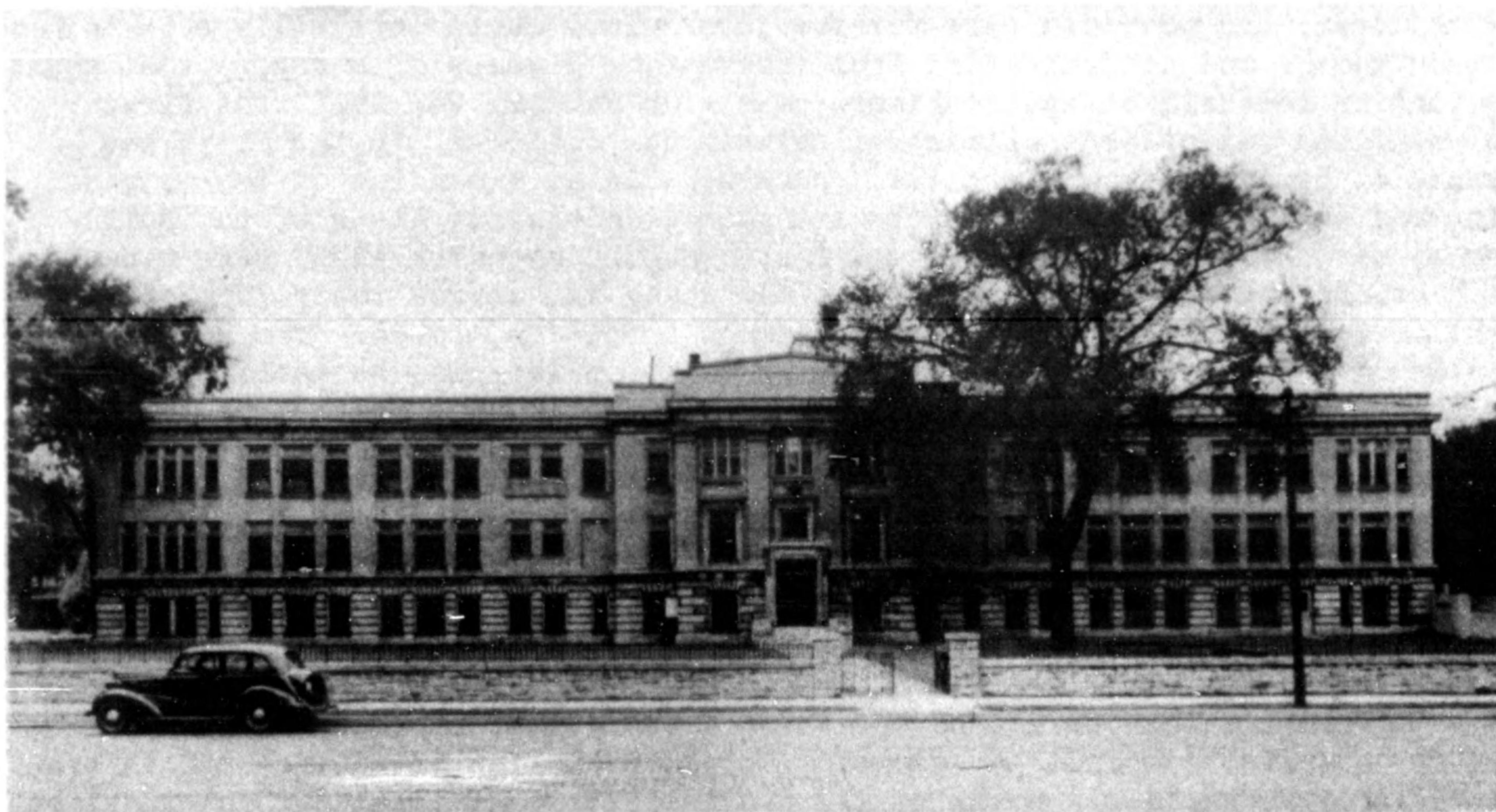


PUBLIC HEALTH CENTER



(Courtesy of the Minneapolis Star-Journal and Tribune)

Lymanhurst School for Tuberculous Children, 1921-1934
Lymanhurst Health Center, 1934-1942
Public Health Center, 1942-1942
Elizabeth Kenny Institute, 1942-

Public Health Center and its location became a unit of activity of the Division of Public Health May 31, 1921. It was removed from its location on October 23, 1942, and the building was dedicated as the Elizabeth Kenny Institute for treatment of and the teaching of treatment for poliomyelitis, on December 17, 1942.

