optimum physical fitness.

#### **MICROBIOLOGY**

Relates to nursing: the nature, transmission, destruction, invasion of microorganisms; defenses of the body; water and food sanitation.

#### **INTRODUCTORY PSYCHOLOGY**

Beginning study of understanding of human behavior, determinants of behavior; relates study to psychological factors in health care.

#### **HUMAN GROWTH AND DEVELOPMENT**

Prerequisite: Introductory Psychology. Study of the development at various stages of life from infancy through old age. Relates this study to nursing care, and to understanding of human behavior.

#### **PHARMACOLOGY**

Study of physiological action and toxicology of drugs to provide the basis for intelligent observation and care of patients. Includes psychological and social aspects of drug misuse and the nurse's moral and legal responsibility to self and patients in drug therapy.

#### **NORMAL NUTRITION AND FOODS**

Designed to provide the student with a working knowledge of principles of good nutrition as applied to self, patient, family and persons in the community.

## 2nd Year

### NURSING X, XI and XII

Sequential courses designed to provide an increasing comprehension of the principles of the biological, physical and behavioral sciences applied to nursing practice. Problem solving is the method to be utilized by the students to determine nursing intervention which will facilitate adaptation for a person experiencing stresses imposed by health-illness problems. Objectives are fulfilled through selected theoretical and clinical experiences.

Nursing X concentrates on the assessment part of the nursing process in which the student is given the tools to collect data, analyze and draw inferences.

Nursing XI and XII concentrates on intervention and evaluation based on behavioral response of the patient. Nursing XI begins with nurse-patient relationship on a one-to-one basis, and continues through Nursing XII to include the patient's community.

## 3rd Year

### NURSING XX, XXI AND XXII

Senior level nursing courses which study the nursing process as it is applied to families and other groups of people.

Nursing XX concentrates on the acquisition of new family members through pregnancy and birth and on problems related to adaptation to sexual role.

Nursing XXI focuses on problems of the growing family including mental health, parenting skills, and the effect of a child's illness on the family.

Nursing XXII considers problems related to temporary or permanent attrition in families due to adolescent emancipation, institutionalization or death. Included in this course is the care of the critically ill person and his family and assisting families to adapt to chronic illness.

### Interims

Three two-week periods at the end of each quarter which provide opportunity for theory and practice in methods of nursing care delivery with emphasis on practicing the role and functions of the graduate nurse.

## NURSING TRENDS AT HOME AND ABROAD

Presents expanding career opportunities for the nurse; selection, application for positions; need for continuing education; legal limitations and responsibilities; review of Code of Ethics; professional organizations and the nurse's obligations to them; current trends in delivery of health care as related to nursing; survey of nursing outside the U.S., the American nurse overseas, international agencies for health needs.

### SOCIAL PSYCHOLOGY

Prerequisite: Introductory Sociology and Psychology

A study of the ways in which human behavior is influenced by the presence, behavior and products of other human beings, individually and collectively, and in the past, present and future.

### SENIOR SEMINAR

Planned, executed and evaluated by the senior students under the guidance of an instructor. Emphasis is on the health care field and the nurse's role therein.

*\*The school reserves the right to make changes in the curriculum plan and content.*

# ARTHUR B. ANCKER MEMORIAL SCHOOL OF NURSING

## \*\*\* CURRICULUM SUMMARY - CLASS OF 1976

September 5, 1973–November 28, 1973 FIRST QUARTER	December 3, 1973–March 8, 1974 SECOND QUARTER	March 13, 1974–June 7, 1974 THIRD QUARTER
Anatomy & Physiology Chemistry Communications Psychology Physical Education Chorus Nursing I – Theory Clinical Laboratory Group Discussion  Thanksgiving Week-end November 22–25, 1973	Anatomy & Physiology Microbiology Human Growth & Development Nutrition Physical Education Chorus Metrolgy Nursing II – Theory Clinical Laboratory Group Discussion  2 Weeks Christmas Vacation December 22, 1973–January 6, 1974	Anatomy & Physiology Pharmacology Sociology Physical Education Chorus Metrolgy Nursing III – Theory Clinical Laboratory Group Discussion  Easter Vacation–April 12–15, 1974 Memorial Day Holiday–May 27, 1974
<b>FIRST QUARTER</b>	<b>SECOND QUARTER</b>	<b>THIRD QUARTER</b>
Nursing X (Theory and clinical laboratory) Assessment Nursing problems–patients of all age groups. Pathophysiology, problem solving, communications, group dynamics.  Thanksgiving Week–end	Nursing XI (Theory and clinical laboratory) Intervention Nursing problems–patients of all age groups–Pathophysiology, problem solving, communications, group dynamics.  2 Weeks Christmas Vacation	Nursing XII (Theory and clinical laboratory) Evaluation Nursing problems–patients of all age groups. Pathophysiology, problem solving, communications, group dynamics.  Easter Vacation Memorial Day Holiday
<b>FIRST QUARTER</b>	<b>SECOND QUARTER</b>	<b>THIRD QUARTER</b>
Nursing Trends At Home & Abroad ** Nursing XX (Theory and clinical laboratory) Continuity of care, groups of patients, family Interim: Leadership Thanksgiving Week-end	Social Psychology **Nursing XXI (Theory and Clinical laboratory) Continuity of care, groups of patients, family. Interim: Leadership 2 Weeks Christmas Vacation	Senior Seminar **Nursing XXII (Theory and Clinical laboratory) Continuity of care, groups of patients, family. Interim: Leadership Easter Vacation Memorial Day Holiday
<b>QUARTER BREAK</b> November 29 – 30	<b>QUARTER BREAK</b> December 22, 1973–January 6, 1974	<b>QUARTER BREAK</b> March 11 & 12, 1974

\*\*\* Faculty reserves the right to make changes in the curriculum as the need arises.

\*\* Students may take Nursing XX, Nursing XXI and Nursing XXII in sequence or in reverse order

ABAMSN 5/1973

## FACULTY

The School of Nursing Faculty organization, to which all faculty members belong, determines the internal policies of the school, such as entrance requirements, promotion policies, academic standards, curriculum, and guidance. The faculty meets regularly as a group and also functions through standing committees. Faculty members selected by student groups serve as Student Association and class advisors. Instructors serve as faculty advisors for groups of students.



## FACULTY

Marlys W. Lilleskov, R.N., Director School of Nursing  
B.S.—Hamline University, St. Paul, Minnesota  
M.N.A.—University of Minnesota, Minneapolis, Minnesota

Dixie Lee Anderson, R.N. Instructor, Nursing XX, XXI and XXII  
Diploma—Lutheran Hospital School of Nursing, Sioux City, Iowa

Frances Antal, R.N., Instructor, Nursing I, II and III  
A.S. Forest Park Junior College School of Nursing, St. Louis, Missouri  
B.S. Southwestern College, Winfield, Kansas

Geraldine Berg, R. N., Instructor, Nursing XX, XXI and XXII  
Diploma—Swedish Hospital School of Nursing, Minneapolis, Minnesota

Rita Dague, R. N., Instructor, Nursing I, II and III  
B.A. Gustavus Adolphus College, St. Peter, Minnesota

Patricia Glood, R.N., Instructor, Nursing X, XI and XXII  
B.S. Augustana College, Sioux Falls, South Dakota

Anita Jakupcak, R.N., Instructor, Nursing X, XI and XII  
B.S. Loyola University, Chicago, Illinois

Dorothy Johnson, R.N., Instructor, Nursing XX, XXI and XXII  
B.S. Boston University, Boston, Massachusetts  
M.S. University of California at San Francisco, San Francisco, California

Sandra Kaske, R.N., Instructor, Nursing X, XI and XII  
B.S. University of Minnesota, Minneapolis, Minnesota

Judith Lapora, R.N., Instructor, Nursing X, XI and XII  
Diploma—Ancker Hospital School of Nursing, St. Paul, Minnesota  
B.S. University of Minnesota, Minneapolis, Minnesota

Barbara LaVallie, Residence Director  
B.S. University of Minnesota, Minneapolis, Minnesota

Barbara Martin, R.N., Instructor, Nursing X, XI and XII  
B.S. College of St. Teresa, Winona, Minnesota

Patricia Melcher, R.N., Instructor, Nursing X, XI and XII  
B.S. University of Wisconsin, Madison, Wisconsin

Roberta Meredith, R.N., Instructor, Nursing XX, XXI and XXII  
B.S. Hamline University, St. Paul, Minnesota

Joyce Michaelson, R.N., Instructor, Nursing X, XI and XII  
B.S. University of Minnesota, Minneapolis, Minnesota

Mary Moberg, R.N., Instructor, Nursing X, XI and XII  
B.S. University of Minnesota, Minneapolis, Minnesota

Elizabeth Mullin, R.N., Instructor, Nursing XX, XXI and XXII  
B.S. M.Ed.—University of Minnesota, Minneapolis, Minnesota

Carolyn O'Connor, R.N., Instructor, Nursing I, II and III  
B.S. St. Xavier College, Chicago, Illinois

Kay Orson, R.N., Instructor, Nursing XX, XXI and XXII  
B.S. Hamline University, St. Paul, Minnesota

Jane Pike, R.N., Instructor, Nursing I, II and III  
B.S. Mankato State College, Mankato, Minnesota

Donna Jean Rieser, R.N., Instructor, Nursing X, XI and XII  
B.S. Mankato State College, Mankato, Minnesota

Carmian Seifert, R.N., Instructor, Nursing XX, XXI and XXII  
B.S. University of Wisconsin, Madison, Wisconsin

Charlotte Tracy, R.N., Curriculum Coordinator  
B.S. Dakota Wesleyan University, Mitchell, South Dakota  
M. Ed. University of Minnesota, Minneapolis, Minnesota

Margaret Walden, R.N., Instructor, Nursing XX, XXI and XXII  
Diploma—St. Mary Amesterdam, New York  
B.S. St. Lawrence University, Canton, New York

Gayle Wooden, R.N., Instructor, Nursing I, II and III  
B.S. Winona State College, Winona, Minnesota

Joan Zabel, R.N., Instructor, Nursing XX, XXI and XXII  
B.S.—Augustana College, Sioux Falls, South Dakota

Millard J. Ruether, Ph.D.—Professor of Pharmacology, Microbiology and Chemistry  
B.A.S.L.A.: B.S.—School of Medicine  
Ph.D. Pharmacology—University of Minnesota, Minneapolis, Minnesota

Jerry Gerasimo, Ph.D.—Instructor, Social Psychology  
B.A. Lake Forest College, Lake Forest, Illinois  
M.A. University of Chicago, Chicago, Illinois  
Ph.D. University of Chicago, Chicago, Illinois

Thomas Goff, Instructor, Anatomy & Physiology  
B.S. Wisconsin State University, River Falls, Wisconsin  
M.S. University of Minnesota, Minneapolis, Minnesota

Ralph Joly, Instructor, Communications  
M.A. Eastern Michigan University, Ypsilanti, Michigan

Llewellyn Larson, Instructor, Physical Education  
B.A. Wheaton College, Wheaton, Illinois

Margaret Matheson, Instructor, Nutrition  
B.S. Dietetics and M.S. Nutrition  
Iowa State University, Ames, Iowa

Jean Martin, R.N., Employees Health Center  
Diploma—Ancker Hospital School of Nursing, St. Paul, Minnesota

William Youngblood, Instructor, General Psychology, Sociology, Growth & Development  
B.A. Valparaiso University, Valparaiso, Indiana  
M.A. Indiana University, Bloomington, Indiana

Mary Lou Dwyer, Head Librarian  
B.A. College of St. Catherine, St. Paul, Minnesota

Audrey Woodke, Assistant Librarian  
B.A. Macalester College, St. Paul, Minnesota

# ARTHUR B. ANCKER MEMORIAL SCHOOL OF NURSING

## ADMINISTRATION GOVERNING BOARD

The Ramsey County Hospital and Sanitarium Commission

Mr. Michael F. Ettel, Chairman  
Mrs. Donald M. DeCourcy, Vice Chairman and Treasurer  
Mr. Richard A. Moore, Secretary  
Mr. William Carlson, Jr.  
Mrs. Patricia Durkin  
Mr. John Finley  
Mr. Bruce Lindahl  
Mr. Harry Moberg  
Mrs. Leona Quinlan  
Mr. Edward Salverda  
Mr. Roland Wilsey  
Mr. William L. Wilson  
Mrs. Rochelle T. Wright  
Mr. LaVand Syverson, Executive Secretary

## EXECUTIVE DIRECTOR AND SUPERINTENDENT OF HOSPITAL

LaVand Syverson, B.A., M.S., M.S.

## ASSOCIATE ADMINISTRATOR

David Gitch, B.A., M.B.A.

## DIRECTOR OF NURSING

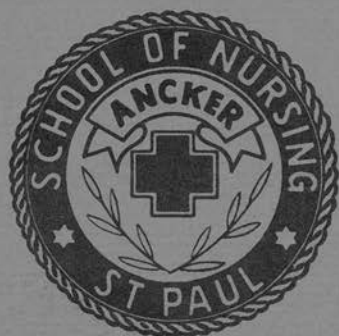
Miss Minna Moehring, R.N., B.S.N.E., M.N.A.

## DIRECTOR SCHOOL OF NURSING

Mrs. Marlys W. Lilleskov, R.N., B.S., M.N.A.

## ADMISSIONS COUNSELOR AND REGISTRAR

Mr. Charles L. Miller, B.A., M.S.



THE  
ST. PAUL-RAMSEY  
HOSPITAL

\* \* \*

DIETETIC INTERNSHIP  
PROGRAM

## THE PURPOSE OF AN INTERNSHIP

The dietetic internship program at St. Paul-Ramsey Hospital provides a concentrated learning experience within an established rotation of services. For nine months you will be given the opportunity, with guidance, to apply knowledge you have acquired in college to current and realistic problems. You will be directed in evaluating yourself and your progress as you assume more and more of the professional responsibilities of a staff dietitian. You will be building a strong foundation for future growth as you work toward your immediate goal...qualification for membership in The American Dietetic Association.

## THE HOSPITAL

The original city-county hospital was organized in 1873 to care for the sick-poor of the community. The entire facility was transferred to the new 16 million dollar, 615 bed hospital complex in October, 1965. St. Paul-Ramsey Hospital ranks as one of the outstanding general hospitals in the United States. Its diversified services offer excellent opportunities for education and professional training.

The hospital is approved by the Joint Commission for Accreditation of Hospitals and by the American Medical Association for internships and residencies in medicine, surgery and allied specialties. It also offers a fully accredited diploma program for nursing students, an approved dietetic internship, an internship for medical technologists and an affiliation in physical and occupational therapy.

