



A Gift of Service

A SEVENTY-FIVE YEAR HISTORY OF
THE DARTMOUTH-HITCHCOCK MEDICAL CENTER AUXILIARY

1933-2008

Hall of Honor

EDITH AMSDEN AWARD RECIPIENTS

Named for Edith Amsden who volunteered at Mary Hitchcock Memorial Hospital for over 45 years, the award recognizes a commitment of time, and is primarily in recognition of the extraordinary desire and ability to improve the quality of life for those in need at MHMH.

1985	Elvie O'Hara & Elsie Wood
1986	Grace Comans
1987	Mary Burke
1988	Lifeline Volunteers
1991	Nancy Hart
1992	Kayo Sands
1993	Sylvia Camp
1994	Freda Stephens & Nancy King
1995	Polly Hebble
1996	Dot Coutermarsh*
1997	Foster Blough*
1998	Jackie Sices
1999	Polly Parkhurst
2000	Bill & Jean Hotaling John & Mary Lincoln
2001	Hugh Watson
2002	Juliet Grant-Suttie
2003	Robert "Bingo Bob" Kirk
2004	Adrien "Smitty" Smith
2005	Barbara Blough
2006	Karen Terry*
2007	Pat Appleton

*Also recipient of New Hampshire Hospital Auxiliary Award

AUXILIARY PRESIDENTS

Hattie Kingsford	1933-1935
Dorothy Strong	1935-1937
Madeline Austin	1937-1941
Ann Stevens	1941-1946
Barbara Hayward-Weymouth	1947-1949
Marjorie Packard	1950
Doris Atherton	1951-1952
Henrietta Bartlett	1953-1955
Judy Gamble	1956-1957
Rita Holbrook	1958-1959
Sally Peters	1960
Pat Hutchins	1961-1964
Marge Small	1965-1967
Mary Grant	1967-1969
June Russell	1969-1971
Adrienne Gude	1971-1973
Louise Gardner	1973-1975
Nancy Dingwall	1975-1977
Barbara Farr	1977-1979
Sally O'Hare	1979-1981
Eleanor Rand	1981-1983
Carolyn Bird	1983-1985
Betsy Magill	1985-1987
Polly Hebble	1987-1989
Sylvia Camp	1989-1991
Jean Hotaling	1991-1993
Kayo Sands	1993-1995
Rita Fischbeck	1995-1997
Karen Terry	1997-1999
Hugh Watson	1999-2001
Margot Rous	2001-2003
Kilborn Church	2003-2005
Mimi Weinstein	2005
Donald Watson	2006-2008
Barbara Blough	2008-



DHMC Auxiliary Volunteers

DEDICATED TO ALL DARTMOUTH-HITCHCOCK
MEDICAL CENTER VOLUNTEERS

*Past,
Present,
&
Future*

A Gift of Service

A SEVENTY-FIVE YEAR HISTORY OF
THE DARTMOUTH-HITCHCOCK MEDICAL CENTER
AUXILIARY

1933-2008

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Introduction

The Mission Statement of the Dartmouth-Hitchcock Medical Center Auxiliary represents a larger story, a story that begins just before the start of the twentieth century and continues today as we celebrate the 75th Anniversary of the Auxiliary. It is a story that traces the transformation of one small rural hospital in the North Country of New Hampshire into an internationally-recognized major academic medical center. The pages that follow describe the role of the Auxiliary in the evolution of Mary Hitchcock Memorial Hospital.

In 1890, hospitals were still a new concept and people tended to accept home care as the norm. Hospitals were seen as places where people went to die and few ever emerged to resume a normal life. The Civil War, with its horrendous number of casualties and medical advances in treatment, led the medical community to see the possibilities of hospitals as a means of making people well again.

Dr. Carlton P. Frost, Dean of Dartmouth Medical College, headed the newly formed Dartmouth Hospital Association which purchased a small piece of land at the northern end of Hanover. He contacted his friend, the prosperous hotelier, Hiram Hitchcock, who

embraced the prospect of building a small hospital in the area, a facility that would not only serve the sick but would also provide a place for the training of doctors and nurses. The death of Mr. Hitchcock's wife in 1887 prompted the two men to move forward with their planning. The new hospital was built with funds donated by Mr. Hitchcock and dedicated as a memorial to Mary Maynard Hitchcock.

At first, the townspeople found the new facility too big and too expensive, and expressed concern over the annual financial support that was expected from them. It was considered a proverbial "white elephant." After it opened in 1893, it was necessary for Mr. Hitchcock and his close friends to make payments against each year's deficit, a practice that was to be continued until his death in 1900. In time, however, his visionary plan was vindicated as the benefit of hospital care was accepted by the growing number of North Country communities it began to serve.

The pages that follow describe the role of the Auxiliary in the evolution of Mary Hitchcock Memorial Hospital from the hospital's early difficulties through its steady growth culminating in the

formation of Dartmouth-Hitchcock Medical Center in the mid-1970s. By uniting as a comprehensive academic medical center, Mary Hitchcock Memorial Hospital, the Hitchcock Clinic, Dartmouth Medical School, and the Veterans Administration Hospital overcame the restrictions of their rural environment and transcended their individual roles and limitations to become a shining example of excellence in teaching, research, and patient care.

Formed in 1933, the Auxiliary (originally named the Mary Hitchcock Memorial Hospital Auxiliary and, since 1982, known as the Dartmouth-Hitchcock Medical Center Auxiliary) has been part of that transformation, adapting with the times to new needs and growing in membership and scope of responsibilities. The Auxiliary was to raise funds for the financially strapped rural hospital. Now as it celebrates its 75th anniversary, 500 dedicated volunteers provide financial support and assist in nearly every department and service at the Medical Center.

This remarkable story will show the link of progress and connectedness that continues between the Auxiliary and this magnificent medical facility.

Prologue

THE EARLY YEARS AT MARY HITCHCOCK

When Mary Hitchcock Memorial Hospital opened its doors in 1893, it reflected Hiram Hitchcock's vision of an ideal hospital with little regard for the economic practicalities of its location in sparsely populated rural New Hampshire. It was designed on the then-popular pavilion plan with wards widely separated from each other, large windows, and large airy spaces throughout. For the first few years of its operation, the Hospital experienced deficits because its capacity was far greater than the number of patients being treated. Although the benefits of hospital care became better known throughout the area and the patient population increased each year, deficits continued, to a large extent due to the "free wards," an arrangement made between Hitchcock and the Medical School. According to the agreement, medical faculty served as the unpaid staff of the Hospital in

return for the privilege of using ward patients for instructing students. As a result, all ward patients were treated without charge.

Within a decade, however, as hospital care became more popular, the problem changed to one of overcrowding, and in 1907, and again in 1913, the plant was expanded to meet the demand for beds. By the 1920s, the Hospital was facing a shortage of professional staff, a problem that was addressed by Dr. John Bowler, who joined with four colleagues to form the Hitchcock Clinic in 1927. The Clinic brought better care to patients, economized on overhead, and encouraged doctors to stay in the community by instituting a degree of income pooling. The Clinic, which opened with a partnership of five general practitioners, today numbers six hundred and seventy five physicians.

In addition to the main campus in Lebanon, there are four major sites in Concord, Keene, Manchester, and Nashua, New Hampshire, and many smaller practices throughout New Hampshire and Vermont.

The Great Depression had an intense effect on Mary Hitchcock Memorial Hospital as it did on the rest of American society. The old "free-bed system" was overwhelmed by the widespread need for Hospital services, and funding loomed as the major managerial crisis of the time. But careful and steady attention to detail enabled the Hospital's administration to stay in the black, barely. Several years earlier, the Board of Trustees, concerned about hospital management and staying abreast of developments at other major hospitals, had decided to exploit the resources of Dartmouth's Tuck School of Business Administration, to improve

the quality of Mary Hitchcock's business practices.

This initiative led to the appointment of Tuck faculty member James A. Hamilton as Superintendent of the Hospital on a part-time basis. He continued his teaching at the business school while he pursued the challenges of finance and expansion at the Hospital. The North Country and its neighboring regions had discovered the excellence of care at Mary Hitchcock, which significantly increased the demand for its services. The growth and effectiveness of the Hitchcock Clinic also contributed in a very major way to the growth of the Hospital.

It was during Superintendent Hamilton's term that the Mary Hitchcock Memorial Hospital Auxiliary, which would play an important role in the Hospital's

financial success, was formed. The Hospital had relied on volunteers and community support since its earliest days, but the formal establishment of the Auxiliary in 1933 gave form and substance to those efforts and foreshadowed the partnership the Volunteer Program now enjoys with the DHMC family.

Mary Hitchcock Memorial Hospital (MHMH) was but a year old when one hundred Hanover women formed the Hospital Aid Society for the purpose of providing a free bed for Hanover residents. Each member was assessed 25 cents annually to buy the bed.

The next example of local philanthropy began in 1913 with Donation Day, a designated day in the early fall each year when local townspeople as well as members of surrounding North Country villages brought fresh

produce, canned goods, and cash to the Hospital for the benefit of patients and staff. The Hanover Women's Club sponsored Donation Day from 1920 until 1933 when it came under the aegis of the newly formed Auxiliary.

When it eventually became clear that the Hospital could not survive on donated produce alone, the Trustees recognized the need to solicit additional financial support from the community. In 1933, a Trustee study committee proposed that a new Auxiliary organization be formed, a proposal that was quickly adopted. The committee was chaired by Max A. Norton (1897-1985), the father of current Auxiliary member, Mary Masland. Mr. Norton, a longtime financial officer of Dartmouth College, was a tireless and dedicated supporter of MHMH, serving as President of the Board of Trustees and President of the Corporation.



Mary Hitchcock Memorial Hospital, circa 1895

PART I

*The Hospital and the Auxiliary:
A Partnership*

1933-1957

The first meeting of the Mary Hitchcock Memorial Hospital Auxiliary was held, most appropriately, on Donation Day, October 21, 1933, under the leadership of Mrs. Howard “Hattie” Kingsford, the wife of a MHMH doctor. The overriding purpose of the Auxiliary, according to its constitution, was “... to promote the welfare of the community through systematic support of the services rendered by the Mary Hitchcock Memorial Hospital.” At the time, however, the main objective was to raise annual funds from members and others for the Hospital’s unrestricted use. The volunteers’ extensive involvement in service to departments and programs would come later.

Although fundraising for the Hospital during the 1930s and beyond took on many different forms, Donation Day remained a steady source of support. It required great organizational skills by Auxiliary members as each year’s chairperson managed an elaborate system of vice-chairpersons who were responsible for the activities of outlying town chairs. For example, in 1935 there were sixteen New Hampshire towns and thirty-two Vermont towns participating in Donation Day. Boy Scouts and Girl Scouts helped distribute empty canning jars during the summer months. Elaborate arrangements for trucks, buses, and cars to transport the produce had to be made in advance.



Donation Day, Mary Hitchcock Memorial Hospital

The results were impressive: bushels of potatoes, cabbage, squash, carrots, pumpkins, apples, onions, along with canned jellies, relishes, etc., were brought to the front lawn of the Hospital. Following the big day, the Hanover newspaper would print a detailed summary for each participating town. The value of the donated produce in 1935 totaled \$1,578 and the cash contributions were \$2,510. Equally impressive was the number of 1935 participants: 2,857, all of whom automatically became members of the Auxiliary the following year under the membership rules at the time.

Since fundraising was the Auxiliary’s primary mission during these early years, additional drives and activities were organized. One of the most popular and

successful events sponsored by the Auxiliary was the “North Country Fair,” first held in Dartmouth’s Alumni Gymnasium in April of 1934. As described in *Fulfilling our Purpose*, the 50-year history of the Auxiliary, the fair was enjoyed by more than 4,000 people. There were exhibits, an auto show, games, music and dancing. The climax was a “Hollywood Holiday” ball in the evening. Mary Masland remembers the Fair as the social event of the summer for the North Country. Her father, Max Norton, would dress up in a black-and-white checkered suit, a derby hat, and a false mustache for his role as “Mr. Bones” in the minstrel show.

