

States of the Union

A HOSPITAL FOR ALL SEASONS

BY RICHARD J. MARGOLIS

The caring part is at least as important as the curing part.

—A FORMER PATIENT AT
PEOPLE'S MEMORIAL HOSPITAL

WHEN RESIDENTS of Independence, Iowa (population: 2,300) reach the age of 65, some find it necessary to use People's Memorial Hospital—not to get well but to get their Social Security benefits. Its medical archives go back three-quarters of a century; for many a citizen seeking to establish her age and eligibility, those yellowing folders—neatly stacked inside a mansion that housed the town's very first hospital—contain the only documentary evidence within hailing distance.

"People depend on us to keep track of their health charts from childhood," says Donna Duffy, who is in charge of all the medical records. "Not just for Social Security reasons, of course. The doctors need to know their patients' medical histories. Patients can't be expected to remember the details of illnesses they had 50 or 60 years ago."

Thus does the hospital serve as a particularized mirror of the town's past. Because it remembers, the residents exist—

or so the Social Security Administration seems to think.

Maybe the residents think so too. For there is something about a rural hospital that can cure more than physical ailments, that can go a long way toward restoring to citizens their sense of civic consequence. As a housewife who has lived all her life in Independence reminded me recently, "Having our hospital right here gives us all a feeling of self-respect. A town that loses its hospital has one less thing to take pride in."

Many small communities nowadays are having to face the indignities of subtraction. Of the 2,638 rural hospitals still extant—most with fewer than 50 beds—a substantial number are verging on bankruptcy and some 40 each year are going belly-up. Last year, according to tallies made in Washington, small-town hospitals suffered a 20 per cent drop in "patient utilization." Their occupancy rate, says the American Hospital Association, was only 55 per cent, compared with almost 70 per cent for urban hospitals.

The managers of rural hospitals are understandably gloomy. In a recent survey of hospital administrators taken by the accounting firm of Ross Touche,

63 per cent of those heading small institutions thought they would fail in the next five years.

A decline in the rural economy nationwide is only one reason for the widespread pessimism. A bigger reason is the peculiar way that Medicare and Blue Cross reimburse rural hospitals—in a word, stingily. Because overhead costs are mistakenly thought to run lower in rural areas, hospitals there get paid less by third-party insurers, both Federal and private.

The medical impact of small hospital attrition has been publicly calculated and justifiably lamented. (It has also been politicized. "Bentsen Promises Program to Retain Rural Hospitals," proclaimed a New York *Times* headline in mid-September.) But the psychological effects—the erosion of community morale and confidence—can only be imagined.

This column aims to prod our imaginations. By pausing briefly to examine the way a single emblematic institution functions—namely People's Memorial of Independence, Iowa—we can begin to appreciate some of the unheralded advantages that small-town residents realize from their hospitals, advantages most city-dwellers would find altogether remarkable.

To a citified eye the hospital's main facility may not look like anything special—merely a modest, one-story building plunked down in the middle of corn country. But to folks thereabouts it is an institution for all seasons, starting with prenatal care at the outpatient clinic and ending, perhaps, with pre-dying care in the hospice program, one of the first to be undertaken in rural America.

In the interim each family at some point is likely to make use of the hospital's 36-bed infirmary, or its new, \$1 million outpatient clinic (which imports part-time medical specialists from Waterloo and Cedar Rapids), or the nursing home that accommodates 59 elderly residents and is always full.

"I don't think we could survive without the hospital," says Esther Brockling, a grandmother who publishes a weekly newspaper in nearby Winthrop. "I know I couldn't." A heart condition has land-

ed Mrs. Brockling in all sorts of high-powered urban medical centers, including the Mayo Clinic, but People's Memorial is her healer of choice.

"What I find at People's," she says, "is that you get *personal* care. At some of those bigger places like the Mayo I felt I was just a number. At People's everybody knows your name."

The nurses in Independence, furthermore, "are simply wonderful. When you ring the bell, they come running. In fact, they come even when you don't ring. At night there's always a pretty nurse looking in to make sure you're all right. They may be busy but they still find time to stop and chat. Believe me, when you're lying awake in the dark

and mental health. The staff even holds "sibling classes" for tots who are about to become older sisters and brothers and may be uneasy at the prospect. Such services are either offered *gratis* or for a nominal charge. A cholesterol check, for instance, costs just \$3.