## SUMMARY OF SERVICES

Orientation	1 Week
Administrative Dietetics	
Food Production and Food Service	6 Weeks
Personnel and Financial Management	6 Weeks
Purchasing and Receiving (Affiliation - St. Joseph's Hospital)	4 Weeks
Staff Relief	2 Weeks
Clinical Dietetics	
Inpatient Service (Medicine and Surgery)	6 Weeks
Inpatient Service (Special Areas)	4 Weeks
Outpatient Service	4 Weeks
Diabetes Education Center	1 Week
Staff Relief	2 Weeks
Community Dietetics	3 Weeks
Vacation	1 Week
	<hr/> 40 Weeks

## FOOD PRODUCTION AND FOOD SERVICE

### Experiences

#### Food Production Units

- Main preparation area

- Bakery

- Meat cutting

- Vegetable preparation

- Salad preparation

- Dessert preparation

- Nourishment preparation

#### Ordering Procedures

#### Menu Planning

- Quality control

- Portion control

- Cost control

#### Employee Supervision

- Food service supervisors

- Food service workers

#### Patient Food Service

- Tray line supervision

#### Cafeteria Food Service

- Serving line supervision

- Dining room supervision

- Cashiering

- Special functions

- Plate waste surveys

- Yield study

#### Communication

- Oral

- Written

## PERSONNEL AND FINANCIAL MANAGEMENT

### Experiences

#### Job Analysis

#### Job Descriptions

#### Personnel Procedures

- Employee selection

- Employee training

- Employee scheduling

- Employee evaluation

#### Employee Supervision

- Central dishwashing unit

- Utensil washing unit

- Janitorial service

#### Purchasing Procedures

- Specifications

- Quality testing

- Requisitioning

- Receiving

- Storeroom management

#### Cost Accounting

- Food costs

- Labor costs

- Budget preparation

## PATIENT SERVICE

### Experiences

#### Office Procedures

#### Tray Service to the Patient

#### Inpatient Service

General medicine and surgery

Burn unit

Obstetrics and Gynecology

Pediatrics

Child psychiatry

Adult psychiatry

Alcoholic rehabilitation program

Physical medicine and rehabilitation

#### Outpatient Service

Nutrition clinic (general)

Prenatal clinic

Family practice clinic

## COMMUNITY DIETETICS

### Experiences

Dairy Council of the Twin Cities

Expanded Food and Nutrition Education Program

Family Nursing Service

Highland Chateau Nursing Home

Maternal and Infant Care Project

Minneapolis School Lunch Program

Ramsey County Welfare Department

St. Paul Public Schools Nutrition Program

Others as arranged

## CLASSES AND TEACHING EXPERIENCE

Throughout the St. Paul-Ramsey Hospital dietetic internship program every attempt is made to provide the greatest possible scope of activities and learning experiences for each dietetic intern. Weekly classes are an integral part of the program. These may be formal lectures, group discussions, seminars, medical rounds or field trips. Each dietetic intern is assigned several reports and special projects. Some projects are completed by two interns working together. All reports are shared with other interns and staff members at weekly class sessions.

During the year each dietetic intern will have many opportunities to develop teaching skills. She will be called upon to give classes to individuals and groups such as in-patients, out-patients, employees and para-medical groups.

## GENERAL INFORMATION

Dietetic interns are paid an educational stipend of \$200 per month for nine months. Professional laundry is provided. Interns pay for their meals and room. The room rate is \$1.00 per day, double occupancy. Rooms are furnished with essential furniture, towels, linens and bedding. Each intern should plan to bring a minimum of 3-4 tailored white uniforms. Two piece or pantsuit uniforms are not acceptable. White hose and white shoes are worn. Professional appearance is essential. More specific information will be mailed to each incoming intern.

An excellent Medical Library as well as a very fine Departmental library are available at the hospital. It will definitely be to the intern's advantage to bring a typewriter since all major reports must be typewritten.

Schedules are planned to provide the best possible coverage of the Department of Dietetics. Staff dietitians, dietetic interns and food service workers all work a forty-hour week including some weekends and holidays. Dietetic interns will be given three holidays during the year. One week of paid vacation will be scheduled. This time will be planned in advance and cannot be changed.

The Director of Dietetics and the Hospital Superintendent reserve the right to terminate the internship of any dietetic intern if, at any time during the year, she should prove herself unfit or unworthy for the profession of dietetics.

Each dietetic intern will receive a certificate and an official pin upon satisfactory completion of approved training. She is then qualified for membership in The American Dietetic Association.

APPLICATION FOR APPOINTMENT TO A DIETETIC  
INTERNSHIP

You may submit your letter of application and other necessary forms to the Dietetic Internship Director after first term grades of your senior year have been recorded on your transcript of credits.

Your complete application should arrive at the hospital no later than March 1 to be considered for the next incoming class in September.

A complete application will include:

1. Typewritten letter of application.  
Try to make this letter a true reflection of the type of person you really are. It is important!
2. Completed application form.  
(Form available from internship.)
3. Official transcript(s) of credit from all universities attended.
4. Official signed and dated transcript evaluation from ADA.
5. Record of grades for courses completed after central screening of transcripts.
6. List of courses and credits to be completed to meet ADA academic requirements.
7. Physical report signed by a physician.  
(Form available from internship.)
8. THREE RECOMMENDATIONS: (at least)
  - a. A professor in food and nutrition (required)
  - b. A professor in institution mgmt. (required)
  - c. An instructor in foods, nutrition or institution mgmt. - or - a bio-chem. professor - or - a work reference.

## INTERVIEW

If you wish to come to St. Paul for a personal interview and a tour of the hospital we will be pleased to make the necessary arrangements. It will be most helpful if you will make an advance appointment for your visit.

## NOTIFICATION OF APPOINTMENT

Letters of notification of appointment will be sent to the college faculty member designated to receive them. These letters will be given to the students on the date specified by the American Dietetic Association.

Your letter of acceptance or rejection of appointment must be in the mail within 48 hours after receipt of notification of appointment.

We strongly recommend that you telephone and follow your call by a letter confirming your acceptance or rejection of the appointment.

## THE CITY OF SAINT PAUL

Capital of Minnesota

Population of 350,000

Built along the banks of the Mississippi River

City of natural scenic beauty with its parks and lakes

Gateway to the nation's finest summer and winter playgrounds

Metropolis of commerce and of varied industrial enterprises

Cultural and educational center with many theaters, museums, galleries and 15 colleges, universities and seminaries

Served by 7 major airlines and just 15 minutes (8½ miles) from the Minneapolis-St. Paul International Airport

Served by 3 interstate bus lines and eight major rail lines

City of friendly, hospitable people

# Family Practice

## Section 6

FAMILY PRACTICE

## 6. FAMILY PRACTICE

In 1971, the Minnesota State Legislature appropriated funds for the development of a Family Practice program at Saint Paul-Ramsey Hospital. These funds were in answer to a growing concern that there be adequate educational resources to encourage and improve the practice of Family Medicine and increase the number of young physicians choosing this field of practice.

The legislature set up several immediate goals for the Family Practice Program at that time:

1. Development of a strong commitment toward the Family Practice Department from administration, hospital commissioners and faculty at St. Paul-Ramsey Hospital.
2. Development of an educational approach designed to prepare Family Practice residents to treat the frequently occurring health problems of their patients. It was also intended that they would receive thorough training in managing emergencies such as those associated with car accidents, gunshot wounds and obstetrical hemorrhages. The latter training is especially important for those physicians who practice in rural areas.
3. Recruitment of Family Practice Staff, interns and residents.
4. Development of a model Family Practice clinic.
5. Establishment of a solid base which will permit future expansion and a degree of self-sustenance for our department.

Since that time the Department has reached these goals. In fact, in the first 2 years 25% more residents were trained than projected and applications far exceed the number we can accommodate.

The principle upon which the Family Practice program is built is that:

the body of knowledge encompassed by Family Practice is definable, primarily in terms of frequently occurring health problems. From the academic perspective this means that it is possible for a physician to be well trained in his specialty and capable of managing at least 90% of his patients' problems.

The Family Practice Clinic is an essential part of this education. It provides a model for all family practice units and a practical training ground for future physicians. The clinic also helps the department be self-sustaining.

For these reasons a permanent facility has been built on the East Side of Saint Paul to house the Family Practice Clinic. The Department also staffs a West Side Community Health Center, and Satellite clinics at the Ramsey County Workhouse and the Ramsey County Jail.

In many ways, Family Practice is the most challenging form of health care delivery. Consequently, it is essential that Family Practice residents receive the highest quality education. This goal can be reached through the continued cooperation of the 20 medical departments of Saint Paul-Ramsey Hospital, its 62 full time and 318 part time and attending physicians. These physicians through their contribution of knowledge and resources in their special fields can give the Family Practice program the sound scientific base it needs.

The current state legislature appropriated the following amount for the Family Practice program at St. Paul-Ramsey Hospital:

\$418,000 for the academic year 1973-74. This is intended to pay for the training of 22 Family Practice residents.

The legislative appropriation states that these monies can be used only for the postgraduate education of Family Practice residents. In addition to these funds, the Department received an appropriation of approximately \$100,000 from the National Institute of Health. Also the Medical Education and Research Foundation contributes \$25-50,000 annually. Without the additional income from these sources the department could not function adequately and would be in danger of dissolution.

## OUTLINE OF FAMILY PRACTICE PROGRAM AT ST. PAUL-RAMSEY HOSPITAL

The goals and objectives of this residency program have been related in the pamphlet entitled, Family Practice Residency. The following is a more detailed description of the methods by which these objectives are approached.

The Family Practice residents can anticipate the following schedules over their three-year experience at St. Paul-Ramsey Hospital.

### FIRST YEAR

- .... The first year incorporates rotations on Orthopedics, Obstetrics, Pediatrics, Internal Medicine, Surgery, Psychiatry and the Emergency Room.
- .... Trainees spend a one-month rotation on the Family Practice Service and in the Family Practice Clinic. This experience is intended to provide a more intense exposure to the concepts of Family Practice.
- .... Following the above rotation, first-year residents spend one afternoon a week in the Family Practice Clinic throughout the remaining year. Thus they have the opportunity to develop an ongoing continuous relationship with approximately 15 to 25 families during this period.

### SECOND YEAR

- .... During the second year, residents pursue block training in Surgery, Internal Medicine, Pediatrics and Obstetrics-Gynecology. Residents will be assigned to services in pairs.

SURGERY This three-month rotation is divided into the following experiences: Heavy emphasis will be placed on TRAUMA, especially for those residents intending to practice in rural areas. This rotation will incorporate experiences in emergency surgery, skin grafting and plastic repairs.

Residents will also become quite comfortable with head trauma and other NEUROSURGICAL PROBLEMS and will spend time on the nationally recognized Burn Unit at St. Paul-Ramsey Hospital.

Residents will be given considerable exposure to MINOR SURGICAL PROCEDURES throughout this rotation as well as in the Family Practice Clinic.

At least one month will be spent on GENERAL SURGERY. Residents will have opportunity to build on their surgical knowledge gained from their first year concerning evaluation of surgical candidates, pre- and postop care, and common surgical procedures.

INTERNAL MEDICINE On this service the Family Practice resident is assigned patients on the same basis as other residents in this discipline. He is responsible for the White Medicine Service as well as for his patients in the Coronary Care Unit.

PEDIATRICS The Family Practice resident is the primary physician in the Intensive Care Unit and alternates with the Pediatric resident in the Newborn Nursery. Thus Family Practice residents become very comfortable in dealing with premature babies and high-risk infants. In addition, residents are exposed to pediatric patients, both as ambulatory and as inpatients, throughout their residencies. Second-year residents also spend six weeks at Children's Hospital in St. Paul on the General Pediatric Service.

OESTETRICS-GYNECOLOGY This rotation is intended to provide the resident with further experience in more complicated deliveries as well as gynecological problems and surgical procedures.

- .... The second-year resident attends the Family Practice Clinic two afternoons a week. During this time his partner assumes his inpatient duties. In this way he will carry out ward responsibilities while assigned to the various departments and yet be free to participate in the ongoing, continuous, comprehensive care of his Family Practice patients who will now number approximately 35 families.

### THIRD YEAR

- .... The resident will be expected to spend a one-month rotation in either a rural or metropolitan area, similar to where he would eventually like to practice. He will be encouraged to do this the first portion of his last year so that he will be able to draw on this experience in determining what electives he would like to pursue. The last year is intended to provide an opportunity for the resident to build on the solid basis of patient care established during the first two years, to integrate this knowledge and pursue a flexible approach during his remaining months of the residency in order to reach his intended goals.
- .... He will spend four afternoons or their equivalent in the Family Practice Clinic. He will also be responsible for the Family Practice Service in the hospital.
- .... He will be offered selected electives in such areas as Otolaryngology, Anesthesiology, Dermatology, Ophthalmology, Neurology, and Proctology. Electives will be available also in the Public Health Department and many other subspecialty areas.
- .... The resident will be working closely with consultants in various specialties in the daily care of his patients, not only in the hospital but also in the Family Practice Clinic.
- .... Residents may register in the Graduate School at the University of Minnesota and pursue a Master's degree in Family Practice and Community Health. They may participate in conferences and seminars at that institution as well as courses in subjects such as Anthropology, Medical Sociology and Decision Analysis.
- .... Physicians intending to practice in isolated or rural areas will be given opportunity to pursue Surgery and Obstetrics in greater depth during their last year to insure competence in managing patients with problems such as

those resulting from obstetrical hemorrhages, car accidents and gunshot wounds. If a resident desires further surgical experience and contemplates going into an isolated area, he may pursue an extra year of surgery.

- .... Thus the last year should provide an excellent opportunity for the Family Practice resident to integrate and synthesize his knowledge, grow further in self-awareness, solidify his marriage and relationships to others, and in general establish patterns of behavior which will prepare him for a life marked by continuous growth and enrichment.

\*\*\*\*\*

#### SEMINARS AND CONFERENCES

- .... Behavioral Science seminars are held every Wednesday from 12:30 to 1:30. A luncheon is served during this time and Behavioral Science subjects are presented. Topics are chosen which are of particular interest to the interns and residents as well as practicing physicians. We encourage a format which consists of a short written handout, a 20-minute presentation, and the remaining time devoted to discussion and interchange among the participants. These seminars are oriented towards practical application. I am enclosing a list of seminar subjects presented over the past few months.
- .... Organic Disease seminars are held as luncheon meetings on Fridays from 12:30 to 1:30. These are devoted to the frequently occurring diseases confronting the family physician as well as management of emergencies. The format is similar to that outlined for the Behavioral Science seminars. It is recognized that when treating the whole patient, it is impossible to separate health care into discrete components such as organic disease and behavioral science. On the other hand this classification does permit clarification of topics for didactic purposes.
- .... A Family Life workshop is held one evening each month. This is attended by interns, residents, staff members and their spouses. The topics range from principles of communication to movies concerned with sexual desensitization. In general the goal is to help all of us with our own marriages and to assist us in integrating our marriage into our total life pattern, thus enhancing our abilities as physicians, spouses and parents. In addition we hope to become better counselors to our patients who are undergoing marital difficulties.
- .... Monthly clinical pathological conferences based on pathology detected in the Family Practice Clinic are held in cooperation with the Pathology Department of St. Paul-Ramsey Hospital. In addition, clinical pathologists, otolaryngologists, dermatologists, urologists, orthopedists, and other subspecialists are available to the Family Practice Clinic for ongoing consultation as well as for periodic conferences based on problems encountered in ambulatory care.