The first fair raised \$2,995 for the Auxiliary which was used by the Hospital to help pay for equipment and supplies.



Mary Masland

1933.....1934.....1935

Hitler becomes German chancellor

Prohibition repealed in U.S.

Roosevelt inaugurated

First-class stamp: 3 cents

“Dust Bowl” ruins croplands

Dionne quintuplets born in Canada

Gangster John Dillinger killed

Vitamin K discovered

Italy invades Ethiopia

“Gallup Poll” begins

Nylon created by DuPont

Sulfa drugs discovered



Patient room with book cart

The Hospital Grows

THE AUXILIARY EXPANDS SERVICES

In 1936, Donald Smith became Superintendent of the Hospital and managed several plant and program expansions. The nurses' residence, referred to as Building #37, was completed in 1937 and the "East Wing" opened in 1938. Thanks to the installation of its first elevator, the Hospital grew to four stories. Departments were created for the practices of Pediatrics and Obstetrics. The administration also established its first residency programs in Pathology and Radiology. The institution's progress was impressive, in spite of the Great Depression.

By 1937, the Auxiliary had formed itself into five standing committees, reflecting its dual role as a service organization for raising funds and for providing patient care. The committees were: Publicity and Education, Hospital Services, Patients' Welfare, Donation Day, and Ways and Means.

The activities and programs of the Auxiliary greatly expanded over the years. One of the "new" services is now a childhood memory for Joan "Posey" Fowler, who remembers accompa-

nying her mother on two occasions – in 1935 and in 1936 – to a basement room at the Hospital to help a group of women roll bandages and make bandage packs for the operating rooms. Posey eventually became an Auxiliary member herself and served on the Board of Trustees. In 2007, she was named "Outstanding Community Ambassador" by DHMC. Her commitment of volunteer service continues today. Today there are 51 areas of service coordinated by the DHMC Office to Volunteer Services.

1936 1937 1938

Spanish civil war begins

King Edward VIII abdicates

Boulder Dam completed

First successful helicopter flight

Japan invades China

The dirigible "Hindenburg" explodes

Amelia Earhart vanishes

The Glenn Miller Band debuts

U.S. unemployment at 19%

Munich Pact signed

Ballpoint pen invented

First "photocopy" produced

MHMH has 164 beds

Another new service was initiated in 1934 when the Auxiliary, upon the recommendation of the Patients Welfare Committee, purchased and put into operation the Book Cart, which was used by volunteers to distribute books and magazines to patients' rooms.

One of the most popular requests was for *The Reader's Digest*, because its small size meant it could be easily read in bed. By the Thanksgiving and Christmas holidays in 1940, volunteers were busy distributing books and magazines, decorating patient trays, providing greeting cards and gifts, decorating trees, and holding story-telling hours for children.

In August of 1937, still another event was added to the fundraising program. The first Indoor Horse Show was held in Dartmouth's Davis Hockey Rink, with afternoon and evening performances. Ticket prices ranged from 50 cents to \$1.50. A second horse show was held in 1938. Then the Auxiliary turned to Gilbert and Sullivan, staging productions of "H.M.S. Pinafore" and "The Pirates of Penzance" in Dartmouth's Webster Hall. During these early years and continuing into the post-war years, various other benefits were held, including poppy sales (1937-1943), a George Washington Birthday Party (1936), an art show on the Hanover Inn lawn, a diving exhibition, boxing matches, fashion shows,

theater productions, concerts, and dances.

In an expansive tribute to the Auxiliary in 1942, Hospital President Max Norton praised its invaluable service as follows:

“ I cannot stress too emphatically how much the Auxiliary means to the Trustees and others who are directly charged with the well-being and direction of Hospital affairs. Through its splendid cooperation and accomplishments, the Auxiliary has lent encouragement to the Board and has created confidence that has in a great measure enabled the Trustees to enlarge and perfect its Staff, purchase new and modern equipment and expand generally in all of its departments – all to the end of carrying on to the best of its ability for the benefit of the countryside that the Hospital serves.”

— Max Norton

American (and North Country) life in those simple, innocent, peacetime days of the 1930s was very different compared to today's more hectic lifestyles and complex technology. There were no computers, cell phones, microwave ovens, or TVs. Women were primarily housewives and homemakers, not members of the workforce. People were free to contribute time to organizations outside the home, and the Auxiliary was a prime choice for wives of Dartmouth employees, Mary Hitchcock doctors, and Hanover business leaders.



Max Norton

QUARTER CENTURY VOLUNTEER HONOREE FOR
1933-1957

1939 1940

World War II begins

New York World's Fair opens

DDT developed

"Gone With The Wind" premieres

Churchill elected prime minister

Draft enacted in U.S.

First McDonald's stand opens

Rh factor in blood discovered

The War Years:

CHALLENGES AND RESPONSES



Auxiliary volunteers roll bandages.

When the United States entered World War II following the attack on Pearl Harbor, the Hospital was faced with mounting costs, food and other types of rationing, staff shortages, and the departure of doctors and nurses for military service. A total of 34 employees entered the military service between 1941 and 1945. With the expansions of the physical plant in the late 1930s, the number of beds had more than doubled to 151. The flight of personnel into the armed services and into industries meeting

military needs meant longer hours and more stress for those who remained. Volunteers once again came forth to perform a variety of chores which included mopping floors, washing dishes, and carrying meal trays. Dartmouth professors and administrators formed the “Men’s Cleanup Committee” which came in on evenings and weekends to help maintain the understaffed facility. Together, staff and volunteers along with enlightened management kept the institution viable.

1941

Germany invades Russia

Pearl Harbor attacked

Plutonium is isolated

“Citizen Kane” opens

First HMO (Kaiser) in California

Boston’s Coconut Grove fire kills 491

U.S. unemployment at 4.7%

Dartmouth loses NCAA basketball title game

First nuclear chain reaction

1942

Another highlight of these wartime years was the introduction of the Red Cross Volunteer Nurses' Aide Program in 1942. Volunteers, following a rigorous training program, helped fill the gap created by the departure of ten nurses for military duty.

The Aides were cited for their invaluable contributions when both a measles (1942) and an influenza (1943) epidemic struck the College and Town of Hanover. Both the legendary Edith Amsden and current volunteer, Joy Cavaney, began their associations with the Hospital and the Auxiliary as Nurses' Aides.

When the influenza epidemic severely overtaxed the facilities, Dartmouth College provided two dormitory buildings, South Massachusetts and Gile, to serve as temporary infirmaries. The same year, the Cadet Nurse Program was launched by the federal government as a means of attracting more women to careers in nursing. The program brought an improved supply of nursing talent but also intensified bureaucratic regulation. The federal rules mandated that the twelve-hour nursing shift give way to an eight-hour shift. This change required more individuals to adequately staff the Hospital.

A year later, in 1944, the continuing shortage of nurses and support staff deepened and a call went

out to the Auxiliary for assistance. More volunteers, including junior aides, responded. They made beds, carried trays, rolled bandages, mended laundry (no new linen during wartime), transported patients, and answered phones.

An important addition to the staff during World War II came from a small group of Mennonites, conscientious objectors from Pennsylvania. Several Mennonite families settled in the Hanover-Norwich area following the war.

While World War II created managerial stress, it also fired up the economy, benefiting the Hospital's finances. The reduced unemployment had the effect of reducing the need for charity services, and people were in a better position to pay down debt incurred by hospitalizations.

One of the wartime innovations that took root in the Hospital was the formation of the Blood Plasma Bank. This enabled the storage of plasma for both the civilian population and the armed services. Again, the North Country community rose to the challenge and people from the entire region came as blood donors. They viewed it as a patriotic duty as well as a resource that they themselves might some day need.

Concurrently, the specialty of anesthesiology was in its developmental infancy. Mary Hitchcock was at the forefront of this new advance in the practice of surgery with the formation of a Department of Anesthesia and the establishment of the School of Anesthesia Technology. These had a positive effect on the prestige of MHMH among its peer institutions all over the country.

Another innovation of the time was the New Hampshire Hospitalization Service, later called "Blue Cross," an insurance program to address an individual's financial risk of being hospitalized. Mary Hitchcock was among the first hospitals to enter into an agreement with this system which eased the financial burden of medical care for both the individual and the Hospital. Fewer debt accounts were needed and administrative requirements for managing accounts receivable were eased.

1943

Pentagon building completed

Mussolini deposed and arrested

Withholding tax introduced in U.S.

Pap test to detect cervical cancer

Blood and plasma bank opens at MHMH

Normandy landings June 6

Roosevelt beats Dewey

Battle of the Bulge begins

DNA isolated

1944

More Help Needed

FROM THE AUXILIARY

As the Auxiliary expanded its role during the war years to provide volunteer services wherever needed, it continued its vital role of raising funds through an annual appeal.

A new "Hospital Drive" was introduced in October 1942. It went on a full week, with a grand climax coming on the annual Donation Day. This new fundraising campaign, which replaced the North Country Fair and the Webster Hall extravaganzas, was headed by Dartmouth Professor and Auxiliary member Allen Foley. Professor Foley's solicitation letters were models of directness: "Let's not quibble and evade: let's give!"

The following year, 1943, as the Hospital celebrated its 50th anniversary and the Auxiliary its 10th, the Auxiliary merged its annual drive with an expanded fundraising effort, the "Hanover War Chest," a local unit of the National War Fund. This was an umbrella organization that included the United Service Organizations (USO) and many relief agencies such as the French Relief Fund and

the Russian War Relief Fund. The total goal for Hanover was \$13,000 which included \$5,000 for the Hospital. The Chair of the campaign was Professor Robert K. Carr who, in his two-page appeal letter, defended the seemingly unattainable goal as "small enough, in the light of both the worth of the causes involved, and of Hanover's proven generosity." The drive was successful and was a forerunner of today's United Way.

These wartime efforts by the Auxiliary were guided by an outstanding president, Ann Stevens, the wife of a Dartmouth professor, who served from 1941 until 1947, an unmatched tenure of leadership.

As the Auxiliary marked its 10th anniversary, Hospital Superintendent Donald Smith reported to Max Norton on the organization's contributions over its first decade. The sum of all cash gifts, produce, equipment, and benefit receipts was \$65,872, impressive considering the dampening effects of the Great Depression during most of those years. As of December 31, 1943, all but

\$630, used for ongoing Auxiliary expenses, had been dispersed to the Hospital.



Auxiliary President, Ann Stevens

1945

World War II ends

United Nations established

Truman becomes U.S. president

DJIA reaches a high of 195

Folic acid discovered

First influenza vaccine

The Philippines gains independence

Churchill's "Iron Curtain" speech

First automatic electronic digital computer

MHMH has 557 births (41% increase)

1946



OCTOBER 12-20 1943
HANOVER WAR CHEST

MARY HITCHCOCK MEMORIAL HOSPITAL AUXILIARY

October 9

Dear Friend:

Within the next few days you are going to be asked to make the largest contribution you have ever given to a Hanover charity drive. Accordingly, we hope you will read this letter and the accompanying literature in a friendly and attentive mood while we lay our cards on the table and present our case to you. Here is the story, told as briefly as possible.

The Hanover War Chest, local unit of the National War Fund, and the Mary Hitchcock Memorial Hospital Auxiliary have joined forces to raise a sum of \$13,000 during the period from October 12 to October 20. Of this total, \$8,000 will be used to meet Hanover's share of the \$125,000,000 National War Fund campaign goal, and \$5,000 will go to the hospital as our annual gift to that essential community institution.

Solicitation Letter and Postcard

1944
8/16/1946

...because of uncertain labor conditions the Mary Hitchcock Hospital occasionally finds it necessary to seek some of the volunteer assistance which was so generously offered during the war. A list of men and women in the community who could be called upon in case of emergency is being prepared. Please fill out and return the attached card if you are willing to serve your hospital in such an emergency.

★ **FIFTIETH ANNIVERSARY OF FOUNDING OF THE MARY HITCHCOCK MEMORIAL HOSPITAL 1893-1943**

The Mary Hitchcock Memorial Hospital has served this community and the surrounding region for fifty years. In that time it has cared for more than seventy thousand patients, and has grown to be the largest general hospital in the state. We owe our grateful support to an institution whose doors have never been locked, whose lights have never been out, and whose trained staff has been constantly on the alert to alleviate suffering and to give courage to the afflicted.

