II: Growth and Development

The annual report of 1882 listed a total of 26 patients treated that year, the average length of stay being 61 days. This extended length of stay probably was the result of hospital use for terminal or domiciliary care and not just treatment of acute illnesses. In 1885, the hospital cared for 132 children and 38 adults. Sixty outpatients were treated and there was some provision of free food to indigents.4

There has been a steady reduction in length of stay throughout the hospital's history. Patient care has become more efficient. Also, the hospital is not just a refuge for long-term or terminal care.

In 1909, 768 patients were admitted. In 1918, 1,689 patients were admitted. The length of stay was not recorded for these years. In 1923, there were 1,925 patients with an average stay of 11.5 days. In 1951, there were 7,069 patients, averaging seven hospital days. The year 1965 showed 15,135 admissions, averaging 6.5 days. The largest annual admission occurred in 1983, of 19,653 patients, with an average length of stay of 6.9 days. In 1985, admissions had dropped to 15,275 with an average of 6.6 days, reflecting the current policy of careful utilization of hospital days.

An interesting report of the chairman of the Department of Obstetrics, Earl E. Sage, M.D., was made in 1924, indicating that there were 12 beds available for obstetrics ranging in price from $3 to $7.50 per day. The delivery room fee was $10.5 Current charges are more than tenfold higher for equivalent services at this time.

The institution grew. A School of Nursing was added in 1888. It was the first in Nebraska. Incidentally, at that time, there were less than 40 nursing schools in the entire United States.6 Mrs. Clarkson played a significant role in the development of the School of Nursing and continued in the voluntary position as manager until her death in May 1902. Her replacement was Caroline L. (Mrs. A.J.) Poppleton, who maintained the post until October 1903. Her husband, a dedicated supporter of the church and the hospital, was a vice president of the Union Pacific Railroad.

In 1909, a new building, accommodating 70 patients, was built on 21st and Howard streets. Clarkson was to continue as a successful burgeoning undertaking to be limited in space in a few years. Additions were made, including space for a laundry and for employee quarters. An X-ray apparatus was added to the hospital's armamentarium in 1914. The bed capacity was increased to 100 in 1916.

The medical staff periodically raised the subject of the hospital's location near the medical school. Their ambition was that easier access to and emphasis on education and medicine would provide a stimulating, productive setting in which to administer professional care to patients as well as to maintain highly professional instruction for all medical personnel, including the staff, interns, nurses and undergraduate students. The Board agreed in principle and appointed a building committee in 1927 with instructions to formulate some specific plans.7 Drs. A.D. Dunn, J.B. Potts and A.F. Brown were appointed to consult with the committee. It was reported that land had been donated by Harold G. Gifford, M.D., and Dr. John B. Potts, and that some adjacent lots were to be purchased by the hospital, all this in the area of 42nd Street and Dewey Avenue. The Board instructed the building committee to procure a set of plans for a 200-bed hospital. No such action was taken. In the minutes of a Board
The hospital was located at 21st and Howard streets from 1909-1936.

meeting of June 3, 1930, a building committee was again appointed with the instructions to obtain architect’s drawings for an 150-bed hospital and nursing home. Its chairman was Robert S. Trimble and three members of the medical staff were again assigned to it.

The severe economic depression, which reduced contributions to the hospital and made difficulty in the collection of fees for patients’ services, provided a major reason for failure to proceed with further building plans.

In 1936, the Board rather suddenly and with little participation by the medical staff, decided to purchase Lord Lister Hospital on 26th Street and Dewey Avenue. This maneuver provided improvement in facilities and an increase in bed capacity to 160 from 100 in the previous hospital. Space was provided on the top floor for enlargement of the surgical areas and the departments of Radiology and Pathology were enhanced and modernized. A nurses’ dormitory and training school, completed in 1946, provided more room for clinical activities. The hospital was busy and enjoyed a maximum patient census.

The land on 42nd Street and Dewey Avenue, some of it a gift from Drs. Gifford and Potts, and some of it purchased by Clarkson, was deeded to Lord Lister Hospi-
tal toward payment for its building in 1936.

The doctors' dream of a location near the medical campus was not accomplished until the present building was initiated in 1953.

Eugene McAuliffe, vice president of the Board of Directors, in a 1940 business meeting, indicated his pleasure at the Psychiatric Department's large financial contribution to the hospital. However, the department took up most of an entire floor. In the next few years, bed shortages became more acute on the general floors. In 1948, A.E. Bennett, M.D., director of the Neuropsychiatric Department, who had done much to develop the specialty of neuropsychiatry in Omaha, agreed to vacate the space.

The emergence of group hospital insurance plans interested the administration. The first consideration in 1939 was not favorable, but by 1945, 20 percent of patients had some kind of coverage, some of which was Blue Cross. Clarkson signed its first agreement with Blue Cross in 1944, with the endorsement of the majority of the Board of Directors. Some, including Robert H. Storz, urged caution in joining the new venture. There was a question of adequate financial reserves to maintain the plan, but as history records, it succeeded.

Various hospital functions were augmented. There was improvement in medical records and departmental activities. A medical library was instituted. In general, the staff, Trustees and administration worked together harmoniously and successfully. It is particularly worth emphasis
that a "conference committee" was formed in 1926, consisting of four members of the executive committee of the medical staff and four from the executive committee of the Trustees plus the hospital superintendent and the director of the School of Nursing. A channel of communication was therefore formed, much to the advantage of the professional and administrative divisions of the hospital. The principle of cooperation endeavor by Trustees and staff is currently advanced by the adoption of a joint conference committee consisting, according to hospital bylaws, of equal representation by staff and Board. The committee meets at least four times a year. The immediate past president of the staff sits with the executive committee of the Board.

During the 1930s, the Board of Trustees and professional staff recognized the need for expansion of the physical plant. Affiliation with the University of Nebraska with the School of Nursing existed rather loosely. It was agreed by all concerned that there should be a closer relationship between the medical school and the hospital. F.H. Davis was therefore appointed in 1931 to represent Clarkson in a meeting with Dean C.W.M. Poynter with a view to establish some kind of partnership. A more friendly relationship developed, but no definite alliance. Actually there was no definite union between the University and the hospital intern programs for some years, although the hospital was approved for internship in 1932 and for surgical residency in 1945, the first in Nebraska. In the 1940s through the 1960s, each hospital in Omaha procured interns on an individual institutional basis. The number of trainees varied each year in each hospital. Pay prerequisites and professional responsibilities were not uniform. Eventually, by designating certain doctors as members of the teaching staff to whom interns were assigned, along with the provision of regular meetings and demonstrations, an adequately rounded education program was established at Clarkson Hospital. Not until 1969 did the Clarkson residency program change to a joint one with the University of Nebraska College of Medicine in which trainees were rotated through certain teaching services at the University, Clarkson, the Veterans Administration facility and other designated hospitals. Medical education has proceeded in a most satisfactory manner since.

Trainees include not only young doctors preparing for their futures, but various technicians (pathology, radiology, nuclear medicine, respiratory therapy) and other health professionals, including those trained to assist in the administration of dialysis for kidney failure and those involved with the various techniques of cardiovascular evaluation.

The Board of Trustees was generous in its allocation of funds for education. Items such as house staff salaries, quarters and meals were provided. In general, as medical science progressed, excellent provisions were made by the hospital for a high standard of practice by the staff. As would naturally follow, a high level of medical education was maintained by the members of the teaching staff, all of whom held faculty appointments with the University of Nebraska College of Medicine. As volunteers or part-time instructors, they made important contributions to clinical education and continue to do so in various capacities and academic levels.