\*\*\*\*\*

#### FAMILY PRACTICE CLINICS

The model Family Practice Clinic is located one mile from St. Paul-Ramsey Hospital.

It is a modular, prefabricated structure completed in October, 1972. It has 5,000 square feet with a full basement. The clinic has 11 examining rooms and is well equipped with x-ray and laboratory facilities, audiovisual capabilities and a modern resource center utilizing cassettes, slides and an extensive library. This neighborhood clinic provides residents with the opportunity to treat patients and their families in their community setting. In addition, the clinic patients benefit from the back-up facilities of St. Paul-Ramsey Hospital including its Family Practice Service, the cooperative assistance of the other 20 departments, its 60 full-time specialists and many part-time consultants. Consequently, we have the capabilities to deliver personal, comprehensive care to the patients in a continuous manner thus avoiding many of the problems associated with fragmentation of health care. We intend to have a meaningful impact on the health of our patients and to provide a model which is reproducible so that our trainees will be able to carry these ideas with them into actual practice.

As a supplement to the model Family Practice Clinic on the lower East Side of St. Paul, we have developed a satellite clinic on the West Side of St. Paul, devoted to health care of a low-income population. Depending upon community cooperation and the interest of the Family Practice residents, this could develop into a second major clinic for our department. At the present it provides an opportunity for interested residents to discover that a physician can take very good care of patients without sophisticated laboratory tests. This clinic emphasizes the importance of a solid clinical foundation such as the ability to take a good medical history, to perform a competent physical exam, and to be selective in ordering laboratory evaluations. This also provides an opportunity for the socially motivated physician to cooperate with community residents living in a very volatile area in order to improve their total health status.

Those residents who are interested may also participate in two clinics at the Ramsey County Workhouse and County Jail designed to deliver ambulatory care to the prisoners. This has turned out to be a very fascinating area of health care delivery.

The Family Practice Department will be responsible for a senior citizens clinic which will be developed in a high-rise building project scheduled to be completed by January, 1974. This project is several blocks away from the main Family Practice Clinic. It will be staffed primarily by an adult nurse practitioner with back-up provided by staff and residents. This will provide residents with familiarity and experience in a form of health care delivery applicable to future trends in medicine.

\*\*\*\*\*

There will be many opportunities for interested residents to pursue research projects ranging from computerized analyses of doctor-patient encounters and patient care needs to biochemical studies or laboratory animal research.

\*\*\*\*\*

It is intended that the graduate of this program will be able to manage a majority of the common problems afflicting the patient and his family. We anticipate that his training will be based soundly on academic principles and that the full expertise of St. Paul-Ramsey will be utilized in the resident's training, providing a solid in-depth experience. Consequently, considerable effort has gone into

developing relationships between the Department of Family Practice and the other departments and divisions at St. Paul-Ramsey. Mutually satisfactory arrangements have been made with the heads of these departments. Many of the specialists at St. Paul-Ramsey are well oriented toward Family Practice and the depth of commitment to our program from these physicians is unique. St. Paul-Ramsey enjoys a major affiliation with the University of Minnesota which contributes to the academic atmosphere. However, it retains a strong clinical orientation and resident-centered approach in which the house staff assumes a major responsibility for patient care. This residency is characterized by several other prominent features which include a problem-oriented record system designed for ambulatory care and independent financing from the State Legislature and several other funding agencies allowing us to develop a strong academic program that is not dependent on patient revenue as its primary source of financing.

Because of these factors, I feel that graduates from this program will be comfortable in the practice of family medicine in whatever location they choose, whether it be in the medically disadvantaged areas, middle-class neighborhoods, or rural communities.

Vincent R. Hunt, M. D.  
Director, Department of Family Practice  
St. Paul-Ramsey Hospital

STATUS OF 1971-72 FAMILY PRACTICE APPROPRIATION  
July 1, 1971 - June 30, 1972

State of Minnesota Appropriation 1971-72		\$452,920.00
Personnel, including fringe benefits	\$ 70,048.92	
Equipment*	72,351.00	
Reimbursed expenses incurred at Saint Paul- Ramsey Hospital	116,328.00	
Alterations, land costs, building costs*	189,370.00	
Other (publications, graphic illustrations, etc.)	60.00	
Unliquidated obligations	<u>4,762.08</u>	
Total expenditures and obligations		<u>\$452,920.00</u>
Unexpended Balance		-0-

\* \$72,351.00 transferred to Account 9366-9757-04 for equipment purchases and \$179,070.00 transferred to 9366-9757-02 for building costs on Request for Transfer of Funds, Type 02, #12956. 4/72.

STATUS OF 1972-73 FAMILY PRACTICE APPROPRIATION  
First Half - July 1, 1972 - December 31, 1972

State of Minnesota Appropriation 1972-73  
Saint Paul-Ramsey Family Practice

\$501,536.00

Salary Expenses:

Direct Salary - University of Minnesota \$ 49,166.00  
Direct Salary - Saint Paul-Ramsey 117,335.00

Total Salary \$166,501.00

Employee Benefits:

Estimated through University of Minn. 5,400.00  
Saint Paul-Ramsey Hospital 4,718.00  
10,118.00

Medical Fees Expense 14,277.00

Medical Supplies 4,193.00

Other Supplies 6,442.00

Purchases Services 3,669.00

Educational Expense 2,339.00

Other Expense \$39,459  
less capital equipment ( 33,342) 1,117.00  
to be allocated to  
1971-72 encumbered funds

Total Expenses - July 1, 1972 - December 31, 1972 208,656.00

Balance of Appropriation January 1, 1973 -  
June 30, 1973

\$292,930.00

REPORT ON STATUS OF FAMILY PRACTICE CLINIC  
SAINT PAUL-RAMSEY HOSPITAL

As Of  
February 13, 1973

The construction work for the Family Practice Clinic is essentially completed except for the site improvement work which will be done as soon as the weather permits. In accordance with our recent phone conversation, the following fiscal summary has been prepared. The listed expenditures are the actual amounts spent for each item or the current estimated cost where the work has not been completed. It is believed that the contingency of \$4,343.43 is sufficient to cover the costs of any remaining unforeseen items. The summary below does not include the \$12,300 for the acquisition of land either as a cost or available fund.

The cost summary is as follows:

Building Construction - Marshall Erdman & Associates		\$163,224.00
Architectural Services - Hammel, Green & Abrahamson		2,923.21
Associated Costs:		
Supervision of Construction	\$ 429.31	
Site Improvements	9,720.00	
Site Survey, Testholes, etc.	1,463.53	
Misc. Engineering & Plan Checking	47.32	
Fire Extinguishers, Towel Cabinets, etc.	99.72	
Advertisements for Bids	47.10	
Demolition of Building	1,147.48	
Plumbing Connections - Avoies Plumbing	124.90	13,079.36
Available for Contingencies		4,343.43
Total Construction Costs		<u>183,570.00</u>
Movable Equipment		67,851.00
Total Project Cost		<u>\$251,421.00</u>
Total Funds Available		\$251,421.00

SAINT PAUL-RAMSEY HOSPITAL AND MEDICAL CENTER  
FAMILY PRACTICE DEPARTMENT

REPORT ON CLINIC ACTIVITIES  
October 1972 - February 1973

East Side Clinic (Opened October 23, 1972):

	Oct.	Nov.	Dec.	Jan.	Feb.	5-Month Total
New Patients	22	65	73	80	105	345
Repeat Visits	6	32	43	67	77	225
Total Visits	28	97	116	147	182	570

West Side Community Health Center:

Since opening on December 15, 1972, 227 patients have been treated at the West Side Clinic representing 254 visits.

Detention Facilities Program:

Ramsey County Jail (Beginning January 1, 1973)

Provides medical care to population that includes 3,800 prisoners per year (7,600 males and 2,200 females) who are detained during the course of each year. Approximately 25 visits per week.

Detention and Corrections Authority (Workhouse)

Provides general medical care to prison population of approximately 350, emphasizing principles of continuity of care and comprehensiveness of approach. Approximately 25 visits per week.

DWG:

3/16/73

FAMILY PRACTICE DEPARTMENT BUDGET - SAINT PAUL-RAMSEY HOSPITAL AND MEDICAL CENTER

1973-74 AND 1974-75

OPTIMUM PROGRAM BUDGET

<u>I. PROGRAM EXPENSES:</u>	<u>No. Personnel</u>	<u>1973-74</u>	<u>No. Personnel</u>	<u>1974-75</u>	<u>Biennium</u>
<u>A. Resident Stipends &amp; Fringe Benefits</u>					
First Year	(12 x 10,000)	\$120,000	(12 x 10,500)	\$126,000	
Second Year	( 9 x 10,800)	97,200	(12 x 11,340)	136,080	
Third Year	( 9 x 11,300)	101,700	(12 x 11,865)	142,380	
Fringe Benefits (4%)		<u>12,750<sup>756</sup></u>		<u>16,178</u>	
Total	30 Trainees	\$331,656 <sup>ok</sup>	36 Trainees	\$420,638	\$ 752,294 <sup>ok</sup>
<u>B. M.D. Faculty Salaries &amp; Fringe Benefits</u>					
1 Program Director	1	45,000	1	47,500	
1 Assistant Program Director	1	40,000	1	42,500	
Staff Physicians	3	109,600	4	160,000	
Consultant Staff	6	60,000	6	60,000	
U of M Fringe Benefits (13.6% of \$194,600)		<u>26,466</u>		<u>34,000</u>	
Total	11	\$281,066	12	\$344,000	\$625,066
<u>C. Departmental &amp; Clinic Personnel Expense</u>					
Administrator	1	15,500	1	16,350	
Clinic Manager	1	8,000	1	8,440	
Clinical Social Worker III	1	15,154	1	15,987	
Nurse	1	9,120	1	9,620	
Nursing Assistant	1	5,844	1	6,036	
X-Ray Tech. II	1	7,761	1	8,188	
Lab Tech. I	1	6,620	1	6,985	
Principal Secretary (Medical)	1	9,457	1	9,957	
Medical Secretary	1	6,950	1	7,332	
Clerk Typist II	1	5,760	1	6,077	
Clerk Typist I	1	<u>5,136</u>	1	<u>5,418</u>	
Total Salaries	11	\$ 95,302	11	\$100,390	
Fringe Benefits (15%)		<u>14,295</u>		<u>15,059</u>	
Total Salaries & Fringe Benefits		\$109,597		\$115,449	\$225,046

Family Practice Department Budget - Saint Paul-Ramsey Hospital  
1973-74 and 1974-75

	<u>No. Personnel</u>	<u>1973-74</u>	<u>No. Personnel</u>	<u>1974-75</u>	<u>Biennium</u>
<b>D. <u>Medical Fees</u></b>					
Medicine - Neurology		\$ 10,000		\$ 12,000	
Obstetrics - Gynecology		10,000		12,000	
Pediatrics		10,000		12,000	
Surgery		10,000		12,000	
Third Year Resident Elective Speciality Experience	(50 x 52 x 9)	23,400	(50 x 52 x 12)	31,200	
Total Fees		\$ 63,400		\$ 79,200	\$ 142,600
<b>E. Total Stipends, Salaries, Fees, Fringe Benefits (A + B + C + D)</b>		<u>\$785,719</u>		<u>\$959,287</u>	<u>\$1,745,006</u>
<b>F. Overhead Expense (Water, Heat, Electric Based on 7,500 Sq. Ft.)</b>		15,000		18,750	33,750
<b>G. <u>Educational Expense</u></b>					
Books and Periodicals		1,200		1,500	
Conference and Travel		3,000		3,000	
Accreditation & Membership		1,000		1,000	
Other Educational Expense		500		500	
Special Conference & Workshops		4,000		4,000	
Total		\$ 9,700		\$ 10,000	19,700
<b>H. <u>Medical Supplies</u></b>					
Drugs		1,000		1,200	
Gauze & Dressings		2,000		2,500	
X-Ray and Photo		3,000		3,800	
Medical Record Forms & Other Supplies & Services		12,000		15,000	40,500
		<u>18,000</u>		<u>22,500</u>	
<b>I. <u>Miscellaneous</u></b>					
Postage		200		220	
Computer Service		6,000		7,000	
Equipment		2,000		2,500	
Other		500		800	
Total		<u>8,700</u>		<u>10,520</u>	

	<u>No. Personnel</u>	<u>1973-74</u>	<u>No. Personnel</u>	<u>1974-75</u>	<u>Biennium</u>
J. <u>Community Services Expenses</u>					
Through Medical Education & Research Foundation		\$ 24,533		\$ 24,533	\$ 49,066
TOTAL PROGRAM EXPENSES (E + F + G + H + I + J)		\$861,652		\$1,045,590	\$1,907,242
					\$28,897/ Resident

## II. PROGRAM REVENUES:

A. State of Minnesota - Governor's / Recommendation (\$21,458 each)				\$ 987,068
B. East Side Clinic	\$ 60,000		\$ 80,000	140,000
C. Community Services	22,100		22,100	44,200
D. N.I.H. Grant (1973-74 only)	102,000		--	<u>102,000</u>
				\$1,273,368
(Deficit)				<sup>774</sup> (\$ 633,974)

SPEECH TO THE EDUCATION SUBCOMMITTEE OF THE HOUSE APPROPRIATION COMMITTEE  
March 1, 1973

Mr. Chairman, Representatives and Guests:

During its last session, the State Legislature appropriated monies for the development of a Family Practice program at St. Paul-Ramsey Hospital. During our presentations to the legislature two years ago we projected the following goals:

1. Development of a strong commitment toward the Family Practice Department from administration, hospital commissioners and faculty at St. Paul-Ramsey Hospital.
2. Development of an educational approach designed to prepare Family Practice residents to treat the frequently occurring health problems of their patients. It was also intended that they would receive thorough training in managing emergencies such as those associated with car accidents, gunshot wounds and obstetrical hemorrhages. The latter training is especially important for those physicians who practice in rural areas.
3. Recruitment of Family Practice staff, interns and residents.
4. Development of a model Family Practice clinic.
5. Establishment of a solid base which will permit future expansion and a degree of self-sustenance for our department.

These goals have been accomplished; in fact, during this current biennium we have trained 25% more residents than projected. We have received far more applicants than we can accommodate. For example, 95 medical students applied for our 8 first year positions beginning July, 1973.

Our request for the next biennium is for approximately the same amount as the past two years. On the other hand, we are projecting an 85% increase in trainees accommodated. This decrease in per capita cost is due to the following factors, all of which have been taken into account in our projected budget:

1. Considerable start-up expenses were incurred during the first part of the biennium. These costs will not be repeated.
2. We have obtained unanticipated support from both staff and administration at St. Paul-Ramsey Hospital which has cut down on the projected educational costs for our residents.
3. Further financial support will be obtained from income generated in the Family Practice clinic.
4. We have received \$79,000 from the National Institute of Health and hope to receive a similar grant over the next two years. We have also received smaller grants from the Hill Family Foundation, The Office of Economic Opportunity, the Dush Foundation and the Medical Education & Research Foundation at St. Paul-Ramsey.