The War Ends



When World War II ended in August 1945, the Auxiliary entered its thirteenth year of service, looking forward to a return to the peacetime environment at Mary Hitchcock. But the end of the war did not necessarily bring relief from the problems that the Hospital and the Auxiliary had endured from 1941 to 1945. As the Hospital coped with increasing demands for services brought on by the rise of Blue Cross and a larger geographical base, Auxiliary members turned their attention to expanding their dual roles of volunteer services and fundraising.

Just a few years after the war ended, the Hospital's administration underwent a changing of the guard with the death of Superintendent Donald Smith. After a temporary leadership period, William L. Wilson, a Dartmouth alumnus (Class of 1934), took the helm in 1948. As an undergraduate he had a period of mentoring under James Hamilton and, inspired by that experience, had gone to the University of Chicago to join the very first class of their new School of Hospital Administration. The new superintendent had his work cut out for him.

1947

Marshall Plan for Europe proposed

Dead Sea Scrolls discovered

Jackie Robinson joins the Brooklyn Dodgers

The microwave oven is invented

Gandhi assassinated in India

Berlin Airlift begins

1948

Citation wins Kentucky Derby

World Health Organization established

NATO established

U.S. recognizes Israel

Musical "South Pacific" opens

Apartheid in South Africa

1949

The postwar era ushered in the expansion of facilities supported by funds from several sources: major gifts from the Faulkner and Raven families, donations from over four thousand individuals, long-term loans from a Vermont insurance company, and a sizeable grant from the federal government, a wholly new source. The needs of the Hitchcock Clinic and a long-standing desire for convalescent facilities were addressed in this wave of expansion. A new main building, Faulkner House, was erected on what had been the sweeping front lawn of Mary Hitchcock; the Winifred Raven House, across the street, was designed as a convalescent facility; and the School of Nursing underwent a major expansion to meet the need for more nursing personnel due to the increase in the number of beds. Between 1933 and 1955, the annual number of inpatient surgical procedures had doubled.

Prior to 1955, the critically ill were interspersed among all other patients. Recognizing the need for more focus and specialization of care techniques for the critically ill, and inspired by the Mayo Clinic's creation of a "Post-Anesthesia Room," Dr. William Mosenthal led a team of colleagues in developing an Intensive Care Unit, one of the first in the country. More expansion occurred in that decade with the establishment of a Department

of Physical Medicine, a Radioisotope Lab, and a Poison Information Center.

With so much expansion in the 1950s, the Hospital's budget tripled to exceed \$3,000,000 and the cost of basic care for a single inpatient doubled to \$30 per day. Hospital admissions were approaching an annual figure of 9,000 while the staff grew to more than 800 people. MHM had become a big business by North Country standards.

The Auxiliary was both a witness and a participant in this fast-paced, postwar expansion. Auxiliary membership had increased to over 3,000, most of whom were donors of produce and cash on Donation Day. The actual working volunteers numbered about 250. Volunteers helped to educate residents in outlying towns who were becoming increasingly dependent upon both the Clinic and the Hospital.

The Auxiliary reached out in new directions. When a Department of Social Services was established under the leadership of Frances M. Lyng, the Hospital's first social worker, the Auxiliary supported the new department with a gift of \$100. In collaboration with the Hanover Garden Club, flowers and plants were given to patients. And, the Auxiliary's Special Services Committee initiated a program that coordi-

nated patient visits and occupational therapy, contributing to patients' general comfort and peace of mind. For young patients, the Auxiliary used a gift from the Women's Club of Hanover to show films in the Pediatrics Ward.

When the Faulkner House addition to the Hospital opened in April 1952, the Auxiliary played a key role in facilitating moving day. At the end of the day, the Auxiliary sponsored a dedication dance and, for the next three days, members conducted guided tours of the Hospital's latest addition.



Information Desk, Faulkner House

1950.....1951.....1952

- | | | | | | | | | | | | |
|-------------------|-------------------------------------|----------------------|------------------------------------|-------------------------------|-------------------------|-----------------------------|------------------------------------|------------------------------|--------------------------------------|--------------------------------------|-----------------------------------|
| Korean War begins | Ralph Bunche wins Nobel Peace Prize | "McCarthyism" begins | First successful kidney transplant | Rosenbergs sentenced to death | U.S. unemployment: 5.3% | Color television introduced | First oral contraceptive developed | Salk polio vaccine developed | First plastic artificial heart valve | Elizabeth II becomes Britain's queen | First cardiac pacemaker developed |
|-------------------|-------------------------------------|----------------------|------------------------------------|-------------------------------|-------------------------|-----------------------------|------------------------------------|------------------------------|--------------------------------------|--------------------------------------|-----------------------------------|



Mary Hitchcock Memorial Hospital, circa 1958

PART II

A New Era of Expansion Begins

1958-1983

In the mid-1950s, Donation Day was reaching the end of its productive life. What had begun forty years earlier as a direct, neighbor-to-neighbor method of supporting a young and struggling enterprise, was being overtaken by changing habits in household kitchens and gardens. Joy Cavaney recalls being a member of a special commission formed in 1955 to study Donation Day. As she recalls its conclusions:

“The Commission determined that the wonderful tradition of Donation Day that began back in 1913 was no longer relevant due to shifting postwar Hospital needs and changing lifestyles. Because of the demands for increased cash support, it was decided that the Auxiliary should terminate Donation Day and concentrate its efforts on the annual fund drive and patient services.”

— Joy Cavaney

With the demise of Donation Day, the Auxiliary launched its own Hanover-Norwich Drive, primar-



Joy Cavaney

ily a mail appeal. The new approach was successful and enabled the Auxiliary to fund several extras: a crèche for the hospital lobby; cards and flowers for both patients and the annual Service Club dinner; new red jackets for volunteers; and \$1,200 to redecorate the Hospital Cafeteria.

Throughout the 1960s, Mary Hitchcock had a rapidly growing and evolving Auxiliary and Volunteer Services Program.

In 1960, the Hospital purchased a Cobalt 60 Unit, a landmark acquisition that would ultimately lead to the founding of the Norris Cotton Cancer Center. Also a Cardiopulmonary Laboratory opened as the first open-heart facility north of Boston. Sixteen of the disbanded x-ray volunteers underwent the required training to assist with local Red Cross blood drawings.

A Surgical Dressing Group of some sixty volunteers was formed to assist the Central Supply Department

and, in 1961, the Information Desk Program was begun. Twenty assigned volunteers, backed up by 25 substitutes, staffed the Information Desk five days a week from 11 a.m. until 4 p.m. A Pediatric Visiting Program was also started which was staffed by teenage volunteers who, weather permitting, escorted young patients on stretchers and in wheelchairs to an outdoor play area.

A longtime December tradition continued with the Student Nurse Glee Club and local church groups strolling the halls singing carols. They were joined by a volunteer Santa Claus, usually a member of the Administration, who brought gifts for all patients regardless of age.

Between 1962 and 1964, Candy Stripers and area Girl Scouts started to volunteer at the Hospital. Under the auspices of the Auxiliary's Personal Services Committee, Dot Coutermarsh, RN, who is still an active volunteer, provided their training.

When the Hospital faced an acute nursing shortage in 1964, B Ward was reopened for ambulatory patients using several adult volunteers and one registered nurse. Once again, the Auxiliary showed its ability and willingness to assist and support the Hospital in a crisis.

1953.....1954.....1955.....1956

Korean Armistice signed

Edmund Hillary conquers Mt. Everest

First successful open-heart surgery

Brown v. Board of Education decision

Boeing's 707 transport jet plane tested

"Rock 'n' Roll" era

Montgomery bus boycott

Salk vaccine developed for polio

Albert Einstein dies

Soviets crush Hungarian uprising

U.S. tests first aerial hydrogen bomb

Elvis Presley emerges as King of Rock 'n' Roll



Mary Burke and Betty Jordan

Fundraising:

FINDING A NEW SOURCE

For several years, the Auxiliary had concentrated its fundraising activity on various theatrical and social events, even a diving demonstration. However, the planning and execution of these performances had become burdensome. It was getting difficult to locate affordable venues, and some events were not doing well financially.

1957 1958 1959 1960

Sputnik I
launched
by Russia

National
Cancer
Institute
established

"West Side
Story" opens
on Broadway

de Gaulle
becomes
French
president

First
trans-Atlantic
jet service

Krushchev
becomes
Soviet
premier

Cuba's
Castro
assumes
power

St. Lawrence
Seaway
opens

Alaska and
Hawaii
become U.S.
states

U.S. U-2
spy plane
shot down
over Russia

John
Kennedy
elected
president

The film
"Psycho"
a huge
success

At this point, the idea of a convenience shop was raised, leading Adrienne Gude, a new volunteer who had recently moved here from New Jersey, to propose that the Auxiliary open a full-fledged gift shop. Adrienne had brought with her twenty years of experience with a gift shop at the Overlook Hospital in Summit, New Jersey — a shop that brought in about \$160,000 a year. That became the long-term goal of Hitchcock’s new Pink Smock Gift Shop, staffed by volunteers. Although it occupied miniscule space, the Shop had already reported income of almost \$1,900 by November. The Auxiliary was soon able to repay \$2,500 of the \$4,500 loan provided by the Hospital for operating capital. Additional space was added to the shop in 1980, and in a few years the Pink Smock Gift Shop would become the primary fundraising arm of



Adrienne Gude, Founder of the Pink Smock

the Auxiliary and eventually exceed that seemingly impossible goal.

To more fully align the Auxiliary’s operating practices with the Hospital’s, the Auxiliary made changes to its bylaws so that their respective fiscal years would be the same. The Auxiliary’s governing structure remained fairly constant through the years, with five elected officers and an Executive Committee of thirteen, most of whom chaired the various standing committees. It is interesting to note that in the Auxiliary’s early years, officers and the Executive Committee routinely included not only the Hospital’s Superintendent and the Chairman of the Corporation, but also representatives of the clinical staff and Board of Trustees, a practice that continued well into the 1970s.

1961 1962

"Bay of Pigs" Invasion	Berlin Wall constructed	U.S explodes hydrogen bomb	USSR puts first man in orbit around Earth	Cuban missile crisis	Actress Marilyn Monroe dies	John Glenn orbits Earth	Eleanor Roosevelt dies	First oral polio vaccine
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Realizing Hiram Hitchcock's Dream



Edith Amsden

For the Hospital, the decade of the 1960s was marked by another upward tick of the expansion cycle as the laws of supply and demand continued their inexorable influence. A new “long-range” building plan went into effect, resulting in the addition of four floors to Faulkner House, along with a new wing. Notably, the wise planning when Faulkner was first built included a sub-structure strong enough to allow for these additional floors.

1963 1964 1965

15,000 U.S. military advisors in S. Vietnam

First human artificial heart implanted

President Kennedy assassinated

The sedative Valium is developed

China detonates its first atomic bomb

Cigarette smoking linked to lung cancer

Warren Report issued: Oswald acted alone

The Beatles appear on U.S. TV

Malcom X shot to death in Harlem

Watts riots in Los Angeles

Winston Churchill dies

U.S. first-class stamp: 5 cents

The new space was primarily for more inpatient beds and service areas to support them, but it also included a large expansion of the Emergency Department and the modernization of the clinical laboratories.

Soon after the completion of the building plan, matching fund money from the federal government enabled the construction of the Mental Health Center, a facility that provided for inpatient psychiatric treatment. The expansion of the physical plant led to a new post-doctoral program with twenty-five residents in training to become psychiatrists. This program became the primary source of educating new psychiatrists in all of Northern New England. The Mental Health Center was considered key to the establishment of a regional network of mental health care. This new development was coordinated with the New Hampshire State Hospital with which Mary Hitchcock had enjoyed a long history of cooperation and mutual support.