In 1915, the Lyman homestead at Chicago Avenue and Eighteenth Street was given to the City of Minneapolis by George E. and Ella R. Lyman, primarily for a branch of the pediatric department of the Minneapolis General Hospital. This property extends south three hundred feet from Eighteenth Street, and west two hundred sixty-five feet from Chicago to Columbus Avenue. For four years the original homes, one facing Chicago Avenue and the other facing Columbus Avenue were used for this purpose. In 1919, the present building, to house the pediatric service, minus subsequent improvements, was erected by the City at an approximate cost of \$125,000.00. The building as erected is a two story, gray brick structure, with foundation designed to accommodate four additional floors, and is two hundred three feet north to south by thirty-seven feet east to west. At a point of completion, original plans for its use were abandoned.

Early in 1921, the Commissioner of Health proposed to the Board of Public Welfare and to the Board of Education that the building be used as a school for tuberculous children in a study of childhood tuberculosis. At that time, the Commissioner of Health was also Director of Hygiene for the Public Schools of Minneapolis (1921-1937). On May 31, 1921, the Lymanhurst School for

Tuberculous Children was dedicated and placed under the direction of the Commissioner of Health.

From this beginning the school grew as a special study of tuberculosis in children, and provided care for the tuberculous child physically able to attend school and not suffering from tuberculous disease of a degree that would warrant or necessitate institutional care. On January 24, 1922, the first tuberculosis out patient clinic exclusively for children, in the city, was opened at Lymanhurst and is still operating. As an extension of the original plan for study, observation wards were opened on the top floor of the building on March 6, 1922, and were used for this purpose until 1926, when financial conditions and the decision that the wards had served their purpose as a part of the study determined that the wards should be closed. The school continued until June, 1934, when another decision was reached that the study as far as observation in the school was concerned had progressed, up to that point, as far as necessary, and was, therefore, discontinued.

The study resulted, as outlined in the Lymanhurst Ten Year Report, in the recognition of tuberculosis occurring in two distinct stages: the first, or primary tuberculous infection type; and the second, or reinfection type.

During this period of operation a staff that represented every branch of medical science gave invaluable contributions of service and interest to the study. Published works of the staff received national and international attention, notably the Lymanhurst Ten Year Report * which is a monograph on the subject of tuberculosis in childhood. Representatives from foreign countries visited the institution to study methods and work of Lymanhurst in the field of tuberculosis control.

In 1934, with the close of the school, the name of the institution was changed to Lymanhurst Health Center, which in turn was changed to Public Health Center in 1942.

During the years of activity in tuberculosis control, other public health activities have been conducted at the Center. The tuberculosis clinic for children occupied the clinic facilities of the north wing, ground floor, from 1921 to removal. From 1923 to 1933 the Child Guidance Clinic of the Board of Education was located in the north wing, first floor. From 1922 to the present the heart clinic of the Board of Education uses the clinic facilities of the north wing, ground floor. The skin clinic of the Board of Education occupied the clinic facilities in the north wing, ground floor from 1923 to 1937. In September 1933, the tuberculosis offices of the Division of Public Health - public health nurses, clerks, and records - were moved into the north wing, first floor, to relieve congestion in the City Hall offices of the Division.

The Work Projects Administration and its immediate predecessors, Civil Works Administration, and Emergency Relief Administration, made possible several public health activities not possible under the Division budget alone. On March 22, 1935, a study of heart conditions in children, providing hospitalization for observation, study and care was opened on the second floor. In this space two twenty bed wards, school rooms, lamp treatment and electrocardiograph room, storage space, food service space, and administration offices were provided. In February, 1934, a limited service tuberculosis clinic for adults was inaugurated and was expanded to its present activities October 7, 1935.

* A Twenty Year Report is forthcoming.

This clinic occupied the south wing, first floor, and augmented the existing clinic for children in the north wing, ground floor and its adjacent x-ray and clinical laboratory facilities. On October 1, 1936, a venereal disease control clinic was opened in the south wing, ground floor.

Through made-work programs of the State and Federal Government, permanent improvements to the building and grounds were possible. In 1938, a stone and iron fence was placed around the grounds; the lawn, and garden space planted; and play equipment spaces provided. There was remodelling of the sub-basement to provide better laundry and storage space, as well as replacements and improvements in the plumbing and heating systems; and painting and refinishing throughout the building.

