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OTHER VOICES A history of our hospital By Truman Lastinger

inesday, May 26, 202

Until the Great Depression and into the WWII years, most of the hospitals in rural areas were owned and operated by physicians. During the Depression, many of the hospitals were closed due to the lack of money to keep

them operating. Because money was in such short supply, barter-

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ing was the main source of revenue. Flouroscopes, xray machines and other new necessities could not be purchased with chickens, hogs or vegetables.

TRUMAN LASTI

In 1941, the state of Georgia enacted a bill which became known as the Hill-Burton act. The bill gave counties in Georgia th right to establish hospital authorities. The hospital au thorities could then purchase, or build, and operato hospitals.

The hospital in Cairo was known as Walker's Hospital At the time, it was operated by Dr. Rehberg. In the fall of 1946, Dr. Rehberg an-

nounced that he was closing the hospital. In order to keep the hospital from closing, the board of commissioners in Grady County adopted the Hill-Burton A in January 1947. They appointed members to the hospital authority. was authorized by law to float bonds. According to the Hill-Burton Act, the county commissioners were required to give the hospital authority "up to two percent of the ad-valorem tax" in order to ensure the operation of the hospital.

The hospital authority purchased Dr. Rehberg's hospital. The county commissioners guaranteed \$300 per month for one year to ensure its operation. The hospital then became known as Grady General Hospital.

The hospital was located on the corner of Broad Street and Second Avenue SE, where Ameris Bank is now located. It was in oper ation at that location until 1958. It became obvious that a more modern hospital (with more rooms and better equipment) was needed.

With the help of the Roddenbery and Jones families, land was purchased on what was then called River Road. In 1959, construction began on a new hospital. It opened in 1960, and the people of Grady County had a new, modern 28-bed hospital. The hospital had five doctors on the medical staff and the public utilized their services.

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Grady General Hospital was constructed under the existing Jim Crow laws. There were two entrances, separate but equal. The north entrance was for whites, and the south entrance was for colored. The north wing was for white patients, and the south wing for colored. Following the Civil Rights Act of 1964 and the Voting Rights Act of 1965, the south, or colored, entrance was closed. Everyone used the north entrance. The entire hospital was integrated.

During the mid to late 1960s, the medical staff began to decline, leading to decreased revenues. The resulting decrease in profits required the staff to increase hours and suffer reduced pay. The nurses objected to this and to some other demands from administration. As a result, in

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Lastinger shares the history of Grady General Hospital

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1968, Grady General Hospital became the first hospital in the United States to suffer a nurses' strike. Shortly thereafter, the pay was reinstated and the strike was over.

In an effort to recruit doctors, the hospital authority decided that it needed some new office space for them. The authority purchased a lot on Fourth Street SE across from the hospital and built five nice modern offices.

The hospital had two doctors on staff at that time. One of them broke his leg while walking around on the construction site. He was out of work for three months, resulting with the hospital having only one doctor remaining, on staff.

There was a shortage of doctors available to recruit. In order to attract some, the authority had to guarantee incomes for a year. The authority recruited some doctors. However, as soon as the year was up, another hospital would make them an offer with a guaranteed income. Consequently, they would leave.

In 1975, the hospital authority decided a larger and more modern hospital was needed in order to keep doctors on staff. They issued a bond and proceeded to build a nice, new hospital across the north wing of the hospital. It opened in 1976 and was ultra-modern with a new up-to-date I.C.U. Most of the existing patient rooms were converted to offices.

The renovation helped for a short while. However, there was not enough revenue produced to pay the bonded indebtedness and to operate the hospital.

Efforts by the authority to get extra money from the county commissioners were unsuccessful. The county was broke. The commissioners refused to designate even one percent of the ad valorem tax for use by the hospital, despite the fact that the Hill-Burton Act gave them permission to designate up to two percent for the hospital.

Hospital authority members recognized that the hospital needed someone with the ability to operate a hospital. They also needed the purchasing power of a larger operation.

The authority members asked Archbold hospital and Tallahassee Memorial Hospital to make suggestions or proposals for operating Grady General. Tallahassee Memorial and Archbold presented proposals.

In 1981, the board, after careful consideration, agreed to Tallahassee Memorial's leasing of Grady General for four years, with an option to renew the lease for four more years. Tallahassee Memorial was to pay rent in the amount of the bonded indebtedness payment and take over the management of the hospital.

Due to the two hospitals being in separate states, there were problems with insurance companies and state laws. After three years, Tallahassee Memorial notified the hospital authority that they would not renew the lease for four more years.

In 1986, the hospital authority entered into a lease agreement with Archbold hospital for a fifteen-year period with up to four renewals for fifteen years each. The agreement equals a possible seventy five-year lease. Archbold hospital agreed to pay the bond payments as rent until the bond was retired and then to operate Grady General rent free. The lease also requires Archbold to cover all indigent care required by federal and state laws. According to the lease, all profits from operations are required to remain in Grady General and to be spent on updating the hospital.

Archbold has been successful in recruiting doctors as well as retaining them. The hospital has prospered with Archbold operating it. The bonded indebtedness was paid in full in 1998.

The exterior of the hospital has since been remodeled. The hospital rooms have been updated and modernized. Grady General Hospital is now recognized as one of the best rural hospitals in the United States.

The hospital just finished the last improvement by enlarging the hospital and moving the imaging center inside. This major project contains some of the latest and most sought-after equipment available. Grady General Hospital is now second to none in Georgia or the United States.

Grady General Hospital is a thriving and progressive 60-bed hospital. The medical staff is excellent. It is supported by an above average nursing and supporting staff. The hospital is currently valued in excess of sixty million dollars and is debt free.

The Georgia Hospital Association estimates that Grady General Hospital has a local economic impact in excess of \$38 million a year, including the creation or sustainment of 327 jobs.

Editor's Note: Truman Lastinger served on the Grady County Hospital Authority for many years and was instrumental in negotiating a lease for Archbold Medical Center to manage and operate Grady General Hospital. He wrote this short history in 2013 and shared it with us during his visit to Cairo Monday.