The 1960s also ushered in the federal government's Medicare program designed to provide a medical safety net for the elderly. This entitlement, strictly regulated by bureaus in Washington, significantly altered the way hospital business was to be conducted. This meant that the United States Treasury would be paying most of the bills for those covered

by the program. And, in 1966, the New Hampshire General Assembly appropriated funds from the Department of Health and Welfare to permit reimbursement to New Hampshire hospitals for care provided to public assistance recipients.

This led to rapid expansion of treatment facilities in those disciplines needed most by the elderly. Heart disease treatment and cancer management and cure became the focal points of new hospital expansion. Radiation therapy was emerging as the latest approach to cancer treatment. Philanthropic funding enabled MHHM to acquire a state-of-the-art Siemens Betatron Therapy unit, the first in Northern New England. The cutting edge was being carefully honed.

In the meantime, the School of Nursing underwent important upgrading which included the cessation of the practice of relying on student nurses for menial nursing-related activities and the conversion of the school to a coed institution. The concept of education superseded the need for cheap labor and the School of Nursing prospered. This shift in institutional attitude led to increasing the graduate nurse staff to make up the difference.

A mighty and all-important change in medical education at Dartmouth began in 1968 when Dart-

mouth's Board of Trustees decided to reinstate the MD program. Dartmouth Medical School, the fourth oldest medical school in the country, had graduated trained physicians for well over a hundred years when, in 1914, the American Medical Association's Council on Medical Education decreed that Dartmouth's final two years should be discontinued because of inadequate clinical facilities in Hanover. The determining report noted that the Medical School had access to only twenty-four beds which did not allow sufficient clinical training to adequately prepare physicians and recommended Dartmouth offer a two-year program of preclinical instruction. The School had no choice but to comply, and the class of 1914 was the last to receive the MD degree. All subsequent graduates transferred after two years of basic science training to other medical schools for their MD degrees.

Much had changed at both the Medical School and Mary Hitchcock Hospital by 1968 when the Dartmouth Trustees made their momentous decision. Under the direction of S. Marsh Tenney, a graduate of both Dartmouth College and the Medical School, a virtual "refounding" of the Medical School had been accomplished and, over the years, Mary Hitchcock had become a premier base for clinical instruction. The time had come to reinstate the MD

1966 ••••• 1967 ••••• 1968

- | | | | | | | | | | | | |
|-----------------|---------------------------------|---------------------------|---------------------|------------------------------|---------------------------------------|------------------------------------|------------------------------|------------------------------|--------------------------------|--------------------------------|---------------------------------|
| Medicare begins | Billie Jean King wins Wimbledon | "In Cold Blood" published | DNA code deciphered | China explodes hydrogen bomb | Thurgood Marshall joins Supreme Court | Three astronauts die on launch pad | First human heart transplant | Tet Offensive in Vietnam War | Martin Luther King, Jr., slain | Robert F. Kennedy fatally shot | Alaskan oil reserves discovered |
|-----------------|---------------------------------|---------------------------|---------------------|------------------------------|---------------------------------------|------------------------------------|------------------------------|------------------------------|--------------------------------|--------------------------------|---------------------------------|

program, a move that was largely accomplished between 1972 and 1976. The MD program brought a strengthened research capability and the influx of new, talented faculty made it possible to establish more postdoctoral programs. All would benefit the Hospital and Clinic, and prove to be critical to the formation of the Dartmouth-Hitchcock Medical Center now on the horizon.

The upward spiral of growth, development, and prestige had continued unabated for Mary Hitchcock Memorial Hospital through eight decades. The fledgling Auxiliary kept pace, meeting each new challenge with its own vision of service, as attested to by the many new activities that were introduced during the 1970s.

- An Auxiliary Beauty Shop opened in 1973 with a licensed beautician.
- The current Arts Program has its roots in 1974 when Jack Stebbins, President of the MHMH Board, spoke at an Auxiliary meeting about the need for paintings and sculpture around the Hospital to brighten bleak areas and to alleviate stress for patients and visitors during long waiting periods. With characteristic alacrity, several members of the Auxiliary Board visited Keene Hospital which displayed rotating exhibits from local artists and art collec-

tions from townspeople. Two Hanover High School students, Holly Black and Cindy Suprenaut, painted murals in the new Intensive Care Nursery and adjoining waiting rooms under the supervision of Ray School art teacher, Willy Black. A few years later, the Art Committee took over preparations for the employee art show held each April.



Edith Amsden, Adrienne Gude, John Amsden
 QUARTER CENTURY VOLUNTEER HONOREES FOR
 1958-1983

- With the intention of providing a “comforting presence,” the Auxiliary set up a beverage service near the Intensive Care Unit for patients’ relatives. Another comforting presence was provided by Dartmouth students, Teen Aides (the renamed Candy Strippers) and, in the summer, junior volunteers who kept young patients from becoming bored or anxious with a full slate of activities. This service allowed the staff pediatric therapist time to work one-on-one with a child facing surgery or on restrictive precautions.
- The Auxiliary became the leader in providing Baby Love car seats to obstetrical patients and other concerned parents.

In the annals of outstanding volunteers, John and Edith Amsden have a very special place. After many years of teaching, Professor John Amsden retired from the Chemistry Department at Dartmouth and became a full-time volunteer at MHMH. In a somewhat unique volunteer role, he set up shop as a consultant on Medicare matters for patients, even making house calls when necessary. When Professor Amsden died in 1976, a certificate was hung in the Hospital lobby commemorating his founding of the “Amsden Project,” the first-in-the-nation Beneficiary Medicare Program. This program helped patients understand

1969 1970 1971

Richard Nixon becomes president	Astronauts walk on the moon	NY Jets win Super Bowl	DDT banned in residential areas	Kent State University students killed	Breakup of The Beatles	The film “Patton” released	Bar codes introduced in England	Supreme Court approves busing	Voting age lowered to 18	First-class stamp: 8 cents	Mariner IX orbits Mars
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Medicare regulations and billing and was later adopted by the federal agency in charge of Medicare for hospital use nationwide.

Edith Amsden, in whose name the Auxiliary annually awards an outstanding volunteer of the year award, was utterly devoted to the Hospital. She began her volunteer career during World War II and, by the late 1970s, had accumulated thousands of hours of service in almost every activity that used volunteers while mentoring scores of new volunteers. At her 80th birthday party given by the Auxiliary, she was celebrated as “The Lady of Many Hats” and “The First Lady of Hitchcock.”

In an example of stepping in where needed, Escort Volunteers worked five days a week, directing and transporting patients to their medical appointments. This provided a vital service so that Hospital workers could give care without interruption.

One of the most enduring and popular Auxiliary programs was initiated early in 1980, when TV Bingo was broadcast to patients’ rooms through the Hospital’s interactive TV system. Based on a similar program at St. Vincent’s Hospital in Bridgeport, Connecticut, bingo offered a diversion for inpatients. The Auxiliary donated prizes for winners. Ed Willard served as



Nan Kirk Carroll and “Bingo Bob” Kirk

bingo emcee until 1982 when he was succeeded by Bob Kirk, whose affability and long service earned him the nickname of “Bingo Bob.”

Raggedy Ann and Raggedy Andy inspired another popular diversion that delighted patients, young and old. Auxiliary volunteers were recruited, screened and given twenty-five hours of training. If they met all requirements, they were outfitted with an authen-

Raggedy Ann and Andy Volunteers



tic Raggedy Ann or Andy costume and assigned to specific areas of the Hospital. The hope was that the joyfulness of these characters would give aid to patients in need of comfort and conversation.

Although the Auxiliary volunteers are most visible as patient escorts, at the Information Desk, or as cashiers in the Pink Smock Gift Shop, there are many who work behind the scenes. Some can be found in the Mammography Department, while others visit patients in their rooms as part of the Patient Representative Program. These volunteers are trained by the Office of Care Management to visit patients and ask for feedback on their hospital care.

Before he retired, Bill Wilson, president of MHMH, paid tribute to the Auxiliary’s work:

“One of the few constants in the life of the Hospital is the dedicated service of the volunteers. They represent an indispensable part of the service offered to patients and visitors to the institution.”

— Bill Wilson

1972 1973 1974

Nixon visits China

Munich Olympic Games massacre

Watergate Scandal begins

CAT scanning developed in England

Vietnam War ends with ceasefire

VP Spiro Agnew resigns

Roe v. Wade decision

Skylab space station launched

Nixon resigns

Charles Lindbergh dies

India tests atomic device

First vaccine for chickenpox

The March to Excellence

MEETS A BUMP IN THE ROAD

As the nation settled into economic malaise in the early 1970s, the newly expanded Dartmouth Medical School faced financial stress severe enough to threaten its very existence. This predicament was bad news for the Hospital because of the strong interplay of professional staff talent and mutually supportive programs in just about every specialty. With a great deal at stake and many details still to be worked out, the Medical School, Mary Hitchcock Memorial Hospital, The Hitchcock Clinic, and the VA Hospital made the momentous decision to reorganize as one functioning academic medical center.

Dartmouth-Hitchcock Medical Center (DHMC) was organized as a confederation of the four autonomous entities each of which would continue its separate financial structure and governance. On July 1, 1973, DHMC officially came into being. Five years later, the office of Medical Director of the Medical Center was established. The function of this new office was to form a link between the component entities at the clinical level, a liaison needed to encourage a smooth working relationship.



Foster Blough, cuddling.

1975

Watergate trials end

TV's "Saturday Night Live" begins

VCR developed in Japan

U.S. life expectancy: 72.6 years

U.S. celebrates Bicentennial

Jimmy Carter elected president

1976

Legionnaires disease strikes

Viking I lands on Mars

Elvis Presley dies at age 42

First woman Episcopal priest ordained

MHMH Nursing School closes

1977

First vaccine for pneumonia

With the establishment of the Medical Center, the Auxiliary changed its name from The Mary Hitchcock Auxiliary to The Dartmouth-Hitchcock Medical Center Auxiliary and looked forward to broadening its mission.

Specialized intensive care was born out of this new confederation with the establishment of the Intensive Cardiac Medical Unit and the Intensive Care Nursery (ICN). The premature and very sick newborns in the ICN represented another opportunity for volunteers. As the parents often lived at a distance and the babies needed to be held each day, volunteers were recruited and trained as “cuddlers.” These positions soon became favorites with a waiting list of eager volunteers.

U. S. Senator Norris Cotton, who represented New Hampshire in Washington, sponsored a congressional appropriation for the construction of what would become a model regional facility for the treatment of cancer at DHMC. Several million dollars, part of which came from the National Cancer Institute, was spent to provide the most up-to-date cancer treatment in the country.

Late in the decade, the faculty of the School of Nursing reached the decision to phase out the

school. The motivation for this was a 1973 review by the National League of Nursing that determined that there were a number of deficiencies, findings that were supported by the state’s Board of Nursing Education. Lacking an educational base institution, the Class of 1980 was the school’s final graduating class. While the Medical School survived its crisis, the Nursing School did not. The School had been in operation since 1893.

Another changing of the guard occurred in 1978 when Bill Wilson retired after thirty years of service, and Jim Varnum became President. The first seven CEOs had the title of “Superintendent.” Bill Wilson’s title was “Executive Director;” Varnum’s was “President.” Wilson had presided over an amazingly upbeat period of growth and prestige-building and was going to be a tough act to follow; Varnum brought with him a significant interest in regionalization. It was clear that Mary Hitchcock’s era of growth and improvement was not over.

Stimulated by changes in Medicare reimbursement policy, the Hospital cultivated an idea that was avant-garde for the time. Same-day surgery, as we know it today, was successfully pioneered. As a result, costs and risks were reduced for many surgical procedures. Technological advances contributed to

the feasibility of out-patient treatment in lieu of full hospitalization.

The early 1980s brought new treatment programs such as renal dialysis and coronary angioplasty. The Hanover Visiting Nurse Service came under the direct operation of Mary Hitchcock, filling a need stimulated by the earlier release of inpatients to their homes. While cost-cutting was perhaps the proximate cause of needing more home visitation, a positive side effect was a more comfortable and secure recuperation for most patients.

Mary Hitchcock became a member of “Voluntary Hospitals of America,” an alliance of hospitals all across the country. Without giving up any autonomy, the Hospital gained advantages in purchasing, access to capital, and opportunities to share services. This turned out to be a valuable tool in managing costs and enhancing care options.