5. We have established satellite clinics in the Mexican-American community of the West side of St. Paul, the Ramsey County Workhouse and the Ramsey County Jail, all of which are funded from sources other than legislative grants.

Although it is necessary to educate enough physicians for the needs of our state, numbers alone will not suffice. It is extremely important to consider what type of physician is being trained. In many ways, Family Practice is the most challenging form of health delivery which a physician can enter. Consequently, it is essential that Family Practice residents receive high quality education. The Family Physician is called upon to make many crucial decisions, often involving life and death matters. It is paradoxical that up to the present time this doctor has actually had less training than his specialty colleagues. Because of these factors family physicians should be as well trained as possible. If so, they are more likely to retain the respect of their medical colleagues, their patients, medical students, those of you in the Legislature and members of society. This means that concepts such as comprehensiveness of care, continuity of approach, treatment of the "whole patient", concern for the medically disadvantaged and utilization of allied medical personnel have to be translated into an understandable reality within established educational institutions. Furthermore, Family Practice programs have to draw upon the resources of other specialists for educating Family Physicians in addition to the teaching provided by those of us who have been in general practice. St. Paul-Ramsey is in a unique position to respond to this challenge and participate in developing a viable educational approach which will provide a secure future for general practice and family medicine in the State of Minnesota. This teaching institution has much to offer. For instance, strong academic relationships have been developed with its 20 other departments, its 57 full-time physicians and its 318 part-time and attending physicians.

In summary, I believe our program has lived up to the statements made to Legislative Committees two years ago.

A strong basis has been established and I hope we will be permitted to build upon this foundation during the next biennium.

Vincent R. Hunt, M.D.  
Director, Department of Family Practice  
St. Paul-Ramsey Hospital  
Associate Professor  
University of Minnesota Medical School

7. The patient is best served when Family Physicians work closely with their medical colleagues in the other specialties.
8. The Family Practice concept is particularly important in today's mechanistic and technological society. The meaningful personal encounters which are in many ways unique to Family Practice offer a viable alternative to these potentially corrosive forces in our society. This approach enriches the lives of both patient and physician.
9. It is possible for a concerned, socially motivated physician to carry out his inclinations within the vehicle of Family Practice while retaining his humanity and enhancing his marital and family relationships.

A unique feature of the Family Practice Department at St. Paul-Ramsey Hospital is its community based neighborhood clinic. The structure is located in an area with a stable population from various socio-economic groups. This clinic provides comprehensive services to the area residents. These services include x-ray, lab facilities, emergency care, community out-reach programs, counseling, group therapy, patient education modalities and the back-up facilities of St. Paul-Ramsey Hospital. In-clinic consultation services are provided by Family Physicians, an Internist, Pediatrician, Clinical Pathologist, Radiologist, Social Worker and Dietitian. Additional specialty consultations are scheduled periodically in the clinic. Clinic facilities also include a modern resource center utilizing videotape cassettes, slides, audio tapes, demonstration models, periodicals and textbooks available to the Family Practice resident at all times.

In addition, the Family Practice Department is responsible for "satellite" clinics in a medically disadvantaged area in the West side of St. Paul, the County Workhouse, the City-County jail and a senior citizen high rise clinic where nurse practitioners are utilized. These activities add an additional dimension of social concern to the program.

DEPARTMENT OF FAMILY PRACTICE • ST. PAUL-RAMSEY HOSPITAL  
640 Jackson, St. Paul, Minnesota 55101 • Telephone (612) 222-4260 Extension 616

For further information, please contact:



# st. paul-ramsey hospital FAMILY MEDICINE RESIDENCY

**The three-year Family Practice program at St. Paul-Ramsey Hospital and Medical Center is designed to blend competence and concern in the treatment of the whole patient within the context of his family and social environment.**

The objectives of the Department of Family Practice at St. Paul-Ramsey Hospital are based on the following principles:

1. A Family Practitioner must know how to care for sick people and must have confidence in himself in order to gain the confidence of his patients. This knowledge is basic to his functioning as a physician.
2. The Family Practitioner treats the whole patient. He must, therefore, be cognizant of the patient's mind and body and of the familial, occupational and environmental stresses to which he is subjected.
3. The body of knowledge encompassed by Family Practice is DEFINABLE, primarily in terms of frequently occurring health problems. From the academic perspective, this means that it is possible for a physician to be well trained in this specialty and capable of managing at least 90% of his patients' problems.
4. In addition to gaining expertise in the frequently occurring diseases, Family Practice residents must receive intensive training in emergency situations where diseases are likely to be more acute and life threatening.
5. A resident learns best in an atmosphere of co-operation, helpfulness and inquiry.
6. The Family Practice Clinic is essential in order to provide the resident with an environment in which he can synthesize his learning experience and obtain knowledge which will be transferable to his future practice.

## FIRST YEAR:

The first year of the program incorporates rotations on the following services: Medicine, Pediatrics, Surgery, OB-Gyn, Orthopedics, Psychiatry and the Emergency Room. In addition, residents spend one month in the Family Practice Clinic and on the Family Practice Service in the hospital. Subsequent to this experience they spend one afternoon a week in the Family Practice Clinic. Residents participate in two seminars a week—one devoted to frequently occurring diseases encountered in Family Practice and the other dealing with Behavioral Science subjects such as management of the chemically dependent patient, counseling techniques and unique stress factors affecting physicians. Periodic evening seminars concerning marriage counseling and human sexuality are held for the residents, staff members and their spouses. Although this is considered the first year of a three year Family Practice Residency, the training will qualify as a rotating internship.

## SECOND YEAR:

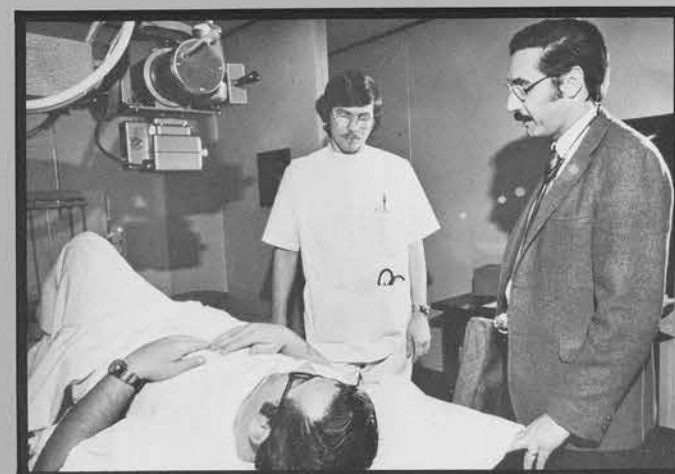
The second year resident spends two afternoons a week in the Family Practice Clinic. He also serves rotations in Surgery, OB-Gyn, Pediatrics and Internal Medicine. This training brings him in close contact with the full and part time specialists at St. Paul-Ramsey Hospital. He shares in taking call for his own patients and admits to the Family Practice Service.



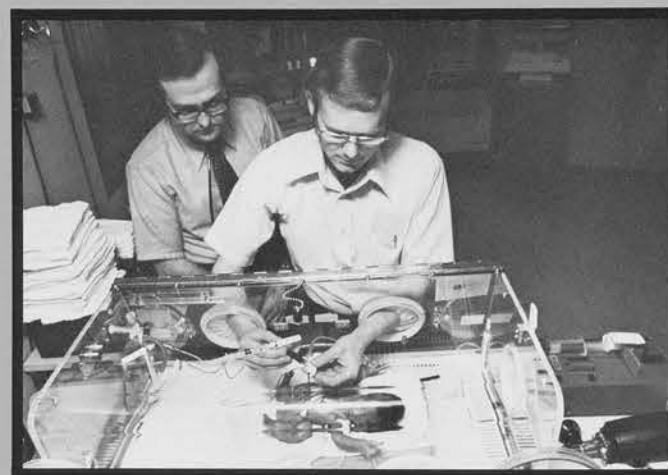
Dr. Louis Decubus and Dr. Phil Freedman in the West Side Satellite Clinic.



Dr. Patty Hill examines a willing patient in the Family Practice Clinic.



Drs. Bob Derro and Bart Erickson with a Family Practice patient.



Drs. Ray Hippchen and Carter Hedeon working in the Pediatric Intensive Care Unit.



Residents, staff members and spouses attending the monthly evening marriage workshop.



Dr. Jack McLeod emphasizes a point in a Family Practice conference.

## THIRD YEAR:

Flexibility is stressed during the third year. Residents have an opportunity to pursue their specific goals and interests. Third year residents have major responsibility for the Family Practice Service in the hospital. They spend the equivalent of four afternoons a week in the Family Practice Clinic. Electives are offered in such fields as ENT, Dermatology, Laboratory Medicine, Ophthalmology, Proctology and Public Health. Physicians intending to practice in isolated or rural areas are given the opportunity to pursue Surgery and Obstetrics in greater depth to insure their competence in managing patients with problems such as those resulting from obstetrical hemorrhage, car accidents and gunshot wounds.

This training is "resident centered" with considerable responsibility placed upon the resident for the care of his patient with appropriate staff supervision and consultation. In addition, Family Practice Residents have close access to the sixty full time specialists and nineteen departments at St. Paul-Ramsey Hospital. These consultants are always available for impromptu advice as well as formal consultation during the residency years as well as after graduation.

# Stillwater Security Unit

Section 7

STILLWATER  
SECURITY UNIT

## 7. STILLWATER SECURITY UNIT

Approximately one year ago discussions were begun between St. Paul-Ramsey Hospital and the Department of Corrections relative to medical care for inmates of prison systems in Minnesota. A program has been developed that will upgrade the entire range of health care to provide continuity of care for inpatients and outpatients, and a full range of medical specialty services, and a new high quality inpatient facility. A security unit to be constructed at St. Paul-Ramsey Hospital will accommodate up to 15 patients in an environment that is oriented to patient care. Nursing and security personnel will staff the area on a 24-hour basis.

The plan calls for the medical staff at St. Paul-Ramsey Hospital to provide medical specialty consultation at Stillwater on a scheduled basis. Inmates requiring hospitalization will be referred to the appropriate medical service at St. Paul-Ramsey and will be housed in the Security Unit. The Department of Family Practice will have responsibility for the coordination of care and for the primary care of the patients admitted to the Security Unit. Primary care at Stillwater will be provided on a daily basis by a member of St. Paul-Ramsey's medical staff.

Operation of this program over a period of time will provide the data necessary to evaluate alternate methods of financing the medical care of inmates. Currently, the method of payment will be on a fee for service basis with hospital charges taking the usual form of itemized bills for each admission. It is hoped that experience and information during the first stage of operation will indicate that financing on a per capita basis is a viable alternative to fee for service.

Bids have been let for the modifications of a circle at St. Paul-Ramsey with work scheduled to begin in November 1973. A draft of the detailed plan is attached.

It should be pointed out that the unit will accommodate the prisoner hospital care for all St. Paul and Ramsey County detention facilities as well.

## DRAFT PLAN FOR THE CARE OF PRISONERS AT STILLWATER

### Primary Care

1. Saint Paul-Ramsey Hospital will provide primary care to the Minnesota State Prison population. Dr. Jack McLeod will fill this role; continuing his existing University faculty status. Five days a week the primary physician will make visits to the maximum security unit at Saint Paul-Ramsey Hospital to see patients as a liaison effort and to participate in teaching rounds. He will then go to the Minnesota State Prison for patient visits and related duties. His normal working time for Minnesota State Prison duties will be approximately 6 1/2 hours per day, four days a week and approximately four hours per day one day a week. Approximately six hours per week (of the 40-hour week) will be trade-off for on-call coverage two nights per week. On the fifth day he will spend the afternoon at Saint Paul-Ramsey Hospital fulfilling teaching responsibilities with the Department of Family Practice. He may also have residents at the prison for teaching purposes.
2. The primary care physician will have full and complete responsibility for the total medical care at the Minnesota State Prison coordinating with the consultants who visit at the prison and providing for smooth implementation of their suggestions and modes. Referrals to Saint Paul-Ramsey Hospital for either outpatient or inpatient services will be initiated by the primary physician. Post operative patients dismissed from Saint Paul-Ramsey Hospital Security Unit to return to Minnesota State Prison will be sent to the prison health service and remain there under close security until such time as the visiting consultant decides that he can join the other prison population.

3. The primary physician, with the assistance of both St. Paul-Ramsey and Department of Corrections administrators, will arrange for physician coverage in the absence of Dr. McLeod. This coverage will be provided by practicing physicians or qualified medical residents who may be available. The service units these individuals may cover are on-call, limited service, and full-"on call service" is the period of time the primary physician is off duty from the completion of one work day to the beginning of the next work day. (There are 249 such days per year, 157 of which will be covered by part-time physicians.)

"Limited service" on weekends and holidays consists of on-call coverage for 24 hours plus a brief visit (approximately one hour) to the health service to discuss problem cases with the nursing staff and to see patients with urgent problems. (There are 116 such days in a year.)

"Full service" means seeing patients at the health service and performing related duties of the full-time primary physician in his absence. (There are 30 such days in a year.)

#### VISITING SPECIALISTS (CONSULTANTS)

1. Consultants will make one-half day visits to the Minnesota State Prison as scheduled by the primary physician. An initial three month schedule based on previous experience will be developed by the primary physician. Long range modifications to this consultative schedule will be made by the primary physician in consultation with department heads involved and with the approval of the Joint Operations Committee.
2. The consultant, with primary physician input, will design programs of treatment appropriate to the individual patient, always considering the unique environment at the prison.

3. Individual staff physicians will strive to provide continuous consultative services except when special arrangements are made with the primary physician for alternate coverage.
4. Adequate medical records on each patient will be made available to the consultant. These records will be developed in consultation with the Medical Record Committee at St. Paul-Ramsey. The consultant will dictate a report for each patient each visit.
5. The Minnesota State Prison medical records will be sent with the patient to St. Paul-Ramsey Hospital for all inpatient and outpatient care. The prison medical record with a discharge summary will be returned to the prison on discharge. For outpatient care a note from the St. Paul-Ramsey Hospital physician will be attached to the chart and will be returned to the prison with the patient. St. Paul-Ramsey will maintain inpatient and outpatient medical records separate from the Minnesota State Prison system.

#### INPATIENT CARE

1. The Department of Family Practice will be responsible for overall care of all inpatients in the maximum security unit at St. Paul-Ramsey Hospital. Whenever a referral is made to a specialty department that department will thereafter assume the medical responsibility for that patient. A department staff member will act as coordinator with various medical and associated disciplines to assure efficient medical and procedural management of the facility.
2. All inpatients will be housed in the maximum security unit unless special medical conditions warrant other accommodations. Transfer from the security unit or admission to special care

areas at St. Paul-Ramsey will conform to the policies to be established by the Security Advisory Committee.