Activities of the three professional projects, heart, venereal, and tuberculosis, are described in following pages.

With its hospitalization and attendant facilities on the second floor; its clinic, office and administration facilities on the first floor; its clinic, x-ray laboratory, clinical laboratory, kitchen and dining room facilities on the ground floor; its physical plant facilities in the sub-basement and throughout, the structure was an ideal public health center. In fact, during the twenty years of occupancy by the Division of Public Health it has been placed in condition for any possible health activity.

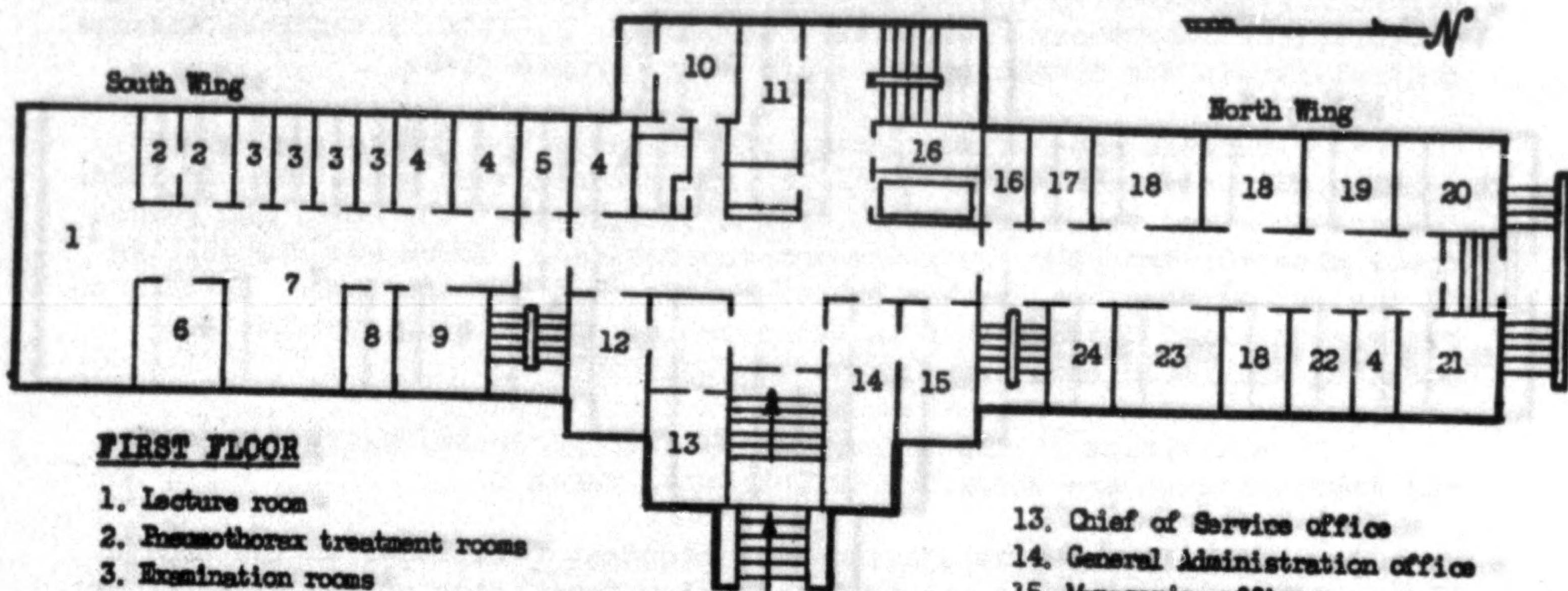
Recognition of Sister Elizabeth Kenny and her treatment of poliomyelitis by the city of Minneapolis, through the Board of Public Welfare, and recognition of the City as a medical center, made it seem feasible to make Minneapolis the headquarters of Sister Kenny in the United States. A suitable location for the work and patients of Sister Kenny, for treatment and teaching, was necessary. After months of deliberation the decision was reached that the Public Health Center activities of the Division of Public Health should be removed from their location and the building dedicated as the Elizabeth Kenny Institute. As such, it became a unit of the Minneapolis General Hospital. This dedication took place December 17, 1942. All activities of the Division were removed by November 1, with the exception of the heart study and clinics. The heart study remains in the institution, but as a unit of the General Hospital.