1978.....1979.....1980.....1981

Pope Paul VI dies	Sony’s “Walkman” introduced	Balloon angioplasty developed	Margaret Thatcher elected in Britain	Soviet invasion of Afghanistan	Three Mile Island accident	8-year Iran-Iraq War begins	Ronald Reagan elected president	John Lennon killed	Egypt’s Anwar El Sadat assassinated	AIDS is first identified	IBM introduces first personal computer
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Dartmouth-Hitchcock Medical Center

PART III

Relocation and Renewal

1984-2008

It had become apparent in the early 1980s that the physical plant of the Medical Center was again inadequate for the needs of all its components, especially for the Hospital and the Clinic. Throughout its ninety years, Hiram Hitchcock's building had grown like Topsy with so many add-ons, conversions, and renovations that the original Mary Hitchcock was barely detectable. The plain fact was that the institution had once again run out of space.

The original plan drawn up by the Medical Center was to expand onto Dewey Field, north of the Medical School, but when the Town of Hanover, worried about congestion and parking, rejected the plan, the idea of relocating all or some of its operations elsewhere was considered. Dartmouth College, with its own long-range plan to expand the campus northward in mind, then offered DHMC a large portion of its Gile Tract on Route 120 between Hanover and Lebanon. The thirteen-acre building site surrounded by some two hundred acres of woodlands would enable all components to relocate together and provide the rare opportunity to design, from the ground up, a medical center appropriate for the present and adaptable for the future.

The Lebanon option was agreed upon and planning began in 1985. Construction started in 1988 and the Lebanon campus of Dartmouth-Hitchcock Medi-

cal Center was completed in 1991. Intentions were for the Hospital and the Clinic to move into the new facility as soon as it was ready, and for the Medical School to move in phases. The third and fourth year students would receive their clinical training at the new Center and students in years one and two, the basic science years, would remain on the Hanover campus until a later date.

The planning and design for the new DHMC was remarkable from the start. The architects, Shepley, Bullfinch, Richardson and Abbot, of Boston, took full advantage of the spread and terrain of the site. They chose a horizontal rather than vertical design with multiple levels of entry and egress; skylights to bring in natural light; and corridors between eight and twelve feet wide to provide a feeling of openness and spaciousness not usually found in hospitals or clinics. Importantly, the design lent itself to future alterations and additions to meet the demands of progressive medical care.

The design for the interior focused on patients' care, comfort and needs. Doctors, nurses, support staff, patients, and volunteers were invited to submit suggestions. As a result the final plan included such things as separate elevators for transporting inpatients for x-rays or lab work, carpeted hallways to reduce noise, single or double patient rooms with large windows, wide pe-

destrian malls, and commercial establishments and restaurants for the convenience of outpatients, visitors, and especially staff who would no longer have access to the amenities available in downtown Hanover.

Joan Weider, one of the volunteers who gave tours of the new facility, described some of the distinguishing features: the rotunda at the entrance, open to the skylight above and wheel-shaped to give sight-access in all directions; the nurses' stations in all departments similarly designed to give staff lines of sight; and, paint colors coordinated throughout to provide smooth transitions between service areas.

The thirty foot wide North Mall resembled a small town's Main Street, illuminated by the skylight and street lights, furnished with groupings of chairs and benches along the sides, and leading to a veritable shopping center with a bank, restaurants, flower shop, dry cleaner, convenience store, bookstore, and a greatly expanded Pink Smock Gift Shop. At 1,680 square feet, the new Shop was nearly five times its former size and in a prime location at the entrance to the commercial center, where the passing parade of patients, visitors and staff could see the expanded range of merchandise through large display windows. More volunteers were recruited to serve as buyers and cashiers, and the Shop began its rise to a new level of support for the Auxiliary.

1982 1983

Princess
Grace Kelly
dies in
accident

Falklands
War

MRI
machines
introduced
in Britain

First-class
stamp:
20 cents

U.S.
invades
Grenada

First
woman
astronaut,
Sally Ride

Compact
discs
introduced

Tennessee
Williams
dies



Stained Glass Window, DHMC Chapel, by Sabra Field

The Big Move

The big day chosen for moving into the new Medical Center was October 5th, 1991, a day that few involved in the move are likely to forget. The smooth, efficient transfer of all patients, equipment, supplies, etc., from the Hanover site to the new Hospital in Lebanon was an accomplishment of great proportions. The fact that the two locations were only about a mile apart made little difference to the complexities of the planning. For instance, many ambulances were converted into mobile ICU rooms to ensure that the most critically ill patients could be safely moved.

1984

Pres. Ronald Reagan re-elected

Bell telephone system broken up

Apple introduces the Macintosh computer

Indira Gandhi assassinated

Gorbachev named Soviet leader

Actor Rock Hudson dies of AIDS

First-class stamp: 22 cents

"Amadeus" wins the Oscar

1985

Charlie Welch, Director, Administrative Services, played a major role in the planning and coordination of the move. He recalls:

“The move was orchestrated right down to the smallest detail. They had to have two of everything, such as two operating rooms, two emergency departments, etc., so that if anything unexpected occurred, it could be handled efficiently. It was a very emotionally charged event because they had to move everyone and everything over one weekend. There were packers and receivers at each location. The Hospital only had so many trucks so everything was precision-oriented. There were many volunteers as well as staff that made the move a smooth one.”

— Charlie Welch

Move Day had its poignant moments. One involved the new Chapel which had emerged in the planning survey as among the top needs for the new Hospital. As Reverend Roland Nadeau, Catholic chaplain at the time, remembered Move Day – everyone, including the chaplains, had assigned duties. Four chaplains – two at the old campus and two in Lebanon – reported for duty at 4 a.m. to handle any crises that might come up. Just two hours later, Rev. Nadeau, stationed at the Lebanon site, was called to the new Emergency Department to minister to a patient being rushed to surgery for a cerebral aneurysm. He accompanied the patient, her husband and daughter to the operating room, administering the Sacrament of Anointing en route. When the medical team arrived to begin surgery, he invited the family to accompany him for quiet prayer and reflection in the new Chapel, away from the bustle of opening day.

The Chapel, which features a large, stained glass window, was made possible by a gift from the Auxiliary. Patrick McCoy, Director of the Chaplaincy, recorded his appreciation:

“I couldn’t say enough about what that gift has meant to the spiritual care of patients, families and staff. On a daily basis, it serves as a place of refuge for people of all persuasions who find themselves pressed by fears or grief and yearning for a way to connect with a sense of love and peace that is greater than their burdens.”

— Patrick McCoy

The new facility generated a number of opportunities for Auxiliary support. The first arose almost immediately as Auxiliary volunteers planted more than 4,000 tulip and daffodil bulbs to beautify the grounds come spring.



DHMC Auxiliary Volunteers

1986 1987

Pres. Ferdinand Marcos flees the Philippines

Chernobyl nuclear accident

Space shuttle “Challenger” explodes

The “Oprah Winfrey Show” debuts on TV

The Iran-Contra Affair revealed

Miami Dolphins win Super Bowl

Nazi Rudolph Hess dies

Prozac released for use

Soon after the move, the Arts Committee went to work to bring art to the new space. It recognized the unique opportunity to integrate the high-tech, curative aspects of medical care with the expanding concept of healing. A continuing principle of the committee is to select artworks for onsite gallery spaces which consider and reflect the cultural heritage of those who come to the Medical Center.

Dr. Robert McCollum, Dean Emeritus of the Medical School, was a very active committee member. With his help, numerous gifts of art were obtained, including 107 Audubon Bird prints presented by Mary and Laurance Rockefeller of Woodstock, Vermont. Generous support from the estate of Gertrude Mertens, also of Woodstock, greatly enhanced the program's offerings.

The Auxiliary continued to use the Art Cart to take paintings to rooms for inpatients' enjoyment during their stay. Volunteers also collected and distributed books and magazines to patients and waiting rooms via the Book Cart.

The Arts Program also included performance art and, soon after the new DHMC opened, the gift of a Steinway model B grand piano from James Walker and his family, in memory of Christine Walker, proved to be



Frank Logan

the catalyst for expanded programming in the Rotunda. Talented Auxiliary volunteers played semi-classical, nostalgic, and contemporary music for patients, visitors and staff. Some years later, a second grand piano was given to the Medical Center as a memorial to volunteer Dave Hall by his family. The Hall Steinway now offers an additional venue for piano volunteers, bringing music to the 4th level East Mall.

Dave Hall



The Dartmouth Undergraduate Volunteer Program and Junior Volunteers were supervised by Volunteer Services during this time. The undergrad group attracted about ninety students each term, many of them pre-med students getting their first behind-the-scenes glimpse of healthcare activities. The juniors, representing many Upper Valley schools, used this opportunity to explore interests, contribute time, and make good use of their skills.

With its expanded showroom and offerings, the Pink Smock Gift Shop began to acquire a larger customer base, significantly increasing the net receipts turned over to the Auxiliary. With these proceeds, the Auxiliary financed numerous capital requests each year to support Medical Center programs. Two of the gifts made in 1994 provided funds for equipment in the Diagnostic Radiology Department and for books for the Women's Health Resource Center Library.

By now, the Pink Smock Gift Shop had become the Auxiliary's only significant fundraising initiative. Except for a part-time paid coordinator who deposited receipts each day and kept the schedule of volunteers, the Shop was run entirely by volunteers. Open seven days a week, it required forty to fifty volunteers to serve as cashiers and buyers under the general direction of a Pink Smock Committee. Most of the volunteers had no prior expe-

1988 1989

Pan Am 747
explodes
over
Scotland

Bush
beats
Dukakis

Turner
Television
(TNT)
begins

Congress
warned of
global
warming

Tiananmen
Square rally

Berlin
Wall falls

U.S.
invades
Panama

Lucille
Ball
dies

rience in retail, and learned how to succeed in business via on-the-job training. Merchandise was divided into several categories (gifts, stationery, jewelry, toys, candy), each with its own buyer or buyers who went to Boston on buying trips or placed orders with vendors who visited the Shop. Their incentive for increasing profits was strong, fed by the knowledge that net returns were used by the Auxiliary to support patient care throughout the Medical Center. Within a few years, the growing business would need a full-time manager.



Coutermarsh, RN

During the years following the move, Auxiliary volunteers participated in a number of new programs. One was the Infant Hearing Screening Program. Dorothy "Dot" Coutermarsh, RN, was presented the New Hampshire Association of Hospital Auxiliaries Volunteer of the Year Award for her work with the program.

With the establishment of the Children's Hospital at Dartmouth, immediately nicknamed "CHaD," Dartmouth-Hitchcock joined 124 other hospitals in the U.S. and Canada designed to serve the special needs of children. Accredited by the National Association of

Children's Hospitals, CHaD is actually a hospital within a hospital, focused on treating its very special patients as children rather than small adults. CHaD provides opportunities for volunteers beyond the long-established Cuddling Program.

The Elder Life Program was created for geriatric patients, and the Art Care Program was developed in cooperation with the Medical Center's recently established C. Everett Koop Institute. The mission of this student volunteer program was to enhance the healing process and quality of life through creative expression. Musicians, visual artists, poets, storytellers, and artists of all kinds worked with patients to promote the process of healing by lifting patients spirits and encouraging them to express their own creative abilities.



June Russell

Beginning in 1997, the Gold Star Award pin was given to volunteers "for going above and beyond" the usual requirements of their volunteer role. The Volunteer Services Office also received recognition that year with the gift of comfortable furniture for the volunteer services lounge area, provided in memory of volunteer John Adams by his family.



Don Magill, Lifeline Coordinator

Among the long-established Auxiliary services is the Lifeline Program which celebrated its 25th anniversary this year. Many elderly or physically-handicapped people who live alone cherish their independence and want to stay in their homes. DHMC's Lifeline service helps them do that with its personal emergency response system that summons help at the push of a button. Many Auxiliary volunteers assist this program by providing system installations, removals, and adjustments as well as office support. Lifeline volunteers continue to be key components of this valuable community outreach service.