3. Nursing staffing appropriate to the census and the condition of the patients in the security unit will be provided on a 24-hour,
4. Payments for hospital inpatient services will be based on all direct, indirect, and overhead costs related to the operation of the maximum security unit. Itemized bills reflecting room and board and ancillary charges for each Minnesota State Prison patient admitted to and discharged from the unit each month including adjustments to cover total costs will be submitted monthly for payment.

#### OUTPATIENT

1. Specialized medical services that cannot be provided at Minnesota State Prison will be provided at St. Paul-Ramsey Hospital.
2. Coordination of Minnesota State Prison patients and the outpatient department at St. Paul-Ramsey will be the responsibility of the primary physician (assisted by the "coordinator of Health Care") and the clinic manager.

#### SURGERY

1. Surgery will be performed by St. Paul-Ramsey Hospital staff surgeons, or by surgery residents under their personal and direct supervision.

#### ADMINISTRATION

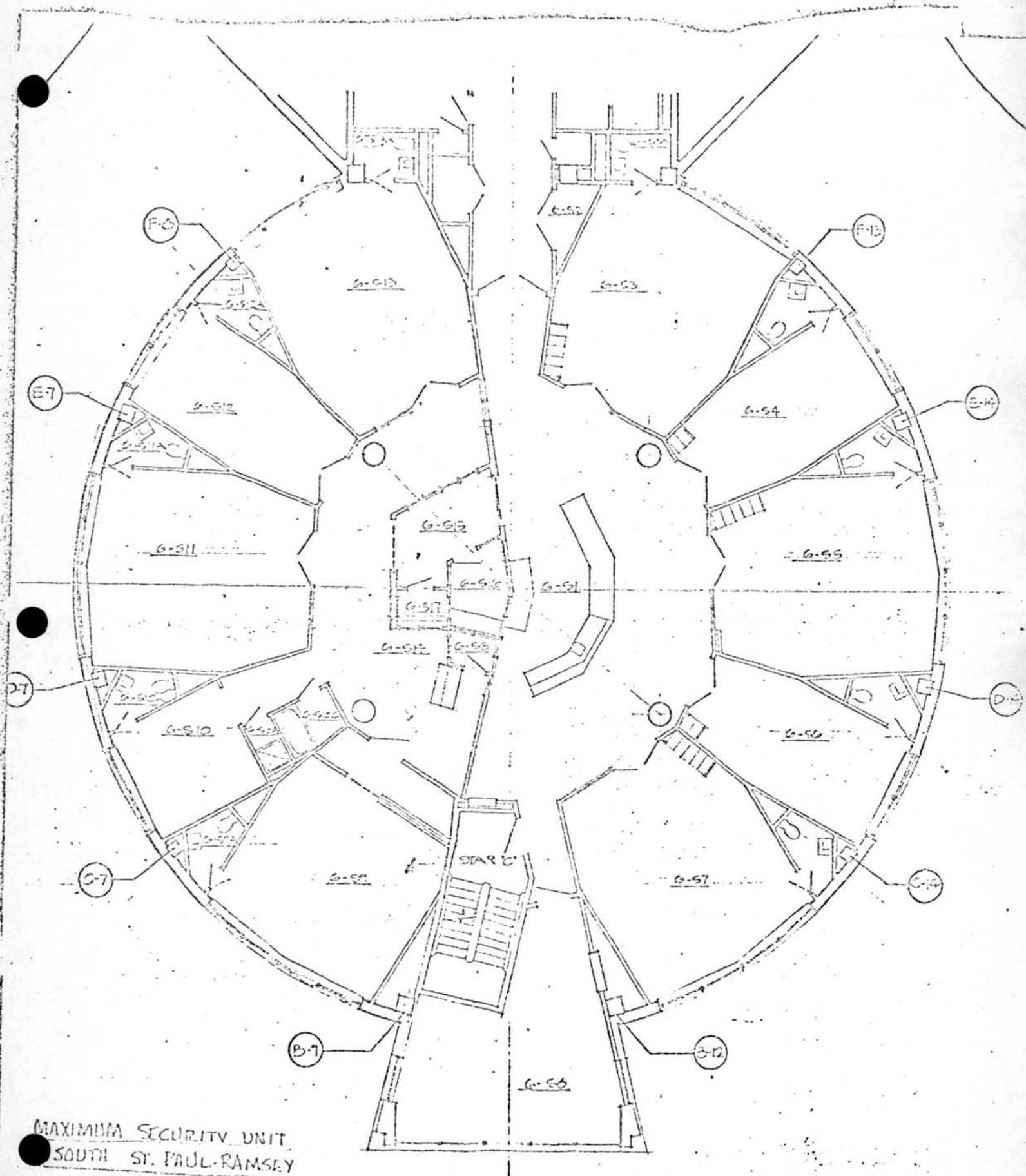
1. The Minnesota State Prison health service will be administered by a member of the St. Paul-Ramsey administration staff assigned to the health service on a half time basis.

#### GENERAL CONSIDERATIONS

1. A joint committee will be formed consisting of the primary physician, a representative from the Department of Corrections, the Saint Paul-Ramsey Hospital Administrator, the coordinator from the Department of Family Practice and the Chief of Staff from St. Paul-Ramsey Hospital. This committee will provide a mechanism whereby any disagreements and misunderstandings between the concerned parties can be arbitrated and resolved.
2. The intent of all hospital charges to the Department will be to recover costs incurred by St. Paul-Ramsey. Medical fees will be the usual and customary charges of the Foundation.

#### CONSTRUCTION

1. The Department of Corrections will fund all expenses related to the modification of and renovation of the hospital space designated as the maximum security unit. At the time this space is no longer available for regular inpatient and until it is again available the Department of Corrections will assume responsibility for all costs related to this space.
2. The Department of Corrections agrees in the event the inpatient security unit does not remain at St. Paul-Ramsey to fund all expense related to returning any modified and renovated space to its original condition.



MAXIMUM SECURITY UNIT  
SOUTH ST. PAUL RAMSEY

# Ramsey Health Plan

## Section 8

RAMSEY  
HEALTH PLAN

## 8. RAMSEY HEALTH PLAN

A Health Maintenance Organization, known as HMO, has been established and is functioning within the walls of the Saint Paul-Ramsey Hospital. This is an innovative type program in keeping with today's efforts to provide low cost prepaid health care delivery. The history of this organization is unique in that it was conceived, organized and implemented, within a period of seven months, as a consumer-oriented health care system within a teaching hospital, and without outside funding.

Ramsey Health Plan was made possible through the cooperation of four separate units:

1. The Board of Commissioners of Ramsey County who sought an optional health care plan for the 3,000 county employees. Blue Cross-Blue Shield of Minnesota was the only health plan available to the employees.
2. Saint Paul-Ramsey Hospital which became the site for the new plan. Once the hospital was chosen as the site for the clinic, the HMO contracted and is paying for space and services within the hospital.
3. The full time Hospital medical staff of sixty-two members. Each member of this staff holds a faculty appointment at the University of Minnesota. The Medical Education and Research Foundation to which each physician belongs collects professional fees and thereby supports research and education, and supplements faculty salaries. This physician group serves as a backup and supplies the referral system for the HMOclinic.

4. Group Health Plan, Inc., the largest prepaid health plan in the upper Midwest. Group Health was awarded a grant in 1971 from HEW to aid and advise in the formation of HMO's in this community. Since the inception of the Ramsey Health Plan, and up to the present time, Group Health has acted as our insurance mechanism. With Minnesota's new HMO law, and with the viability of the current plan Group Health has agreed to separate itself from our insurance mechanism control and Ramsey Health Plan will now be independent.

An incorporating board for Ramsey Health Plan was formed by the County Board of Commissioners. This Board was composed of three union members, two physicians, the County Civil Service Administrator, two County Commissioners and a health care professional. The Board met for the first few months at frequent intervals and was eventually enlarged to thirty members with a ratio of sixty percent consumers.

A very innovative part of this health plan was its original contract with Saint Paul-Ramsey Hospital to provide the inpatient and outpatient services on a capitation basis. In addition, it contracted with the Medical Education and Research Foundation for its medical services. It paid Group Health a percentage for carrying out its insurance mechanism.

The medical staff was kept advised of the plans and agreed with this concept of health care delivery, particularly inasmuch as this hospital could provide a setting for an experimental effort along these lines. Hopefully, the results would be available to other hospitals in the community. Contracts and agreements were drawn up between the incorporating board, Ramsey Hospital Commission, the Medical Education & Research Foundation and Group Health. In

October of 1972 the doors of the clinic were opened on the first floor of Saint Paul-Ramsey Hospital adjacent to the Emergency Room area.

The initial enrollment effort was very successful. Twenty-seven percent of the target group enrolled in this plan. Currently there are 538 single contracts, 348 family contracts, a total of 886 contracts for 1,932 individuals.

The Plan has almost completed one year of service. It is well integrated into the hospital mechanism but remains an independent corporation governed by its own Board and its own medical staff. The staff of Saint Paul-Ramsey Hospital continues to supply its backup medical service needs. Group Health will be withdrawing from the insurance managerial role. This role will be carried out by employees of the Plan itself.

It would appear that in general the medical service supplied by Ramsey Health Plan has been well accepted and approved by its membership. At the end of a nine-month period there is a total deficit of up to \$3,000. For a yearly budget of \$360,000 this is felt to be acceptable for the first year of operation. Attached is the current expense and balance sheet which represents the first nine months of operation.

Plans for the immediate future: It is anticipated that this Plan will maintain its current strong position in the County employee area when enrollment is opened again in the late fall. We would also like to be an option in the City plan which has its open enrollment at the same time. The present clinic area will support twice the volume that we now have. Should enrollment increase beyond the capacity of the current clinic, we will have to seek additional space.

Long Range Plans: We expect Ramsey Health Plan to prosper and grow.

Its activities fit in well with the current concept of providing as much ambulatory care as possible in order to reduce expensive inpatient treatment as much as possible. Such a change is mandatory if we are to reduce the evermounting cost of medical care. This problem obviously presents a paradox in that we are supporting ambulatory care not only in this Health Plan but also in the hospital's own Outpatient Clinics while the hospital is constantly struggling to maintain its census.

If the new Gillette/SPRH building is completed within a two-year period, Ramsey Health Plan can move into its own planned area in the new building. The Plan will seek some form of building grant or low interest loan from government sources for this expansion although these sources are almost nonexistent at the present time. We hope to utilize the new space jointly with the hospital's own outpatient services. The space would be used at least twelve hours by the two distinct units. This use of space would be more efficient and effectively lower expenses. This would allow us to provide care at a lower rate for the people of this community.

The mechanism and the financial balance sheets of Ramsey Health Plan have been made available to anyone in the medical hospital community. We like to think of the Plan as being an experimental project, operating within the confines of a hospital but still independent of the hospital. The results, trials and hopefully the successes of this Plan will then be available to other hospitals to aid them in similar efforts.

A G R E E M E N T

RAMSEY HEALTH PLAN, INC.  
with  
RAMSEY HOSPITAL COMMISSION

RECITALS:

WHEREAS Ramsey Health Plan is organized as a non profit corporation as an HMO to provide prepaid health care services, and desires to contract for use of facilities and services at St. Paul-Ramsey Hospital in providing such services, and

WHEREAS Ramsey Hospital Commission recognizes the need for such services and desires to make certain facilities and services available to Ramsey Health Plan,

AGREED:

1. Facilities and equipment (for clinic and offices):
  - a) Existing space (to be described and perhaps map or floor plan attached) leased to Ramsey Health Plan at basic rent of \$1.50 per square foot per year. Ramsey Hospital Commission will, in addition, furnish all normal janitorial and custodial services, heating and air conditioning, and provide required utilities upon the leased premises, including but not limited to hot and cold water, electricity and gas, at basic rent of \$4.50 per square foot per year.
  - b) Ramsey Hospital Commission will do such remodeling or improving of the leased space as may be required to adapt it for use by Ramsey Health Plan as its Clinic; cost shall be allocated over period of 60 months and charged to Ramsey Health Plan as rent.
  - c) Ramsey Hospital Commission will purchase or otherwise provide and install all furniture, fixtures and equipment required by Ramsey Health Plan for operation of its clinic facilities in the leased space; cost shall be allocated over period of 120 months and charged to Ramsey Health Plan as rent. Title shall pass upon payment in full.
  - d) The total monthly charges for items a, b and c shall be considered as rent and shall be billed by Ramsey Hospital Commission to Ramsey Health Plan on the last day of each calendar month (i.e.-for use during that preceding month) and shall be due and payable within 30 days from date of billing. It is recognized that monthly billings under b and c may be subject to

adjustment if additional remodeling or additional equipment should be required after Ramsey Health Plan is in operation.

2. Personnel:

- a) Contemplated that as soon as economically feasible, Ramsey Health Plan will employ all of its own personnel and be responsible for its own administration and accounting procedures. At outset and until this can be accomplished, Ramsey Hospital Commission will make available to Ramsey Health Plan the service of one physician, one nurse and one clerk, part or full time as may be required for operation of the clinic.
- b) Ramsey Hospital Commission will bill Ramsey Health Plan for such services (properly allocated in case of part time services) on last day of each month for such services rendered during that preceding month.
- c) Such billing shall be for reimbursement of actual cost to Ramsey Hospital Commission of such services. ("Cost" should be defined to include basic salaries plus fringes-social security, unemployment compensation, vacation pay, insurance benefits, etc.)

3. Use of Ramsey Hospital facilities and services  
(other than clerical and office space):

- a) Ramsey Hospital Commission will make available to Ramsey Health Plan members the use of all facilities of Ramsey Hospital, including patient admission and care, use of diagnostic and operative room facilities and services, use of radiology facilities, use of rehabilitative and therapy facilities and service and in-patient pharmacy services. Such services shall be provided as and to the extent ordered by the Ramsey Health Plan physician responsible for each individual patient-member of Ramsey Health Plan.
- b) It is contemplated that all of the above services shall be furnished to Ramsey Health Plan at their actual cost to Ramsey Hospital Commission. It is recognized that such actual costs cannot be determined exactly in advance of providing the services and that they are subject to frequent fluctuation. It is therefore agreed that charges to Ramsey Health Plan for such in patient services shall be made upon a capitation basis, as follows:
  - (1) Ramsey Health Plan shall pay to Ramsey Hospital Commission the sum of \$5.30 per month per member enrolled as of the first day of each month as Ramsey

Health Plan members. Such payment shall be made on the first day of each month and shall constitute payment in full for all inpatient services to be rendered to Ramsey Health Plan members during that month.

- (2) The capitation charges set forth in b (1), are based upon a utilization of 490 to 510 hospital days per 1,000 members. If utilization is lower than this range, the Ramsey County Hospital and Sanitarium Commission will refund the Ramsey Health Plan at the end of the year, 4% of the capitation premium for every 20 hospital days increment below 490 hospital days per 1,000 members. On the other hand, if utilization exceeds 510 days per 1,000 members, Ramsey Health Plan will reimburse the Ramsey County Hospital and Sanitarium Commission at the rate of 4% for each additional 20 hospital days. Payment will be made over the entire following year by increasing the monthly rate by the appropriate amount.