No immediate solution of the problem of housing the Public Health Center activities was found until space was made in the General Hospital building. The Public Health Center activities are now located at 510 Seventh Avenue South.

To assume that this change of location for the Public Health Center, with its attendant disruptions, was not made by the Division personnel without regret and disappointment would be sheer bravado. However, the importance of the work accomplished and being carried on is recognized wherever public health has intelligent guidance and understanding. It is hoped, therefore, that the foresight that made possible the stay of Sister Kenny in Minneapolis will reestablish a proper location for the dislocated public health activities.

Without regret and disappointment are the wishes of the Division for success of the activities of the Elizabeth Kenny Institute.

PUBLIC HEALTH CENTER
As Used By The Division of Public Health



FIRST FLOOR

- 1. Lecture room
- 2. Pneumothorax treatment rooms
- 3. Examination rooms
- 4. Toilets
- 5. Film storage
- 6. X-ray reading room
- 7. Waiting room
- 8. Interview room
- 9. Record room
- 10. Employees' rest room
- 11. Sewing room
- 12. Cardiologist's office

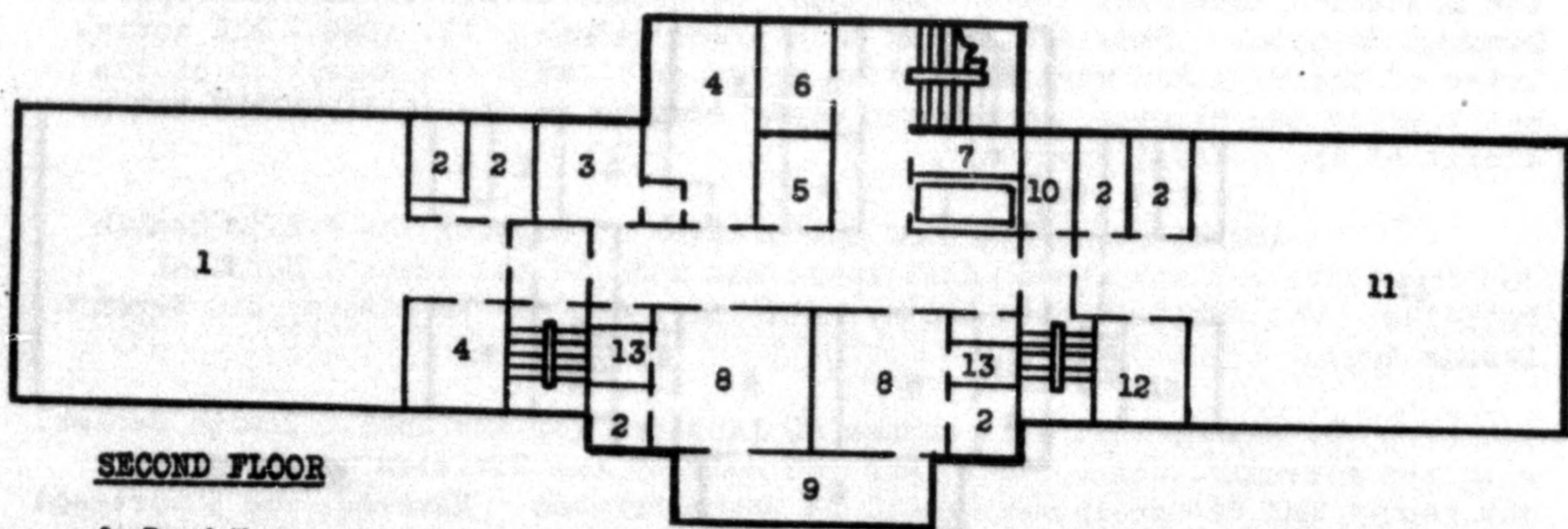
NORTH WING

Public Health Nurses

SOUTH WING

Tuberculosis Clinic for Adults
CENTER PORTION
Administration

- 13. Chief of Service office
- 14. General Administration office
- 15. Manager's office
- 16. Storage room
- 17. Public Health Nurses' office
- 18. File room
- 19. Director of Tuberculosis Control office
- 20. Secretary's office
- 21. Director of Parochial School Nursing office
- 22. Tuberculosis records office
- 23. Nurses' rest room