1990

Nelson Mandela is freed

East and West Germany united

"Driving Miss Daisy" wins Oscar

Hubble Space Telescope launched

Moving Day for DHMC (Oct. 5)

First Gulf War ends

First Web browser

Clarence Thomas confirmed

1991

Dartmouth-Hitchcock Medical Center

BUILDING AGAIN



DHMC and DHART Helicopter

The construction of an entirely new Medical Center was not completed with the big move of October 1991. Another building was going up even as the residents were settling into their new home. Part of the original building plan, the Naomi and Robert Borwell Research Building at the southernmost end of the campus was completed in 1992, giving the Medical School its first actual footprint on the new campus. Initial planning called for a medical education building, a full-scale library and, eventually, a second research building. That plan will be partially realized when the C. Everett Koop Medical Science Complex, now on the drawing boards, is completed. In the meantime, however, additional patient-oriented facilities have been added as the ever-changing medical realities have dictated.



DHART Helicopter

The Dartmouth-Hitchcock Air Response Team (DHART Helicopter Service) began on July 1, 1994. It transported patients to the Center’s Emergency Department from towns and remote areas throughout the North Country. This service not only saved the lives of critically sick and injured individuals whose survival depended on immediate and tertiary-level medical care, but also kept small towns from being without their only ambulance while it made the long run to Dartmouth-Hitchcock. When the flight crew gathered to pose for a group photo the day before the DHART service began, they exchanged stories about other air ambulance programs that had to wait for several days to get their first call. DHART received its first call one hour after it was operational!

Major construction in 1995 brought together all of the components of Norris Cotton Cancer Center in the Barbara E. Rubin Building. Doctor’s offices, examining rooms, infusion suites, and some research

programs were now in close proximity to each other, providing a convenience to patients and a tremendous advantage for the professionals who care for them. When the Cancer Center moved into its new home, the Auxiliary added the Center to its roster of service areas and volunteers began staffing the reception desk in Radiation Oncology.

Reporting on Auxiliary services during her 1995-97 tenure, President Rita Fishbeck said:

“ *Our Auxiliary challenge has been to help continue our Medical Center’s high standard of excellent care with special concern for patients, their families, and the staff. We succeeded! We volunteered in fifty-four services, contributing about 100,000 hours and, using Pink Smock Shop profits, made over \$400,000 in gifts to the Medical Center. Our many acts of kindness and helpfulness are legendary and appreciated.* ”

— Rita Fishbeck

In the final years of the twentieth century, two DHMC and Auxiliary milestones stand out:

- In 1997, Dartmouth Medical School observed its 200th anniversary with a birthday celebration that included a three-day Bicentennial Symposium on Science and Ethics, festive social occasions, and a speech by Vice President Al Gore.
- In 1998, the Auxiliary marked the 65th anniversary of its founding and recognized the fifty-year volunteer career of Nan King. Nan began her volunteer service in 1947, delivering flowers. Over the years she did everything from running the movie program for patients (she was skilled at fixing the projector), to keeping patients company as they awaited surgery. She also worked in the Radiation Oncology reception area of the Norris Cotton Cancer Center.



Nan King

1992.....1993

NAFTA agreement signed	Hepatitis B vaccine introduced	CHaD established	Czechoslovakia divided	Bombing of World Trade Center	Havel elected Czech president	Arthur Ashe dies	First-class stamp: 29 cents
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The New Century



Ron Reading

With the Medical Center well established on its new campus and continuing its historic pattern of expansion and growth to meet changing needs, the DHMC Auxiliary also began to prepare for the challenges of a new century.

In 1999, there were changes and additions to the Volunteer Services Office beginning with the retirement of Director Helen Bridge and the appointment of her successor, Andrea Henry. In the next few years, the Office would be moved from Level 3 to larger quarters on Level 2 and the Volunteer Services staff of Linda Laros, Assistant Program Director; Carletta Nevers, Manager of the Pink Smock Gift Shop; and Marcy Sanborn, Volunteer Services Assistant, would expand to include Pam Alflen, Supervisor; staff of the Information Desks; and Elisabeth Gordon, Coordinator of the Arts Program. Also, in response to new trends, the Auxiliary added red golf shirts to the standard volunteer attire of jackets and aprons.

At the Governor's Conference on Volunteerism in Concord, New Hampshire, in 2000, Andrea Henry learned about the changing needs and interests of volunteers. Short-term volunteer commitments had become a trend; hospitals with a dependence on long-term volunteers were cautioned to adapt to the new generation of volunteerism.

In response, the Auxiliary leadership held a retreat to establish goals for the future. As a result, the Board made several changes:

- representation on the Board was expanded to include volunteers from more of the areas served,
- the Friends of the Norris Cotton Cancer Center and Friends of CHaD were invited to join the Auxiliary Board, and
- task forces for recruitment, orientation, and training of new volunteers were established.

The Auxiliary Gifts Program goal is to support programs which enhance patient care. For instance, the awards in 2000 included: emergency funds for Care Management patients; support for Lifeline and the Poison Information Program; special equipment for endoscopy procedures; and a computer work station for ultrasound images for Radiology.

Also, DHART received funding for helmets, a medical equipment washer, and a blood refrigerator. The Transportation Department was awarded funds for wheelchairs and patient-lifting equipment.

Recognizing the importance of nursing education, the Auxiliary regularly provides annual funding for DHMC nursing scholarships. In 2000, the award was \$20,000; in 2002, the commitment was increased

1994

Rwanda
massacre

Russians
attack
Chechnya

Jacqueline
Kennedy
Onassis
dies

Major
League
Baseball
strike

Bosnia
and Croatia
sign peace
treaty

O.J.
Simpson
found
not guilty

Oklahoma
City
bombing

First
sheep
cloned

1995

to \$40,000. Ellen Ceppetelli, Director of Nursing Education, called it “an extremely generous gift” and described the fund as “for employees who are interested in becoming nurses, and for nurses who want to complete their baccalaureate degree, get a master’s degree in nursing, or are studying for a doctoral degree in nursing.” In 2007, to honor Jim Varnum who retired in 2006 after 28 years as MHMH president, the Auxiliary Board voted to name its annual \$40,000 nursing scholarship “The James Varnum Nursing Scholarship.”



MHMH Presidents, William Wilson and James Varnum

At the Auxiliary Board’s retreat that year, the theme was, “DHMC Auxiliary: Fulfilling Our Mission,” with a focus on recruitment, communication, orientation and building bridges with other areas in the Hospital. MHMH President Jim Varnum spoke on the “Values of DHMC in a Changing Healthcare Environment.” One outcome of the retreat was the implementation of the “Volunteer Emeritus Program,” which gives retiring volunteers an appreciative farewell with a letter from the president thanking them for their service to DHMC.

Repercussions of the national disaster of September 11, 2001, extended to DHMC. As a flood of calls came in from community members offering to give blood, volunteers responded by assisting phone banks to field the calls. As a sign of the times, it wasn’t long before DHMC received a bomb threat and enhanced security measures had to be implemented. Volunteers, as well as staff, were required to wear photo ID badges and Code Black was added to the emergency codes to signal a bomb threat. In the spirit of its mission, the Auxiliary made a donation to the 9/11 Disaster Fund.

In 2002, a Patient and Family Centered Care Committee was formed in the Intensive Care Nursery when a group of parents established the ICN Par-

ents Council. These parents signed up with the Auxiliary and soon had representation on the Auxiliary Board. At the request of the Council, the Auxiliary funded the first year of a toll-free 800 phone number for the use of parents calling into the ICN for updates on their infants’ status.

At the annual volunteer breakfast in 2003, volunteers were informed about the new Health Insurance Portability and Accountability Act (HIPAA) which had just become effective. It would bring patient confidentiality to a new level. Stringent new rules were put in place to protect patients’ privacy, which would affect all volunteers who had contact with patients. Volunteer orientation packets soon included education about HIPAA.

1996 1997

“Mad cow”
disease in
Britain

Clinton
and Gore
win

TWA
Flight 800
crashes off
Long Island

Singer
Ella
Fitzgerald
dies

Hong Kong
returns
to Chinese
rule

TV Parental
Guidelines
ratings
introduced

First
“Harry Potter”
book
published

Princess
Diana
dies

The Earth Movers

RETURN



Pam Harkins, Arthur Harkins, and Peter Richardson

As DHMC's patient base continued to expand, and with a significant rise in the area of outpatient services, the need for more ambulatory care facilities was becoming urgent.

The Auxiliary Board was alerted in 2003 by Vice President Sandy Dickau that the Medical Center was planning a new six-story ambulatory care center and parking garage along with extensive expansion of the East Mall and relocation of departments. During construction, volunteers would be needed to assist patients and visitors with the many detours and new pathways and, when construction was finished, to serve at new information desks and to expand escort services.

Volunteer Services determined that at least seventy-five new volunteers would be needed and began a campaign to recruit friends and neighbors of current volunteers. The Auxiliary's Communications Chair, Mimi Weinstein, began work on a recruitment video. Coordinating her efforts with Tom Kidder of Media Services, Mimi brought the video together using footage and interviews with volunteers and staff. Bob Lucier, volunteer pianist, provided the musical score. The video, which showcased and was dedicated to the good works and countless hours of service of volunteers, was previewed at the spring volunteer luncheon.

“Walk down any corridor, visit any floor and you will find them: volunteers at Dartmouth-Hitchcock Medical Center. Everywhere at once. Here to help in any way they can. Their willing hands, their good cheer, their generous hearts – all contributing to the health and care of our patients.”

— DHMC Volunteer Video

The expansion was all that Vice President Dickau had said it would be. In addition to the new Doctors Office Building and parking garage, it included the relocation and enlargement of the Emergency Department (ED), Same Day Surgery, and the Outpatient Pharmacy. The East Mall was designed to include a small café and new entrances. Volunteers were recruited and trained for the new Information Desk at the south end of the East Mall. Escort duty would now include the new Doctors Office Building. New jobs were defined for volunteer service in the Same Day Surgery and Emergency Departments. John Markowitz, Operations Assistant in the ED, later expressed his appreciation for their help:

1998.....1999

War in Kosovo

Peace in Northern Ireland

Viagra introduced

Clinton impeached by House

Y2K bug awaited

Columbine High School massacre

First human hand transplant

Joe DiMaggio dies

“I think the volunteers stand tall with all of us; we look at them as colleagues and fellow workers. When it really gets crazy here in the Emergency Department, which it will, we have to start moving patients around and the volunteers will jump in and do this.”

— John Markowitz



Chuck Egner

Distribution volunteers proved invaluable as the distance traveled to deliver equipment and supplies increased significantly. Chuck Egner’s reflection on his volunteer role in the Stores Distribution Department indicates that volunteers are as pleased to assist as the staff is to have them. Chuck says:

“The job I do is an important function – the delivery of supplies and equipment is vital to the overall function of the hospital. At the end of my volunteer shift I feel my feet are sore. And I’m usually hungry and it feels good to sit down. My pedometer shows 10,000 steps in my three-hour shift!”

— Chuck Egner

With outpatients and their providers now located a considerable distance from the Pink Smock Gift Shop, there was concern that they would not find their way to the Shop and sales would be lost. And, that is what did happen for the first few months. Eventually, the staff, patients and visitors found their way back to Center Court and sales returned to normal for the Pink Smock Shop, the Auxiliary’s primary funding source.

Following presentations from DHMC leadership on funding opportunities for the expansion, the Auxiliary Board agreed that the Auxiliary’s contribution would be \$150,000 for art. An advisory group was formed to work with Elisabeth Gordon, the



Spring Waterway, by Petria Mitchell; purchased through a gift from the DHMC Auxiliary

newly appointed DHMC Arts Coordinator, to select artworks appropriate for the new environment. Several pieces of dramatic original art, suited to the architecture, were later installed throughout the expanded areas.

The unusually large gift awarded by the Board for new art was an exception to the competitive grants procedure and served to emphasize the Auxiliary’s continuing role within the DHMC family. That role continued to find expression in new opportunities to serve and to support.