THERE IS yet another way People's Memorial differs from its urban counterparts, and that is in its treatment of those who are down on their luck. "When the farm crisis hit us," Richard recalls, "we tried to make things easier for the families who were hurting most. Lots of them had no health insurance—the farmers couldn't afford it, and quite a few of the workers in

pay you back every cent." And he did.

Withal, and contrary to the bleak predictions concerning rural hospitals, People's Memorial in recent years has been turning a profit. Its financial statement for fiscal 1988 puts "Excess of Revenues Over Expenses" at slightly more than \$112,000. This fall the hospital opened its new outpatient clinic, financed almost entirely with the extra earnings it had been frugally squirreling away each year.

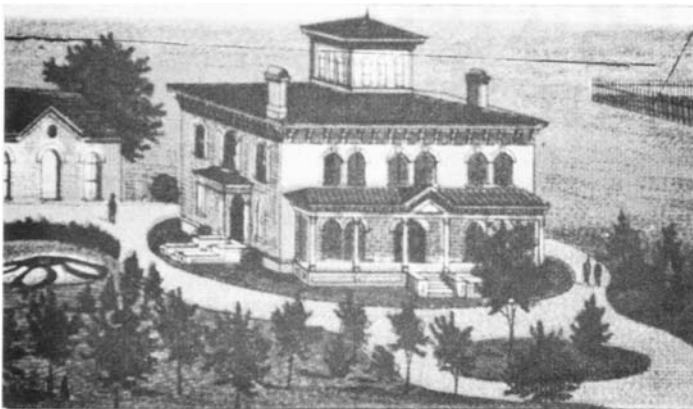
Hoping they are on a roll, hospital officials are planning a half-million dollar fund-raising campaign for 1989. The money will go toward construction of a new nursing home. A major target in the campaign will be the thousands who once lived in Buchanan County and have moved on. Richard and his colleagues view members of this group as loyal alumni who may consider the hospital something to write home about. In a transient society it may be true that you can't go home again, but at least you can send cash.

There are some in Independence who warn that People's Memorial has grown too ambitious, that it will be unable to sustain its current pace of expansion. They point to the lingering farm recession, to the baneful effects of last summer's drought and to the recent demise of the Rath Packing Company, a Waterloo firm that provided jobs to many in Buchanan County.

For the most part, though, the residents of this hard-pressed community are displaying an unaccustomed optimism. By forging ahead they may be unintentionally following a scenario that sociologist Richard A. Couto outlined several years ago in a book called *Streams of Idealism and Health Care Innovation*.

"Under the right conditions," Couto claimed, "a process may occur where the leaders of health fairs and clinics become recognized as 'doers'; ... specific skills such as fund-raising are revived, and the community begins to think better about itself...."

Do the right conditions now favor the citizens of Independence, Iowa? "This is our first big fund-raiser," Richard says. "We're keeping our fingers crossed."



THE ORIGINAL PEOPLE'S MEMORIAL HOSPITAL

with worry and pain, a friendly word can really help."

Actually, the blessings of People's Memorial extend well beyond the town's limits; the institution belongs to all 22,000 residents of Buchanan County, a farming area in the state's northeast corner. "I think sooner or later we touch just about everyone in the county," says Robert J. Richard, the hospital's bearded and energetic director. "We want those touches to be positive. We emphasize wellness."

In pursuit of wellness, staffers and volunteers crisscross the county, taking people's blood pressure, checking their cholesterol count, screening the sugar content in their blood—in short, spreading the gospel of nutrition, prevention

plants around here got laid off, so they were unprotected, too. Well, we made it a point to accept every patient who needed care."

No questions were asked and no bills were submitted. "It cost us a bundle," Richard says, "maybe a quarter of a million dollars, but that was okay. We did it because it was right. We're very much a part of this farm community. Our social mission is paramount."

Since this is Iowa, however, some patients object to the hospital's generosity. "I don't mean to be disrespectful," a farm hand, the father of three small children, wrote to Richard after the hospital had written off a \$300 charge for his stay there, "but I don't know how you could do what you did to me. I intend to