SECOND FLOOR

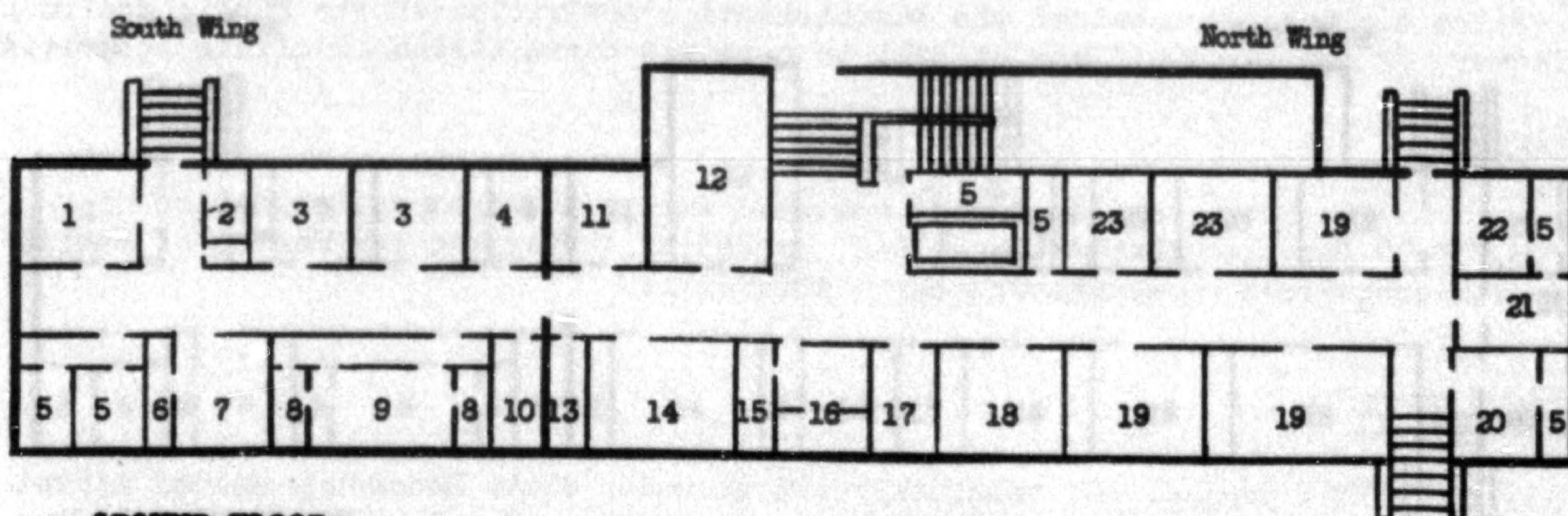
- 1. Boys' Ward
- 2. Toilets
- 3. Supervisor's office
- 4. Special ward
- 5. Electrocardiograph and lamp treatment room
- 6. Nurses' dressing room
- 7. Linen room
- 8. School rooms
- 9. Occupational therapy room

SECOND FLOOR

Study of Heart Conditions in Children
(Children's Heart Hospital)

- 10. Drug room
- 11. Girls' Ward
- 12. Diet kitchen
- 13. School supplies and storage

PUBLIC HEALTH CENTER



GROUND FLOOR

- | | | |
|---------------------------------|--------------------------------|------------------------------|
| 1. Office and records | 9. Preparation room | 17. Patients' dressing room |
| 2. Supervisor of Nurses' office | 10. Nurses' dressing room | 18. Employees' dining room |
| 3. Treatment rooms - gonorrhea | 11. Dish washing room | 19. Clinic rooms |
| 4. Drug room and laboratory | 12. Kitchen | 20. Record room |
| 5. Toilets | 13. Technicians' dressing room | 21. Employees' dressing room |
| 6. Examination room | 14. Staff dining room | 22. Clinical laboratory |
| 7. Director's office | 15. X-ray dark room | 23. Cold storage rooms |
| 8. Treatment rooms - lues | 16. X-ray laboratory | |

SOUTH WING

Venereal Disease Control Clinic

CENTER PORTION

Kitchen and Dining rooms
Food storage
X-ray laboratory

NORTH WING

Tuberculosis Clinic for Children
Heart Clinic for Children
Clinical Laboratory

SUB-BASEMENT (plans not shown)

Record storage
Food storage
Miscellaneous storage
Refrigeration machinery
Elevator machinery

HEATING PLANT (plans not shown)

Located in a separate building on grounds, immediately behind the main building.