The Auxiliary Board reviews its mission and purpose frequently and finds it has changed little over the past seventy-five years. However, its composi-

2000.....2001

Airliner
Concorde
crashes
near Paris

Bush
wins
election

Abortion
pill RU-486
approved

First-class
stamp:
34 cents

Bomber
Timothy
McVeigh
executed

9/11
attack

“Gladiator”
wins Oscar

Beatle
George
Harrison
dies

tion and responsibilities have. Early on, Hospital and Trustee leaders routinely served on the Board. Now only the Director of Volunteer Services and the Vice President of Marketing and Public Affairs sit on the Board, ex-officio. Four officers (President, Vice President, Secretary, and Treasurer) are elected; the Assistant Treasurer, chairs of volunteer service areas, and several at-large members are appointed. The Board's primary roles are to encourage and coordinate volunteer activities and to raise funds to be awarded to DHMC programs and departments.

In 2004, the Auxiliary Gifts Committee increased its maximum gift amount to \$40,000 and gave the Emergency Department the significant gift of a sonosite ultrasound machine which enhanced the capacity of the trauma program. Other gifts that year included hover mats to assist the safe moving of patients, funding for an interpreting service for Care Management, and fifty new wheelchairs for Transportation, all made possible by proceeds from the Pink Smock Gift Shop.

According to Kilborn Church, then President of the Auxiliary, Pink Smock Gift Shop proceeds had reached a plateau, news that he shared with the DHMC leadership. Auxiliary Board Treasurer Foster Blough's report followed, indicating sales had

stalled at the same figure for a third year. A seed had been planted to consider a Pink Smock Gift Shop expansion that would inevitably increase future proceeds to fund Auxiliary gifts.



Barbara Blough, Elizabeth Ely, Annette Grayston, Pat Sellers, and Ann Hargraves in expanded Pink Smock Gift Shop.

When the Dartmouth Bookstore vacated a large adjacent area, the opportunity to expand was at hand. The Pink Smock Committee, joined by the Auxiliary and Volunteer Services, sent the Administration a business plan supporting their request for a portion of the available space for an expansion of the Shop. Their proposal was accepted. Over the next few years, architectural plans were drawn up, and the remodeling, although lengthy,

was accomplished with minimum interruption of business. On April 20, 2007, the Pink Smock Gift Shop celebrated its Grand Reopening with a ribbon-cutting, a musical performance, and a few speeches. One of the highlights of the day was the dedication of a special space in memory of Shirley Lord, a long-time gift buyer.

The Auxiliary continues to add new programs as needed. The program called Befriend was established in 2004 in collaboration with the Comprehensive Breast Program. Befriend



Naomi Hartov

volunteers offer peer support, by telephone, to people diagnosed with breast cancer. In the first recruitment effort, forty breast cancer survivors joined as volunteers.

Sometimes programs are discontinued. One was the Infant Hearing Screening Program, initially created in collaboration with the telephone pioneers and supported by the Auxiliary since 1981. In compliance with changes in state guidelines, nursing staff assumed the screening role; volunteers who had been screening infants in the Intensive Care Nursery were no longer needed.

2002

2003

UN arms inspectors return to Iraq

Enron bankruptcy

Department of Homeland Security created

New England wins Super Bowl

Iraq war begins

Saddam Hussein captured

Space shuttle "Columbia" explodes

Bob Hope dies

Other programs undergo change. As the DHMC Internal Blood Donor Program grew, Red Cross Blood drives declined. The last collaborative drive held at DHMC was in 2005. Since then, volunteer energies have shifted to the new program, which keeps all donated blood on site for DHMC patients.

A very distinct honor was paid to Andrea Henry, Director of Volunteer Services, in May of 2004, when she received the New Hampshire Governor’s Award for Outstanding Volunteer Management. Paul Gardent, Executive Vice President, extended DHMC’s congratulations, adding context to the tribute:

“Our volunteers truly embody the philosophy of patient-centered care that is at the heart of our mission. Patients remark on the warm attention they receive from the volunteer staff. This is a direct reflection of Andrea’s leadership, and the caring and respectful environment she has created in the volunteer office.”

— Paul Gardent

Two volunteers, Joan Hartwell and Linda Tober, took on the task of compiling a new Volunteer Handbook which was distributed at the 2005 Fall Luncheon. Copies were subsequently mailed to the remaining Auxiliary membership and continue to be included in all volunteer orientation folders.

The Auxiliary Gifts Committee of 2005 funded a major gift of electrophysiological equipment to the Ophthalmology Section. Before this equipment was acquired, patients had to travel to Boston for testing. Now, DHMC can diagnose and treat vision disorders such as retinitis pigmentosa. Ophthalmologist Dr. Christopher Chapman thanked the Board personally, and said the machine benefits both patients and researchers and enables doctors to measure patterns from the retina to the brain.

At the suggestion of Pet Therapy Volunteer Mimi Weinstein, a committee of staff and pet visitor volunteers was convened to review volunteer pet visitation which had been in place since 1996. After careful review, the service was reorganized to become a certified pet therapy program. All volunteers involved are now required to be accepted and certified by Therapy Dog International.



Mimi Weinstein and “Tickles”

“Everyone is always happy to see a dog ... when I have my dog at the end of a leash, their whole disposition changes and it really does make a big difference ... anytime you can make a connection – dog to person, person to person – it’s really very important.”

— Mimi Weinstein

In 2006, in a realignment of leadership roles by management, David Evancich, Vice President of Marketing and Public Affairs, was introduced to the Auxiliary Board as the administrative liaison and Vice President overseeing Volunteer Services. He replaced Sandra Dickau, who provided guidance, support, and advocacy for the Auxiliary volunteers through the years of steady growth of volunteer programs.

2004 2005

Red Sox win World Series

Terrorist attacks in Spain

Tsunami kills over 250,000

Bush defeats Kerry

Google goes public

Pope John Paul II dies

New Iraqi constitution ratified

Hurricane Katrina wreaks havoc

“Million Dollar Baby” wins Oscar

The same year, Friends of ChaD board members voted to join DHMC's volunteer program. Their service to CHaD in fundraising and other support had long been recognized. Joining the Auxiliary reflected both their interest in the larger organization of volunteers as well as collaboration with the Auxiliary Board. Bill Martin was welcomed to the Board as CHaD's representative.

Subsequently, another self-organized group of volunteers of long standing, the Friends of the Norris Cotton Cancer Center, accepted an invitation to join the Auxiliary. Among other successful fundraising activities on behalf of the Cancer Center, the Friends have supported and promoted "The Prouty," a walking-biking community participation event named for DHMC patient Audrey Prouty, who died of ovarian cancer in the early 1980s. Nursing colleagues of Audrey began the rides after her death as a tribute to her. "The Prouty" has become an annual event, which last year raised over \$2 million for cancer research and patient needs.

With the establishment of the Palliative Care Department at DHMC, a major volunteer opportunity arose that brought many new volunteers to the Auxiliary. The department's newly hired Volunteer Services Manager, Wendy Sichel, conducted training

programs and the "No One Alone" volunteer program was born. The Palliative Care staff felt a more calming jacket color was necessary, instead of red, for the volunteers working with terminally ill patients and their families. Eventually, all agreed upon green jackets for the Palliative Care Volunteers.



Cecilia Hoyt, Palliative Care Volunteer

The Reiki program, developed by the Cancer Center, has also recently accepted volunteers for training and certification as Reiki practitioners. Volunteers must have level two certification in this program to work with cancer patients. Donah Drewett, a Reiki volunteer, says patients have told her they notice a big reduction in pain and anxiety after a session.

Late in 2006, the Board held another retreat. In preparation, all volunteers were surveyed to assess

their sense of inclusion in the departments where they serve and their level of satisfaction with their roles. Many who responded reported that they felt included and rewarded for their volunteer work but did not understand the connection to the Auxiliary organization. The Board decided it needed to do a better job of communicating to all volunteers that, essentially, the Auxiliary is the umbrella under which they all work and that the Board is the Auxiliary's management team.

To work on the problems identified at the retreat, Board President Don Watson set up committees to study and report on Recruitment, Communication & Outreach, Gift Program Guidelines, and Board Bylaws and Guidelines. Final reports of these committees led to clarification of current practices and a complete revision of both the bylaws and guidelines. The Office of Volunteer Services also prepared a statement clarifying the role of that office in supporting the Auxiliary.

Patient and Family Centered Care Committees were established in many areas of the Hospital with volunteers used as conduits to carry the voice of the patient to the decision-making committees with the goal of improving the quality of Patient and Family centered care.

2006

Iraq war continues

Saddam Hussein executed

Pluto downgraded to a dwarf planet

Gerald Ford dies

In another effort to make information resources more available to patients and families, a new Health Education Center was opened in 2007. The center was a collaboration of several Medical Center groups: Shared Decision Making, the Matthews-Fuller Health Sciences Library, the Center for Continuing Education, and Volunteer Services. Volunteers assist patients with their computerized health questionnaires and access medical websites for them.

With the internet as the current information source of choice, a new Volunteer Services/Auxiliary website went live in 2008, providing community access to volunteer opportunities at DHMC and enabling prospective volunteers to apply online for the first time. The website address is: <http://www.dhmc.org/goto/volunteer>.

One of those volunteer opportunities is the Pink Smock Gift Shop which is beginning to show the expected increase in sales following its recent expansion and renovation. December 2007 sales exceeded \$100,000, a monthly record and, as sales continue to rise, the Shop is on track to achieve the higher annual profits predicted in the 2003 business plan. As the Shop prospers in the years ahead, all net profits will be used to increase the annual grants (renamed from “gifts” to reflect the competitive process of the awards) made to departments and programs.

The 2006 retirement of Jim Varnum initiated a major change in the top leadership of DHMC. Following a year of study, the Trustees named Nancy Formella, RN, and Thomas Colacchio, MD, co-presidents of DHMC. In a short time, the board of trustees created and endorsed a new mission statement for the institution:



DHMC co-presidents, Thomas Colacchio and Nancy Formella

It is clear to the Auxiliary that volunteers are both ambassadors to the community and part of the empowering culture of DHMC. Their focus and commitment is on patient and family centered care as stated in the Auxiliary’s mission: “. . .to supplement the services of the Medical Center (and) to assist patients, families, visitors and staff in an empathetic and supportive manner . . .”

“We advance health through research, education, clinical practice and community partnerships, providing each person the best care in the right place, at the right time, every time.”

— DHMC mission statement

2007 2008

Red Sox win World Series

Democrats control U.S. Congress

Bhutto assassinated in Pakistan

Airbus A380 introduced

Norman Mailer dies

World stock markets dip

U.S. stimulus package approved

Presidential primaries held

First-class stamp: 42 cents



Looking Ahead

In observing the 75th anniversary of the DHMC Auxiliary, we celebrate its history, a history that is inextricably entwined with Mary Hitchcock Memorial Hospital and the Dartmouth-Hitchcock Medical Center in a partnership that enriches us all.



Foster and Barbara Blough
QUARTER CENTURY VOLUNTEER HONOREES FOR
1984-2008

The indispensability of the Auxiliary has only increased over seventy-five years of service. From helping the Hospital survive its early years in an underpopulated rural area, to growing and adapting with ever changing medical imperatives that turned the Hospital into New Hampshire's only academic medical center, now we take our place as a partner in the transformation of health care in our region.

Transforming health care for our region — and beyond — is the goal of DHMC's newest expansion plans. Ground will soon be broken for the

C. Everett Koop Medical Science Complex which will bring together the education and research components of DHMC, to provide a dynamic biomedical environment that fosters rapid exchange of information. It will support research scientists, clinicians, medical students, and others engaged in

groundbreaking collaborative research dedicated to accelerating medical advances and bringing new hope to patients.

Bringing new hope to patients has been at the heart of the continuing transformation of Hiram Hitchcock's little hospital into an academic medical center that is truly at the forefront of the progress of medicine today. The Auxiliary has been privileged to be a partner in that transformation and looks forward to continuing its role in bringing new hope to patients in the years ahead.

“ I figure in this world, you're never going to change the whole thing.

But if you leave it a little better than you found it, you've done your job.”