- c) It is further agreed that Ramsey Hospital Commission intends to charge Ramsey Health Plan, at its cost, for out patient service such as diagnostic, radiology, rehabilitative and therapy, and pharmacy services (subject to provisions of c(3)), and that charges for such services shall also be made upon a capitation basis, as follows:

*For Ramsey  
utilization of  
services*

- (1) Ramsey Health Plan shall pay to Ramsey Hospital Commission the sum of \$3.90 per month per member enrolled as of the first day of each month as Ramsey Health Plan members. Such payment shall be made on the first day of each month and shall constitute payment in full for all out-patient services to be rendered during that month.
- (2) The capitation charges set forth in c(1) are predicated upon an estimated total of 4000 out-patient treatments or consultations and 1200 out-patient prescriptions filled per year per 1,000 Ramsey Health Plan members.
- (3) Prescriptions filled for out-patient Ramsey Health Plan members shall be charged to and paid for by the individual member at the rate of 50¢ per prescription. It is acknowledged that this charge is less than the actual average cost of pharmaceuticals and services, and that the capitation rates set forth in c (1) and (2) are designed to cover the excess of such costs.
- d) In establishing the capitation rates set forth in 3 c(1), Ramsey Hospital Commission has used its current established operating costs. Recognizing anticipated fluctuation in such costs, it is agreed that the capitation rates hereinabove established shall be subject to revision, upon 30 days advance notice to Ramsey Health Plan, following the end of

any regular quarterly accounting period, if it shall appear that Ramsey Hospital Commission's actual operating costs have increased or decreased by at least ten percent from such actual operating costs for the last preceding such quarterly accounting period; any such revisions shall be by the percentage of such increased or decreased actual operating costs.

- e) The capitation rates set forth in 3 c (1) are predicated upon the estimated outpatient treatment or consultation stated therein. If actual experience over any twelve month period after commencement of operation indicates that patient use either exceeds or is less than such estimates by at least ten percent, said capitation rates shall be adjusted to reflect such increased or decreased use by Ramsey Health Plan members of Ramsey Hospital Commission's facilities.

4. Responsibility for care of patients:

- a) Clinic facilities: Ramsey Health Plan agrees to assume full responsibility (other than for normal janitorial and custodial care) for the premises leased under the terms of paragraph 1, and shall indemnify and save Ramsey Hospital Commission harmless from any and all claims, demands and liabilities to patients, invitees or guests upon the premises based upon claimed defective layout or design or negligent maintenance and care of the premises.
- b) Medical Services: Ramsey Health Plan agrees to assume full responsibility for (to the extent such responsibility arises from the doctor-patient relationship) and to indemnify and save Ramsey Hospital Commission harmless from any and all claims, demands or liabilities to patients or patient's dependents based upon claimed negligence or lack of adequate medical skills of any of its employees, either professional or lay, and specifically including any Ramsey Hospital Commission personnel loaned to Ramsey Health Plan pursuant to provisions of paragraph 2 in their treatment of Ramsey Health Plan members.
- c) Insurance: Ramsey Health Plan agrees to carry insurance, in which Ramsey Hospital Commission, as a group and individually, City of St. Paul and County of Ramsey shall be named insureds, against the liabilities assumed in paragraphs a and b hereof. Such insurance shall be with the same liability limits as the comparable insurance at all times carried by Ramsey Hospital Commission, City of St. Paul and County of Ramsey.

5. Term of Agreement and Cancellation:

- a) The initial term of this agreement shall be one year from October 1, 1972. It shall be renewable for successive terms of one year and shall automatically be so renewed unless terminated by either party in the manner hereinafter prescribed. Adjustment of capitation charges for use of facilities and services, as hereinbefore provided shall not constitute a termination.
- b) The lease of clinic facilities (paragraph 1) and agreement for use of facilities and services (paragraph 2), or either of them, may be terminated by either party hereto upon not less than 90 days written notice. In the event of such termination, neither party shall have any liability to the other except for payment of all rental and capitation charges incurred to the effective date of such termination, and for any possible continuing liability of Ramsey Health Plan under paragraph 4 for events occurring prior to such termination. Any amounts which may be due to Ramsey Hospital Commission pursuant to paragraph 1 b) shall be subject to negotiation between the parties at the time of said termination.

IN WITNESS WHEREOF, we have set our hands this 24<sup>th</sup> day of August, 1972.

RAMSEY HEALTH PLAN, INC.

by William J. Kelly  
Its First Vice-President

by Emily Ann Heblack  
Its Secretary

APPROVED AS TO FORM

Edward J. Kelly  
ASSISTANT COUNTY ATTORNEY

DATE September 7, 1972

RAMSEY HOSPITAL COMMISSION

by Pauline F. Ettel  
Its Chairman

by John J. Quinn  
Its Executive Secretary

# New Building Program

Section 9

NEW BUILDING  
PROGRAM

## 9. NEW BUILDING PROGRAM

When the new St. Paul-Ramsey Hospital building was opened in 1965 it was the finest diagnostic and care facility for the in-hospital patient care up to levels that make it difficult for a patient to spend any great length of time in the hospital. This necessitates more out-patient care than we ever dreamed of in 1965. It is anticipated that this trend for more out-patient care will continue as time goes on. Since St. Paul-Ramsey Hospital was not designed to be a significant out-patient center, it has become obvious throughout the years that some changes must be made.

In 1971 when it became known that the Gillette Children's Hospital for Crippled Children was contemplating a move from its present site, St. Paul-Ramsey Hospital made an offer of the use of some of its empty beds. This offer was eventually accepted by Gillette Hospital and a recommendation to relocate Gillette Children's Hospital to St. Paul-Ramsey Hospital was given to the Legislature of the State of Minnesota. Shortly after this, the Chief of Staff at St. Paul-Ramsey appointed a Building Planning Committee to begin work needed to accomplish this plan. This committee spent many hours talking with the people from Gillette Children's Hospital as well as all the departments at St. Paul-Ramsey Hospital regarding the expansion needs for the next ten years.

Originally, a ten-story building was planned next to the present hospital in order to allow all the departments some expansion space - primarily for improved out-patient care but a large emphasis was also placed on the increasing role of medical education. The cost of this building was estimated to be in the neighborhood of

25 million. This figure was well beyond the scope of possible funding. Therefore, adjustments had to be made.

A second proposal was for an 18 million dollar facility which involved five stories and a shell of five stories above this. After many meetings with the Ramsey County Board, it was decided that even this was far too much to expect in these crucial times. Consequently, we've pared the size of the building down to five stories plus a parking facility which would house the expansion plans of both St. Paul-Ramsey and Gillette Children's Hospital.

This final plan was presented to the State Legislature during the 1973 session and was ultimately accepted by them. This plan allowed the use of the first three floors of the new building, which would go in the area of the North parking lot, to be used for out-patient facilities and administrative offices. The fourth floor will be utilized by the Gillette Children's Hospital and the fifth floor, which would cover only half of the allotted area, would be a research facility and a burn unit. Parking facilities would be able to handle approximately 510 cars. The estimated cost of this building is approximately 13.5 million dollars.

The Legislature at its last session in January 1973 approved \$400,000 to plan and design this addition to St. Paul-Ramsey Hospital. Along with this, the Medical Education & Research Foundation will contribute \$80,000 for a total of \$480,000 to be spent for construction blue-prints and with these we hope to begin construction of the new building in the spring of 1974. Total cost of the new building is projected at 13.5 million dollars of which 3.5 will come from the State for the Gillette share, 8.0 from the County and the remaining 2 million a contribution of the Medical Education & Research Foundation.

## A N A C T

relating to public welfare, permitting Ramsey County and the City of St. Paul to incur certain debt and impose taxes to discharge it for public hospital and social service programs.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

Section 1. The board of county commissioners of Ramsey county is authorized to issue and sell general obligation bonds of the county in an amount not to exceed \$400,000 to plan and esign an addition to St. Paul - Ramsey Hospital in conjunction with the Gillette Hospital Authority. The board shall pledge its full faith and credit and taxing powers for the payment of such bonds in accordance with Minnesota Statutes, Chapter 475, except that no election shall be required and such bonds shall not be included in computing the net debt of the county under any law; and taxes required to be levied for the payment of such bonds shall not be subject to any limitation of rate or amount.

Section 2. Section 1 shall take effect upon its approval by the board of county commissioners of Ramsey County, and upon compliance with Minnesota statutes, Section 645.021;

Section 3. Any other provision of law or charter to the contrary notwithstanding, the council of the city of St. Paul by resolution adopted by at least five affirmative votes may, without a vote of the electorate, borrow not to exceed \$300,000 during the calendar year 1973 for the purpose of providing and appropriating funds to the Ramsey County Welfare Board for social service programs, and to executive obligations of the city therefore as the council may determine. The obligations shall be payable in not more than 10 months from the date of issuance and may bear interest at a rate as the council shall determine, not in excess of seven percent per annum. The obligations may be issued and sold without publication of any notice for the sale thereof. The full faith and credit of the city shall be pledged irrevocably for the prompt and faithful payment of these obligations and shall be sold in the manner set forth in the council resolution.

The council of the city of St. Paul is authorized to levy and collect a tax to repay such obligations issued pursuant to the authority contained herein and this authority is not subject to any tax or appropriation or expenditure limit otherwise imposed by any law or charter provision. Funds derived from this authority shall be and are hereby appropriated without any further action required by the city of St. Paul to the Ramsey County Welfare Board for the purposes set forth above and to be expended in accordance with the approved budget of the said welfare board, and these funds shall constitute the city's 27 1/2 percent match to Ramsey county's 72 1/2 percent contribution to the said welfare board's total budget.

Section 4. Section 3 shall become effective only after its approval by a majority of the governing body of the city of St. Paul and upon compliance with the provisions of Minnesota Statutes, Section 665.021.

ST. PAUL-RAMSEY HOSPITAL

ST. PAUL, MINNESOTA 55101

July 12, 1973.

Dear Ramsey County Commissioner:

As you may recall the last session of the Minnesota State Legislature passed a bill entitled SF #2338 by which they gave to you the authority to sell bonds in an amount not to exceed \$400,000.00 to plan and design an addition to St. Paul-Ramsey Hospital in conjunction with the Gillette Hospital authority. A copy of this Act is enclosed.

The purpose of this money is to enable we at St. Paul-Ramsey to develop, with an architect, construction plans to return to the State Legislature in January 1974 for further approval of the monies necessary to construct such a building. The actual allocations of money for this project are outlined in three enclosures entitled A, B & Summary C. This will come to a total allocation of \$647,780.00 which will be necessary for the construction plans as estimated by the Ellerbe Company who have worked with us in the initial planning stages of this project.

On June 18, after talking with Mayor Cohen, I received a letter from his office which is enclosed stating that he expected the St. Paul-Ramsey Hospital and Sanitarium Commission to choose the architect in any manner they saw fit and to pass this choice on to the County Board for approval.

The minutes of the Commission meeting of June 28 are enclosed and these minutes indicate the manner in which the Ellerbe Company was chosen as the architect for this project.

I have further enclosed a letter from the two groups of architects that had indicated an interest in our project, one being the Ellerbe Company and the other being the firm of Windsor and Faricy. It is obvious that there were many factors involved in the choice of the architect but some of the most important were the fact that the Ellerbe Company had already done the original building at St. Paul-Ramsey Hospital and was quite familiar with its basic structure and with the site. Furthermore, they were the type of a firm that could handle all of the services necessary for such a project, since they had a complete staff of architects and engineers that could plan and design the entire project. The complete services probably could not be handled by the other firm of Windsor and Faricy as was indicated in their letter. It was felt that since this was a professional bid situation and since all members of the Hospital Commission were unanimous in their choice of the Ellerbe Company that it would not be advantageous to go further into any sort of a bidding situation rather it might tend to make the ultimate choice more difficult and possibly even entail a firm that could not properly handle the large project that we are planning.

With all of this in mind, I would like to ask the Ramsey Board of Commissioners at this time to please approve the choice of the St. Paul-Ramsey Hospital and Sanitarium Commission to appoint Ellerbe Company as the architects for the project. Along with this choice, I think it is important to ask you to also authorize the County Attorney's office to begin drawing up a contract with the Ellerbe Company, if that is your choice, and I would also like you to authorize the sale of the bonds

Ramsey County Commissioner  
Page 2

in the amount of \$400,000.00 so that we may have a source of funds to reimburse the Ellerbe Company for their services in this regard.

Thank you kindly.

Sincerely yours,

*G. Thomas Wier*

G. Thomas Wier, M.D.,  
Chairman of the Building Committee.

GTW:mb

Enclosures

CC: Mr. Syverson  
Mr. Ettel  
Mr. Rickey  
Dr. Quattlebaum

5/8/73

GILLETTE BUDGET ALLOCATIONS  
(FROM SCHEME "C")

	<u>Shell</u>	<u>Finish</u>	<u>Total</u>
First Level	74,000	165,000	239,000
Fourth Level			
New Building	510,600	444,000	954,600
Above Existing	546,000	546,000	1,092,000
Remodeling			25,000
Sub-Total:			<u>2,310,600</u>
Parking Ramp			<u>375,000</u>
Total Construction Cost			2,685,600
Design Contingency @ 10%			268,600
Total Construction Costs (January 1973)			2,954,200
Escalation to July 1974 @ 9%			265,900
Total Construction Cost plus escalation			3,220,100
fee @ 7%			225,400
Development thru C.D. (225,400 x .75)			169,055

B

5/8/73

SAINT PAUL-RAMSEY BUDGET ALLOCATIONS  
(FROM SCHEME "C")

	<u>Shell</u>	<u>Finish</u>	<u>Total</u>
First Level	578,000	520,200	1,098,200
Second Level	415,800	378,000	793,800
Third Level	1,080,000	1,296,000	2,376,000
Fourth Level	110,000	115,200	225,200
Fifth Level	572,000	910,000	1,482,000
Sub-Totals:	<u>2,755,800</u>	<u>3,219,400</u>	<u>5,975,200</u>

Parking Ramp	900,000	
Power Plant Additions	630,000	
Site Work	<u>100,000</u>	
Sub-Total:		<u>1,630,000</u>
Total:		<u>7,605,200</u>

Design Contingency 10%	760,500
Total Construction Costs (Jan. '73)	8,365,700
Escalation to July 74 9%	752,900
Total Construction Cost Plus Escalation	9,118,600