58

ADMINISTRATIONPersonnel

Under the direction of the Commissioner of Health, a staff of 13 civil service employees maintained the administration activities of the Public Health Center. A medical staff was on call to care for consultation or clinic activities.

Finance

The Public Health Center operated within a budget appropriation of \$48,735.00 for the calendar year 1942, expending during the ten months of Public Health activities - January-October - \$35,981.11.

HEART STUDY

This project was originally set up under State Emergency Relief Administration, and functioned under that organization from March until August, 1935. The project was reopened December 10, 1935, under Work Projects Administration, and continued, with the exception of temporary cessation of activity from August 20 to November 21, 1939, under that agency without interruption through November 15, 1942, sponsored and under the immediate direction of the Division of Public Health. On November 16, the project became entirely a function of the City as a unit of the Minneapolis General Hospital.

The project was conducted on the top floor of the Center, which consists of two twenty-bed wards, one in the north and one in the south wing, and school-room, dining room, diet kitchen, isolation rooms, electrocardiograph room, and office in the center. Twenty-four hour hospital service was maintained.

Personnel

The project was under the supervision of the Commissioner of Health assisted by the cardiologist and other members of the Public Health Center Staff, and one Public Health Nurse assigned to nursing supervision of the project. All project personnel were assigned through the Work Projects Administration. Registered and graduate nurses, nurses' aids, teachers, technician, maids, and janitors designated the personnel employed.

Finance

Pay rolls were financed by the Work Projects Administration, at the prevailing wage scale for skilled, semi-skilled, and unskilled workers. Every other item incident to the project was borne by the Public Health Center budget.

Patients

Through the heart clinic for children conducted at the Center, and to which are referred children from the school enrollment presenting evidence of defective heart function, and unable to pay for the services of a private physician, children are discovered suffering from rheumatic fever and incipient heart conditions. Approximately sixty-four per cent of the patients admitted to the study were referred from this clinic. The cardiologist directing the study conducted this clinic.

About twenty-two per cent of the admissions were referred from the Minneapolis General Hospital, and eight per cent by private physicians. About

five per cent of the admissions were referred through the home visitor from the project, and were children from the homes of patients. The remaining one per cent were referred by other clinics and agencies.

During the period of operation, December 1935 through November 15, 1942, 564 children - 262 boys and 302 girls - have been admitted to the wards. This figure includes 209 children whom it was found necessary to readmit after discharge because of recurrent conditions. During 1942, 95 children were admitted - 34 boys and 61 girls. Of this number 38 were readmissions. Ages of the children ranged from four to fourteen years.

The highest census on any one day, January-November 15, inclusive, was 44; the lowest 19. On November 15, the census was 30 patients. The total patient days for this period was 9,200. The average continuous stay of a patient was about two and one-half months.

Study

Heart disease is today the leading cause of all deaths. Many heart conditions of adult life have their inception in childhood. Means of preventing permanent heart damage from potential and contributing causes was an important phase of this study.

A complete family and physical history was recorded for each patient upon admission. A complete progress record was made during the residence of the patient in the wards. Periodic x-ray, fluoroscope, electrocardiograph, urinalyses, blood studies, temperature, and other records became data for study. Special diets and medication were administered when indicated. Two sun lamps, given to the institution by a local organization, were included in the treatment when indicated.

Many children were found to have potential heart disease; that is, they had active rheumatic infection but had not developed signs of heart involvement. It is this particular group which presents a fertile field in preventive treatment. It is hoped that by constant, careful supervision over a period of years these children may escape heart involvement entirely.

Tonsils and adenoids are removed when indicated. This work is done with the cooperation of the Minneapolis General, and the University Hospitals. There were 14 tonsillectomies during the year. Eye testing and prescription when needed were obtained, for patients who could be transported, at the Board of Education eye clinic. Seventeen patients were taken to this clinic during the year. There were 47 patients taken to the dental clinic of the General Hospital.

Visits to the homes of patients were made during the children's stay in the wards, and after discharge to emphasize importance of proper care in the home; to perpetuate the good effects of the stay in the institution. These visits were made by one of the project nurses. At the time of visits of parents to the wards, opportunity was made to talk to them about proper care of the patient when he returned home.

Children who were discharged from the wards were studied in the out patient clinic.

The work conducted through the study has been of considerable interest to professional and lay groups. The clinical material has been used in teaching a group of junior and senior medical students from the University of Minnesota.