— Foster Blough

The 75th Anniversary Book Committee

Barbara T. Blough
Joan Hartwell
Andrea C. Henry (ex officio)
Frank A. Logan (chair)
Charles L. Russell
Linda Tober
Donald Watson

Readers interested in more detailed historical information about the Mary Hitchcock Memorial Hospital Auxiliary during its early years may consult *Fulfilling Our Purpose*, an excellent 50-year history of the organization published in 1983 and written by Isabel J. Sears. Similarly, more detailed historical information regarding the Mary Hitchcock Memorial Hospital from its very beginning through 1991 may be found in *Mary Hitchcock Memorial Hospital 1893-1991* written by Megan McAndrew Cooper and published in 1991. Earlier histories of the Hospital, written by Leon B. Richardson and John P. Amsden, together with archival material from DHMC publications, have been extremely helpful to the Book Committee.

Acknowledgments

It has been said that authors of books of history must stand on the shoulders of numerous others in order to tell their story. This was certainly the case when we set out almost eight months ago to write this history of the Dartmouth-Hitchcock Medical Center Auxiliary. The 50-year history of the organization written by Isabel Sears in 1983 was indispensable in our work, as were the three separate histories of Mary Hitchcock Memorial Hospital authored by Leon B. Richardson, John P. Amsden, and Megan McAndrew Cooper. We salute them all.

Another early source of information and support was Sarah I. Hartwell, staff member at the Rauner Special Collections Library at Dartmouth College. Her organizational skills (and patience) were exceedingly helpful as we searched the files for historical documents, minutes, photographs, and correspondence. We stood on her shoulders as well.

As the text began to take shape, we were in need of some expert editing assistance from outside the committee. Matthew C. Wiencke graciously agreed to smooth out our very rough edges in this regard, within a very limited period of time, and we are therefore indebted to him for his contribution.

When we arrived at the final draft of the book, there was a continuing need for an objective eye outside the committee, and therefore we prevailed upon Rosemary Lunardini to assist us. Her expert editing skills were generously shared with us, and we thank her most warmly for her volunteer time, as well as for her genuine interest in the project.

Of course, the assistance of staff members in the DHMC Department of Public Affairs and Marketing was absolutely vital to our efforts. In particular, we would like to thank graphic designers Erin Higgins and David Jenne, manager Nora Lusterio, and photographic production assistant Sue Jenks, for all of their hard work on our behalf. Together, they kept this project moving to a successful end. Photographers Mark Washburn and Tom McNeill helped to meet the need for new photographs in a timely fashion, and as a result the book has been greatly enhanced by their talent.

A big debt of gratitude is owed to the many Auxiliary members who assisted us throughout this process with interviews, information gathering, suggestions, ideas, as well as encouragement. There are too many to mention by name, but together they constituted a body of historical knowledge that has enriched our narrative significantly. We thank them all for this.

Finally, the committee wishes to acknowledge the essential role of the Auxiliary's Board of Directors. It was the Board that authorized this publication and provided the necessary funding to help celebrate the 75th anniversary of the organization. We trust that we have met its expectations.

— The 75th Anniversary Book Committee

THE DARTMOUTH-HITCHCOCK MEDICAL
CENTER AUXILIARY VOLUNTEERS

Areas of Services — 2008

Activities Therapy – Work with Activities staff to provide diversion for psychiatric inpatients on 2 West.

Artist in Residence Volunteer – Provides art programs or paint murals intensively for 3-12 months through the DHMC Arts program.

Auxiliary Board – Auxiliary President, Vice President, Secretary and Treasurer plus 20 representatives from volunteer service areas meet monthly to plan and report on volunteer programs. Recruitment, Retention and Communication issues, Auxiliary budget and funding requests are reported at every meeting. Guest speakers share on pertinent topics.

Befriend – Cancer survivors provide phone support to newly diagnosed Breast Cancer Patients. Program is supported through Comprehensive Breast Program.

Bingo – Every Tuesday afternoon 2 p.m. - 3 p.m., live bingo is televised over in-house TV for inpatients. Two volunteers provide this program each week. Several collector volunteers put together 250 bingo packets a week which are delivered on patients' breakfast trays. After the game, prizes are delivered to patients' rooms.

Chaplaincy – Eucharistic ministers deliver communion to patients in the hospital.

CHaD Family Center Volunteer – Support families and their children in the resource center by directing them to resources online, in book form, and within the Medical Center.

CHaD Advisory Board – Parents who represent a diverse patient population for CHaD meet regularly to set policy and discuss ways to improve communication with patient families.

CHaD Childlife – Provide arts and craft activities in inpatient pediatrics through the Childlife program.

Friends of CHaD Volunteer – Support CHaD fundraising events throughout the year, offsite and on.

Collating – Work in the Volunteer Services Office producing education packets and admission folders as well as a multitude of other materials.

College/Grad School Students – Provide supporting services in CHaD, the Same Day program, Psychiatry and the Emergency Department.

DHMC Arts Volunteer – Works with the Arts program updating artist database, hanging rotating art shows, planning events, and providing Art To Go (art in kit form for patients).

DHMC Child Care Center – Assist the Child Care Center teachers in the day care classroom with children of DHMC staff ages 6 months to 6 years.

Distribution – Working with Distribution/Stores Department, delivers materials and supplies to departments throughout the Medical Center.

Emergency Department – Support patients and their families in the Emergency Department through comfort measures, communication, and assistive tasks.

Entertainment/Piano – Competent musicians are scheduled to play the two grand pianos throughout the week for one-hour time frames.

Escort Team – Assist patients in wheelchairs throughout the Medical Center to and from appointments and Same Day surgery. Provide errands to patients and departments, such as delivery of charts, films, personal items.

Flower Cart – Hanover Garden Club members create small arrangements to be delivered to patients weekly.

Florist Delivery – Deliver flower arrangements daily from area florists to patients throughout the Patient Towers.

Health Education Center – Assist the Health Education Center staff by performing a variety of tasks including assisting in health survey completion, loaning of decision aids, library technical tasks.

ICN Parent Council – The council strongly believes in the philosophy of family-centered care and provides a parent's perspective on issues facing the ICN. This is a "member council" of the nursing shared governance structure and they attend quarterly meetings to discuss issues with them.

Information Desk Volunteer – Greet, confirm and provide directions to appointments throughout the Medical Center from North, South, Rotunda or Emergency Department. Direct visitors to patient units after checking census. Good memory, computer and telephone skills required.

Infusion Suite – Provide companionship and assist with lunch for patients receiving intravenous chemotherapy.

Junior Volunteer – High school age (16 years and older)

volunteers can choose from a variety of two-hour office assistance opportunities, including the Pink Smock Shop and the CHaD Childlife volunteer roles.

Knitters – Work from home to create booties, hats, sweaters for infants and chemo hats for child and adult patients.

Lifeline Program – Install personal assistance Lifeline units in patients' homes. A current driver's license and safe driver record are required.

Linen Services – Mark and fold linen in offsite distribution site.

Magazine Delivery – Sort donated magazines in the Volunteer Services Office and deliver to designated waiting areas.

Mammography – Provide reminder calls to mammography patients, fold and stock linens in treatment areas.

Mammography Dexa Scan (Routine Screenings) – Assist patients with gowns and directions to treatment areas.

MRI/CT Scan – Call patients to confirm the next day's appointments. Fold patient robes and stock patient changing rooms. Perform clerical duties such as preparing packets, filing and photocopying.

Friends of NCCC – This board of Cancer Center friends plans and implements fundraising activities for the Cancer Center including the "Prouty."

NCCC Library – Enter new books in database, assist patients and families finding resources related to cancer in the library, reshelve returned books.

NCCC Support Group – Co-facilitate support group, which includes helping to introduce speaker, fielding questions from participants, leading discussions, managing distractions, maintaining comfort level in room for participants. Cancer and support group experience required.

Nursing Unit Assistant – Duties include obtaining newspapers for patients, stocking gloves, mail, collating materials, passing ice water, copying, emptying laundry, working with staff to keep unit orderly.

Office Coverage General – Assist offices in a variety of locations, by answering phones, providing clerical and copying assistance.

Ortho Clinic Volunteer – Assist patients in filling out health survey on hand-held computer/tablet prior to appointment.

Palliative Care – Provide support and a listening ear to patients and their families facing end of life.

Excerpts of the Bylaws

Patient and Family Centered Care Advisory Group – Participate in regularly scheduled meetings to discuss improving care from a community member’s perspective.

Patient Representative Volunteer – Meet with patients and families to provide information and seek resolution to issues and concerns related to their hospitalization or experience in the outpatient clinics.

Patient Visitor – Visit inpatients, serve as ambassadors of Volunteer Services, offering reading materials, companionship, and connection to other services provided at DHMC.

Pet Therapy Volunteer – Mature well-mannered dogs screened by the Humane Society with their human partner provide weekly visits to 1 East and 5 East units.

Physical Therapy Volunteer – Assist physical therapist in preparing patients with total joint replacement to receive physical therapy treatment.

Pink Smock Gift Shop Buyer – Purchase, display, and inventory merchandise in specific categories throughout the shop.

Pink Smock Gift Shop Cashier – Maintain a professional businesslike appearance at the cashier’s desk, and maintain a welcoming and pleasant attitude to customers. Handle cash register, gift certificates, credit cards, and the confusion of a busy shop.

Radiation Oncology – Provide a welcoming environment and greet patients in Radiation, check in, assist to appointment areas.

Radiology Business Office – Assist with radiology requisitions by sorting and filing by date of service.

Reiki – Appropriately trained Reiki volunteers work under the Supervision of Deb Steele and Brianne Pinkson to provide Reiki healing touch services in the Cancer Center.

Rotunda Performance – Group performances in the public areas. Do not need to enroll as volunteer for one time or seasonal events.

Same Day Waiting Room – Assist the desk coordinator in providing a comfortable area for families of patients during surgery and postoperative recovery. Assist in providing appropriate information to families as needed. Be accountable for information. Computer and telephone skills required.

Special Projects – Assist with projects for departments throughout the Medical Center, such as detours, phone coverage, educational packets, mailings, raffle ticket sales.

ARTICLE 1 – NAME

This organization shall be known as Dartmouth-Hitchcock Medical Center Auxiliary.

ARTICLE 2 – PURPOSE AND OBJECTIVES

The MISSION of the Dartmouth-Hitchcock Medical Center Auxiliary Volunteers is to supplement the services of the Medical Center, to assist patients, families, visitors and staff in an empathetic and supportive manner, and to award funds to support DHMC departments and programs from the proceeds of the Pink Smock Gift Shop.

The OBJECTIVES of the Auxiliary are:

- To do all we can to serve the needs of the DHMC community, recognizing that the well-being of the patients is the focus of our work.
- To carry out our responsibilities, as individuals and as an organization, adhering to DHMC guidelines.
- To continually seek out new and better ways to serve the DHMC community.

ARTICLE 3 – ADMINISTRATION and GOVERNANCE

Section 3.1 – For purposes of administration, Mary Hitchcock Memorial Hospital shall be the sponsoring and fiscal agent for the Auxiliary.

Section 3.2 – The Auxiliary Board of Directors shall be the governing board of the Auxiliary, shall have up to 24 members elected by the Auxiliary, and shall have the power to establish such committees as it may deem necessary to carry out the functions and obligations of the Auxiliary.

ARTICLE 4 – MEMBERSHIP

Membership in the DHMC Auxiliary includes all volunteers enrolled with DHMC Volunteer Services.

ARTICLE 5 – OFFICERS

Section 5.1 – The officers of the Auxiliary shall be President, Vice President, Secretary, and Treasurer who are elected, and the Assistant Treasurer, who is appointed by the Auxiliary Board of Directors.

Section 5.2 – The elected officers of the Auxiliary, as named in Section 5.1, shall be elected bi-annually at an Annual Meeting after nominations have been presented by the Chair of the Nominating Committee and nominations from the floor have been considered.

Section 5.3 – The officers of the Auxiliary shall also serve as the officers of the Auxiliary Board.

Section 5.4 – In case of vacancy in any office during the term, the Auxiliary Board shall have the power to appoint a successor to serve until the next annual meeting.



Andrea Henry, Director, Volunteer Services, and Marcy Sanborn, Volunteer Services Assistant

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