Fee at 7%	638,300
Development thru C.D. (638,300 x .75)	478,725

5/8/73

SUMMARY

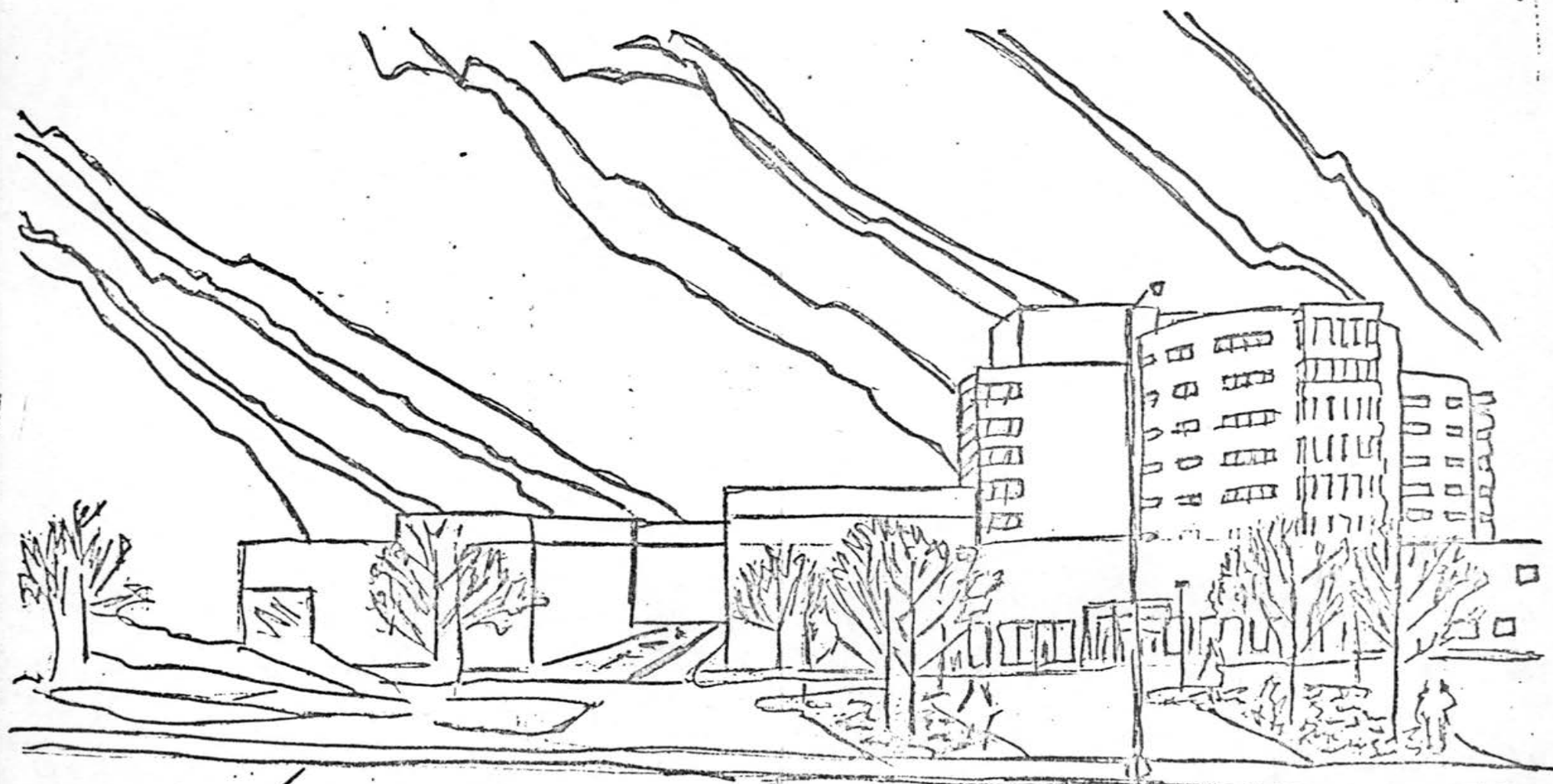
St. Paul Ramsey-Gillette Consolidation Project

<u>Ramsey</u>	Construction Cost	\$9,118,600
	Fee @ 7%	638,300
	75% of 7% fee	478,725
 <u>Gillette</u>	Construction Cost	3,220,100
	Fee @ 7%	225,400
	75% of 7% fee	169,055
 <u>Totals</u>	Construction Cost	12,338,700
	Fee @ 7%	863,700
	75% of 7% fee	647,780

Source of Ramsey Funds:

Legislature	=	\$400,000
MERF (20%)	=	80,000
		<u>\$480,000</u>

2 April 1973



ST. PAUL RAMSEY HOSPITAL 1975

## INTRODUCTION

St. Paul-Ramsey Hospital has traditionally provided emergency service and episodic care for illness to many residents of this area. A larger portion of the community has been unaware of the services available, and many have been unwilling to seek health services at Ramsey. St. Paul-Ramsey has the potential to be a major force in health care and we are being called upon to take a leadership role in a broader range of activities.

### PART I: GOALS

We should seek new ways to deliver comprehensive health services within the entire St. Paul-Ramsey area.

We should strengthen and broaden medical education programs at all levels and should involve all area hospitals and health organizations in coordinated educational plans.

We should define our scientific research goals and make appropriate efforts to devise new forms of treatment and discover new knowledge.

The steps taken to accomplish these objectives will thrust St. Paul-Ramsey into a leadership role in all of the health aspects of the Ramsey County community.

#### 1. Health Care

St. Paul-Ramsey should broaden its aims to encompass a total comprehensive health care program for a broader segment of the community. We have started to strengthen the emergency and walk-in services which we have been providing, but we should also organize to deliver comprehensive ambulatory care, both on a fee-for-service basis and under prepaid health care plans.

Preventive care and health maintenance should be available for anyone, including those having difficulty gaining access through traditional systems. These include the poor and other disadvantaged minority groups; those working citizens who maintain themselves without public assistance except when major health problems arise; those new to our community who have difficulty finding a family doctor; and fringe groups whose social behavior makes it difficult for them to have access to the main stream of medical care.

The past few years have seen an increase in the quality and quantity of specialty care and consultation available at St. Paul-Ramsey. We should now build upon these strengths to provide for primary care, and develop special outreach programs going beyond the walls of the hospital into all areas of the community. As part of this effort, we should develop public health education and preventive medicine programs aimed at the individual but also involving a broad public approach in the field of "community health."

## 2. Health Science Education

St. Paul-Ramsey has had a major commitment to health science education since the turn of the century. Health science education need not be competitive with or dilute direct health care, but programs in health science education require sufficient funding and staffing so that resources that should be devoted to patient care are not siphoned off. Our present emphasis is on undergraduate and graduate M.D. training. We should maintain these programs and increase our efforts in training technical and paramedical personnel who can be effective in new systems of health care delivery.

These educational programs are closely linked with the University of Minnesota. In addition, we should involve other St. Paul area hospitals, clinics and similar institutions throughout the region in our educational efforts.

## 3. Research

Clinical research is an important part of the activities of a major medical center such as St. Paul-Ramsey Hospital. To the extent that basic investigations are of major importance to members of the faculty such research should be supported. We should not attempt to build a major basic research institute, however, but rather emphasize applied clinical scientific programs and develop new programs for better community health care.

## 4. Service

As a major arm of local government, St. Paul-Ramsey Hospital is expected to assume health leadership for the community. We should be the catalyst for and key element in the creation of a major downtown medical center. We have programs in mental retardation, child abuse, chemical dependency and a burn unit. These are not traditionally nor easily handled by the private hospital. St. Paul-Ramsey should also serve as the base for outreach programs such as maternal and infant care and family planning, and give serious consideration to assuming many of the personal health responsibilities of local health departments.

To achieve these goals will cost a great deal of money. To the extent that these programs fall within the responsibility of the State of Minnesota, we must actively seek greater financial support from the Legislature, especially in programs related to medical education. To the extent that the objectives are part of the traditional function of county government, we must seek, and Ramsey County should provide, local support. Through the Medical Education and Research Foundation physicians of the Ramsey staff have generated funds which now can significantly help further these goals.

If these goals are accepted the Ramsey Hospital Commission should also accept the responsibility to seek help in raising the necessary funds from the Federal and State governments, the University, private foundations, the community and the staff. Only through a joint effort can a unified, comprehensive and balanced program be achieved.

AN OVERVIEW OF THE DESTINY  
OF SAINT PAUL-RAMSEY HOSPITAL AND MEDICAL CENTER

In the past, the practice of medicine involved mainly the patient and his or her general practitioner and depended greatly on such things as sight, hearing and feel for diagnosis. However, fundamental and even radical changes are now taking place in the delivery of health care; changes such as the growth of prepaid practice and early attempts at health maintenance organization and consumerism which are only the superficial manifestations of much more far-reaching changes that are bound to take place. Saint Paul-Ramsey Hospital was opened in 1965 and was the epitome of a modern medical diagnostic and care facility for the in-hospital patient. Unfortunately since that time, rampant inflation and demands for first-class care for all has placed an unbearable financial burden on the average citizen thus in effect denying him medical care. This was true throughout the nation. Medicine endeavored to adjust itself to the needs of the public and began an attempt to return to what may have been a more inexpensive type of medical care, that is, outpatient or office practice with inpatient hospital care only when absolutely necessary. While it is not possible to anticipate all changes that are likely to take place in the future, the following trends are well established and should be included in our plans:

1. Most medical care will be on an ambulatory (outpatient) basis wherever practicable. In the past year, for instance, the number of outpatient visits at Saint Paul-Ramsey Hospital have increased by 23% while at the same time the number of inpatient visits have decreased by approximately 11%. Improvements in medical technology mean that minor surgery and complicated diagnostic procedures can now be done in the outpatient area. Thus, hospital care will likely become limited to crisis type medical episodes, major surgery and specific specialized intensive care units such as high risk pediatrics and obstetrics, kidney dialysis, burn unit, coronary care, etc.

2. The emphasis will switch to preventative medicine and health education, thereby laying greater stress on periodic physical exams, screening on a community-

wide basis and health education programs.

3. Emphasis will be on comprehensive medical care to take care of the total needs of the patient. This concept involves the medical team approach where the physician and nurse are just two members of a much larger team which would include medical social workers, health educators, public health specialists, dentists, etc.

4. It will involve the concept of trying to identify high risk patients in various categories so that more intensive care can be focused on this group including specialized hospital services.

Lastly, we feel that it will be accepted by everyone that all patients, regardless of income, should have equal accessibility and availability to the highest quality of personal medical care.

Consequently, if Saint Paul-Ramsey Hospital and Medical Center is to meet its goals and serve the real medical needs of its patients and be in the vanguard of providing modern ambulatory care, we envisage the following specific changes in our health delivery system at Saint Paul-Ramsey:

I. An ambulatory care facility that would be many times its present size. The emphasis would be toward walk-in clinics, special evening clinics for those with employment problems, computerized multiphasic screenings for the periodic physical exams that can be done on a low cost per patient basis, and immediate care and future service to that large number of patients who have no regular physician or who are not a participant in a comprehensive medical care system.

A new type of clinic environment is essential for survival. A railroad station-like waiting room with no privacy, with patients sitting waiting for long periods of time without personal concern as to their problems can no longer be tolerated. Departmental clinics will be small, efficiently operated by the involved department itself. These small clinics will operate throughout the day and evenings. The needs of the patient will dictate an attractive and private environment where his care and service will be more personalized.

II. Health Maintenance Organization. The Ramsey Health Plan has completed its first four months in operation and is the only prepaid health plan in the nation

which is existing within the confines of a county teaching hospital: Its success has far outstripped its projected achievement within the first six months of its existence. Furthermore, it became viable without any grants and is furnishing an excellent form of medical care to 2,000 people. The fact that we expected only 25 percent of this number in the initial enrollment speaks to the point that there is indeed a need for this type of medical care in this community. The target group was the county employees and we are now extending out into the municipalities. For instance, Roseville has signed up 50 percent of their 100 contracts in their municipal government. The remaining municipalities will be offered the opportunity to come into this plan. In addition, industry and hopefully city and state government will have open enrollment for their employees. It is mandatory that Medicaid and Medicare patients be enrolled into this plan. We clearly expect the enrollment in this program to grow to 20,000 in 5 years and to 40,000 in 10 years. This latter figure would require 40,000 square feet of clinic space and would employ 40 physicians and an appropriate number of paramedical and nursing personnel. It is proper that Nos. 1 and 2 above should be considered together inasmuch as the working needs and the ultimate delivery of health care of these two services are somewhat intertwined and this valuable space would have maximum utilization.

III. The Ramsey County Nursing Home is now seeking a new location and a Site Selection Committee has considered that area just north of University Avenue from Saint Paul-Ramsey Hospital and Medical Center. If the new clinical building is constructed north of the present hospital, it would lie between the hospital and the nursing home site. These patients would therefore be available by stretcher or wheelchair through a tunnel to their various clinics or to the auxiliary services in the main hospital or to the Admissions Department in the hospital itself.

IV. Currently the high rise apartment just north and east of the present hospital would make an excellent ambulatory care area which likewise could be connected to the hospital via tunnels. Such a building as this could be filled with those type patients who do not need even semi-acute nursing care but do need daily workers or companions to give them some quasi-nursing home service.

V. The current Burn Unit of 16 beds is the outstanding burn center in the entire metropolitan area. It serves wide areas throughout the state and western Wisconsin for this most difficult type of patient. This patient needs first class care and can only obtain it in a burn unit of this sort. Because of a high rate of utilization currently, the medical and administrative staff are working with architectural firms to build better facilities for the Burn Unit and to increase its capacity by 50 percent. At the current time, the surgical service of the Veteran's Hospital has agreed to and are sending their severe burns to Saint Paul-Ramsey Hospital for this type of care that is so badly needed on these severely burned patients.

VI. Department of Corrections. Saint Paul-Ramsey Hospital and Medical Center has expressed itself as willing to negotiate with the State Department of Corrections regarding hospitalizing the acutely ill prison population of the Stillwater Prison at Saint Paul-Ramsey Hospital. This would be an entirely new concept. Nevertheless, it is quite likely that the various state institutions will have to contract for their medical care, certainly on a capitation basis per inmates in each particular area. This will require a great deal of specialized planning and we will begin those plans as agreed to in initial probing sessions.

VII. Emergency Service. Saint Paul-Ramsey Hospital and Medical Center is without question the outstanding center for dealing with severely traumatized patients in this entire area. The ER is currently seeing an average of over 200 patients a day in all categories. Our "Room 10" concept of the acutely and the severely traumatized patient has gained national recognition. It is imperative that all but the true emergencies would be removed from the emergency treatment area so that the emergency service can further expand.

VIII. Gillette Hospital. Accompanying this presentation is an outline of the feasibility of Gillette Hospital moving to Saint Paul-Ramsey Hospital. This move allows an expanded and more up-to-date ambulatory care area for Gillette Hospital with direct connections to the Pediatric Service at Saint Paul-Ramsey Hospital. This will be accomplished without adding any beds. This is truly an

an example of what was expressed in part I as to the very definite trend toward ambulatory care.

IX. Specialty Outpatient Clinics. With this new concept of ambulatory care, many departments will need to have room for their expanded clinics to provide consultation for the basic outpatient clinic. Some of these areas, such as dentistry and oral surgery, didn't even exist when the original outpatient clinic area was built and there is certainly no room for them now. They must share rooms with other clinics. Other specialty clinics have had to curtail expansion due to lack of space as well.