60

The cardiologist in charge of the study is an assistant professor of medicine in the Medical School of the University of Minnesota.

This study will result in new and increased knowledge of heart function and conditions, which, it is hoped, will reduce the incidence of, and deaths from heart disease. As the leading cause of death throughout the nation today is heart disease, no effort is too great in attempting to learn more about the disease, its prevention, and alleviation.

Laboratory

The regular facilities of the Health Center x-ray and electrocardiograph laboratories were available for the study.

All clinical laboratory activity incident to the heart study except x-ray was carried on in the laboratory of the Center by a technician from the Work Projects Administration personnel.

During the period of Division operation of the study, 1,904 examinations and analyses, which included urinalyses, differential, cell counts, hemoglobins, sedimentation rates, and bleeding and coagulation times, were made for the heart wards, and the out patient clinic. During this period, 301 electrocardiographs were made for the heart wards, and the heart clinic.

Teaching

Preschool, elementary, and, when needed, high school grade activities were conducted for the patients by qualified teachers. Bedside teaching was conducted for patients restricted to complete bed rest, and classroom work was conducted for patients allowed to be up and about part of the day. The curriculum of the public schools was closely followed, so that the patients of school age could keep up with their regular school grades as far as possible.

An important part of the teaching program was handicraft activity, and recreation for the children. Movies, parties on special occasions, programs by outside groups, gardening, walks, boy scout meetings, piano and other instrument instruction, and diversified handicraft work were all planned by the teachers for the children's benefit.

Miscellaneous

In cooperation with the home service program of the Work Projects Administration, a program of nutrition training for mothers of children who were patients in the study was conducted. The course included food planning and preparation. Nineteen mothers availed themselves of this opportunity thereby benefiting 87 children in their combined families.

62

VENEREAL DISEASE CONTROL CLINIC

The venereal disease control clinic operated throughout the year through the aid of the Work Projects Administration. This project occupied the clinic facilities in the south wing, ground floor, until November 1, when it was moved to 510 Seventh Avenue South. Removal of the clinic to its new location necessitated suspension of activities for many weeks during reconditioning of the new location.

Personnel

The project was under the direction of the Commissioner of Health. From the regular staff of the Division of Public Health one physician, part time, and one nurse are assigned to the project.

From the Work Projects Administration one physician, three nurses, one clerk, two janitors, and two maids were on duty December 31.

Finance

The sponsor contributed to the project the salaries of the regular staff members of the Division of Public Health, the space and maintenance of the clinic. The Work Projects Administration financed the pay rolls for all WPA personnel.

Activity

To this clinic were referred transients, persons held by the Court under recognizance of the Commissioner of Health, sources of infection, contacts, and other persons unable to pay for diagnosis or treatment of venereal diseases, and unable to receive care elsewhere.

During 1942 the following activities (also included on page 41) were conducted:

| | | | |
|----------------------------|-------------|---------------|--------|
| New patients registered | | | 407 |
| New cases reported | | | 108 |
| | <u>Male</u> | <u>Female</u> | |
| Syphilis | 40 | 19 | |
| Gonorrhoea | <u>16</u> | <u>33</u> | |
| Total patient visits | | | 10,910 |
| Treatments given | | | 8,737 |
| | Syphilis | 8,488 | |
| | Gonorrhoea | <u>249</u> | |
| Prescriptions filled | | | 432 |
| Laboratory specimens taken | | | 4,311 |

OTHER CLINICSHeart Clinic for Children

Two mornings each week, children from the schools of the city are referred by previous appointment to the cardiac clinic. The children are carefully examined and x-rayed to determine a definite diagnosis, if one exists, or conditions leading to, or the existence of abnormal heart conditions. Through this clinic are referred candidates for the special classes conducted for the heart crippled in the public schools, and for wards in the Center. A cardiologist on the Hygiene staff, assisted by a Hygiene nurse, Board of Education, conducts this clinic. During the year ending December 31, 1942, 259 children were referred to the clinic for first visit. There was a total of 935 clinic visits during the year.

Tuberculosis Clinic for Children

The activities of this clinic are included in the paragraph on tuberculosis control of the Division of Public Health.

LABORATORY AND X-RAY

All heart, and chest x-rays incident to the clinic facilities, as well as the Work Projects Administration heart study project, were made in the x-ray laboratory of the Center. During the year, 3,697 x-rays, and 228 fluoroscopes were made for the clinics and the ward.