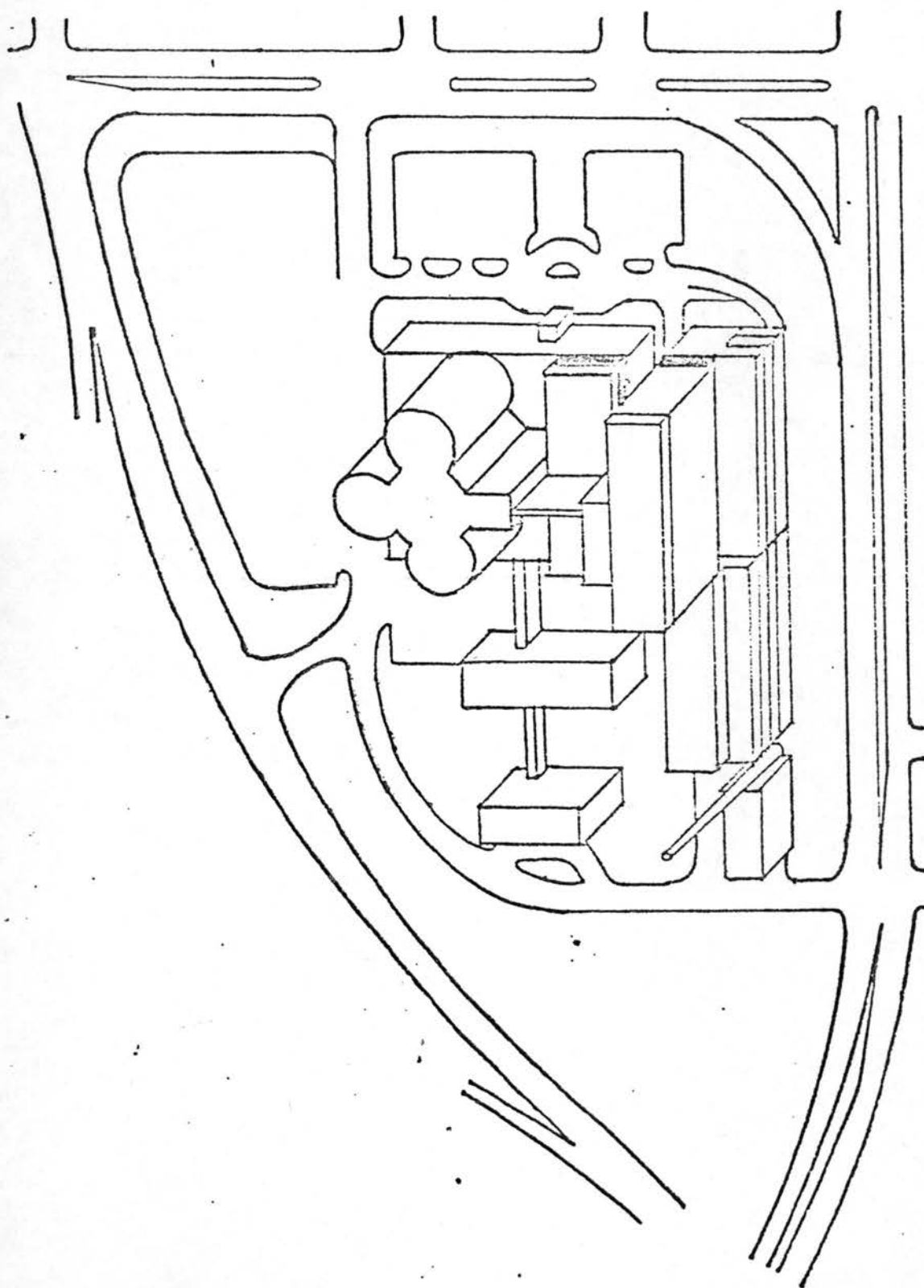
X. Children's Hospital Site. The Children's Hospital Building Committee has not yet made a final decision regarding its building plans. A definite site will be made available for Children's Hospital if it should decide to come to Saint Paul-Ramsey Hospital and to thus create a true children's care center, together with a high risk Ob and Neonatal Unit. Children's Hospital could be a part of the current building or space will be made available to add on to it.

There is an acknowledged and fast growing need for more efficient methods of health care delivery in this country. The health care cost in the United States has gone from 3.5 to 7 percent of the Gross National Product in the past 10 years. It is becoming apparent that our overall health care cost is enormous and must not increase. We must find more economical and efficient ways to deliver that care. Some of these areas that we have discussed here, such as the HMO and ambulatory care, can vastly improve the utilization of the available monies for health care delivery. Further, this new facility will meet the greatly expanded educational role that Saint Paul-Ramsey Hospital is now playing, and will continue to play, in the University of Minnesota Health Sciences expansion plans. Part of the cost of this facility will be borne by the Medical Education and Research Foundation which is comprised mainly of the full time and part time physicians who practice medicine at Saint Paul-Ramsey Hospital. We are asking the legislature of the State of Minnesota to give us bonding authority to help finance the remaining cost of the structure.

CONCLUSION

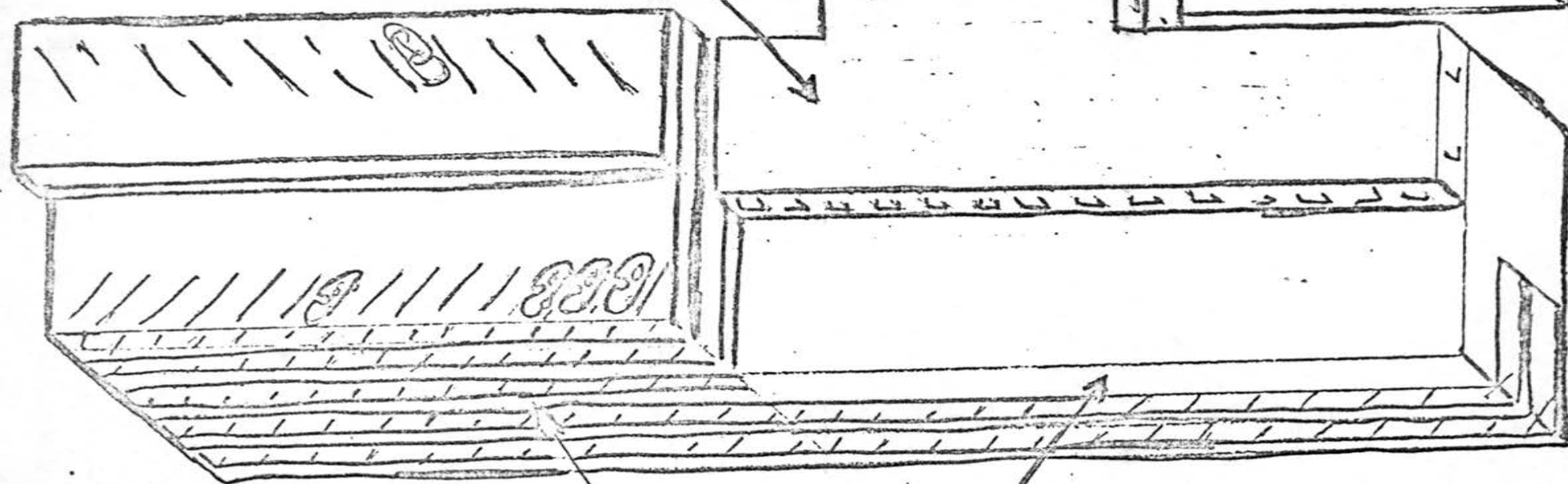
The current trend in the long range planning for the Saint Paul-Ramsey Hospital and Medical Center should include over the next ten years a clearly defined and increased role in primary care, for all patients regardless of their economic status. In addition, it will serve as a referral center for the highly specialized care that can be provided by its 60 full time physicians. With proper physical facilities, Saint Paul-Ramsey Hospital and Medical Center could be in the vanguard of bringing new and more economic methods of health care to Saint Paul, Ramsey County and surrounding areas.

jra  
2/22/73



Burn Center

Gillette  
Children's  
Hospital



Proposed New Outpatient Building  
and Parking Ramp

SCHEME (C)

BUDGET ALLOCATIONS  
SAINT PAUL-RAMSEY HOSPITAL WITH  
GILLETTE CHILDREN'S HOSPITAL ADDITION  
BUDGET ESTIMATE NO. 1

GILLETTE CHILDREN'S HOSPITAL

A. BUILDING STRUCTURE, SHELL, BASIC UTILITIES

FIRST LEVEL (Pool)	3,700 S.F.	@	\$20.00	=	74,000
FOURTH LEVEL					
(New Building)	22,200 S.F.	@	\$23.00	=	510,000
(Above Existing)	26,000 S.F.	@	\$21.00	=	546,000
	<u>51,900</u>		(21.78)		
Total - Structures, Shell, Utilities				=	\$1,130,600

B. FINISH CONSTRUCTION

FIRST LEVEL (Pool)	3,700 S.F.	@	\$45.00	=	165,000
FOURTH LEVEL					
(New Building)	22,200 S.F.	@	\$20.00	=	444,000
(Above Existing)	26,000 S.F.	@	\$21.00	=	546,000
	<u>51,900</u>		(22.25)		\$1,155,000

C. REMODELING

FOURTH LEVEL					
Minor remodeling in existing nursing units - Allowance -				=	<u>25,000</u>
Total - Remodeling					\$25,000

D. RELATED ADJACENT WORK

Parking Ramp

(150 cars included in Gillette budget)

150 cars @ \$2,500 per car = \$375,000

Total - Related adjacent work = \$375,000

E. TOTAL - GILLETTE ELEMENTS (A,B,C,D) = \$2,685,600

F. CONSTRUCTION BUDGET ADJUSTMENTS

Design Contingency @ 10% = 268,600

Total Construction Costs (January 1973) = \$2,954,200

Escalation to July 1974 (18 months @ 9%) = 265,900

Total Construction Cost Plus Escalation = \$3,220,100

Fees and Construction Contingencies @ 11% 354,200

Total Project Costs (without II & III Equipment) = \$3,574,300

SCHEME B

BUDGET ALLOCATIONS  
SAINT PAUL RAMSEY HOSPITAL WITH  
GILLETTE CHILDRENS' HOSPITAL ADDITION  
BUDGET ESTIMATE NO. 1

SAINT PAUL-RAMSEY

A. BUILDING STRUCTURE, SHELL, BASIC UTILITIES

FIRST LEVEL	32,600	S.F.	@ 20.00	=	652,000
SECOND LEVEL	18,900	S.F.	@ 22.00	=	415,800
THIRD LEVEL	45,000	S.F.	@ 24.00	=	1,080,000
FIFTH LEVEL (Above Existing)	26,000	S.F.	@ 22.00	=	572,000
	<u>122,500</u>				

Total - Structures, Shell, Utilities = \$2,719,800

B. FINISH CONSTRUCTION

FIRST LEVEL	28,900	S.F.	@ 18.00	=	520,200
SECOND LEVEL	18,900	S.F.	@ 20.00	=	378,000
THIRD LEVEL	39,000	S.F.	@ 24.00	=	936,000
FIFTH LEVEL	26,000	S.F.	@ 35.00	=	910,000
	<u>112,800</u>				

Total - Finish Construction \$2,744,200

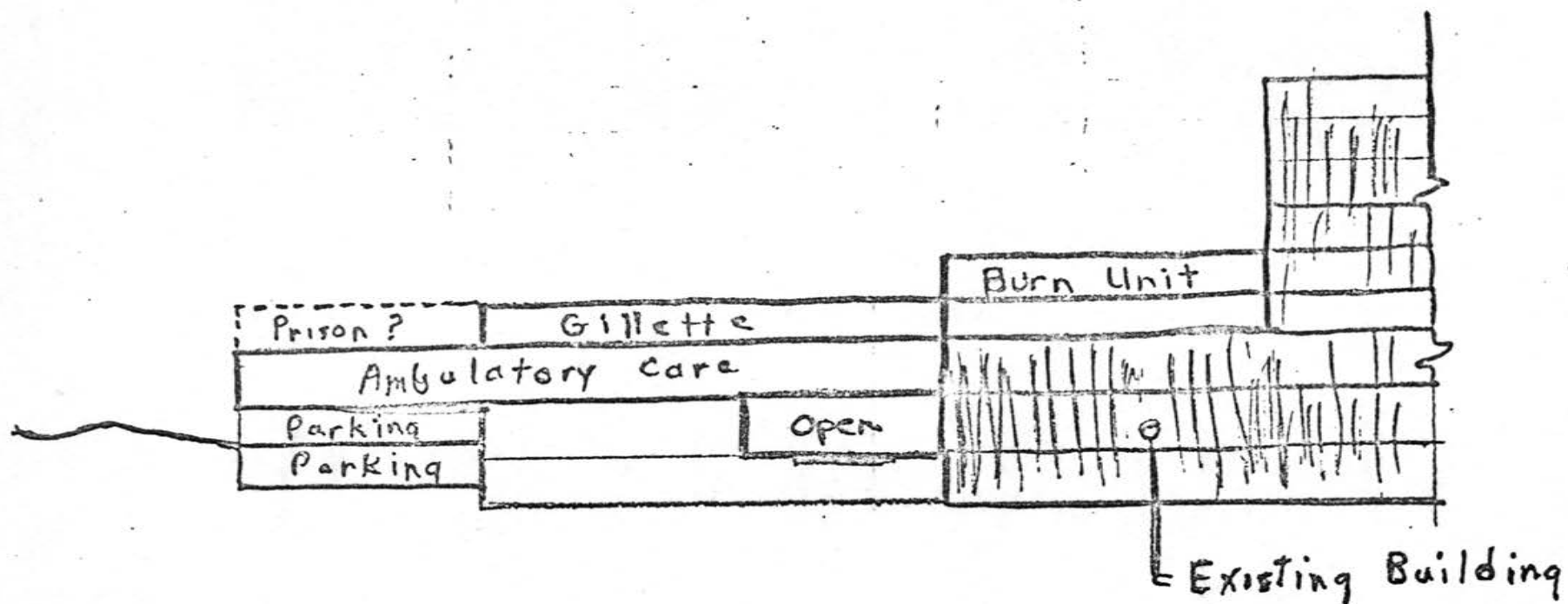
C. RELATED ADJACENT WORK

Parking Ramp 430 Cars	430 Cars	@ \$2,500 Per Car	= 1,075,000
Addition to Central Power Plant to Accommodate New Construction		Allowance	= 630,000
Site Work & Utilities		Allowance	= 100,000
Total - Related Adjacent Work			= \$1,805,000
Total - Saint Paul-Ramsey Elements (A, B, & C)			= \$7,269,000

D. CONSTRUCTION BUDGET ADJUSTMENTS

Design Contingency @ 10%	= 726,900
Total Construction Cost (Jan. 1973)	= \$8,005,900
Escalation to July 1974 (18 mo.) @ 9%	= 720,531
Total Construction Cost Plus Escalation	= \$8,726,431
Fees and Construction Contingencies @ 11%	= 959,907
Total Project Costs (Without II & III Equipment)	= \$9,686,338

← N →



Front of Building