Druid Health area scene of TB drive

Huge detection program set March 28 to May 6

One of the most extensive tuberculosis detection programs ever held in Baltimore will be conducted in the Druid Health District by the Baltimore City Health Department with the assistance of the Maryland Tuberculosis Association beginning, Monday, March 28, and continuing through May 6.

Utilizing the Health Departments new mobile chest X-ray truck, assigned to the City last year by the U. S. Public Health Service, X-raying will extend over a period of six weeks during which time the X-ray truck will visit some 20-25 different locations in the Druid Health District.

Daily schedule of the chest X-ray truck will be announced later.

Dr. Maceo Williams, district health officer, Druid Health District, is directing plans for the chest x-ray survey with the assistance of John Bernier, Maryland Tuberculosis Association.

ALTHOUGH THE mobile unit was first used last fall in the Canton Area and has since been used in a number of industrial concerns in the city, the Druid Chest X-ray Survey will be the most extensive TB detection program ever conducted in a given community area of the city.

This is made possible by the use of the Health Department's new mobile X-ray equipment, which can easily be moved around the area to shopping areas, theatre districts, housing projects, and schools, moving frequently to different locations.

In the past, using portable X-ray equipment, this was not possible.

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DR. WILLIAMS defined the Druid Health District and urged all adults in the area to get a chest X-ray when the chest X-ray truck visits their neighborhood.

The Druid Health District is bounded on the north by Druid Hill Park, on the east by Eutaw Place and Park Avenue, on the south by Mulberry Street, Fremont Avenue and Baltimore St., and on the west by Pulaski Street and the Western Maryland Railroad.

The following committee has been at work several weeks establishing the many locations for the xray truck: William Rawlings, supervisor of adult education, Division of Board of Education; chairman; The Rev. Samuel M. Carter; Officer Charles Owens; Warren Weaver; and Mrs. Mayme Tilghman.

Mrs. Tilghman, of the Master Beauticians, is chairman of the registration committee and is being assisted by Mrs. Etta Phipher, of the Women's Auxiliary of the Monumental City Medical Society

Others assisting in the planning for the X-ray survey are: Mr. Weaver, housing projects; Alexander Woodhouse and Officer Owens, Northwest Community Council, distribution of posters; Mr. Rawlings, adult education schools; and the Rev. Mr. Carter, churches.

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JAMES SPRIGGS

Youth mayor to speak at NAACP meet

James Spriggs, recently elected Youth Mayor of Baltimore City, will speak Sunday, March 20, at 3 p.m., at Sharp Street Memorial Methodist Church, corner of Dolphin and Etting Streets at a meeting sponsored by the Youth Council of the NAACP.

Clarence Dixon is president and Mrs. Flossie Dedmond is advisor and will preside at the meeting.

Among those schools participating are Douglass High, Dunbar High, Booker T. Junior High and various others.

Some of those participating in vocal renditions are as follows; Daniel Comegys and James McDonald of Douglass High; Sylvia Montgomery of Booker T. Junior High.

In oratory—Clarence Dixon of Douglass High; Carroll Lamb of Booker T. Junior High and Myrna Tatum of Dunbar High School.

Clifton Ball, vice president of the Youth Council, will give a report on the National Youth Conference recently held in Washington, D. C.

Murder trial delayed

Trial of three brothers indicted on a second degree murder charge in the death of a 29-year-old lumber worker, was delayed until April 5, in District Court, Wednesday.

The brothers, Lecount Togans, 25, of the 900 block of Fifth St., NE, James, 27, and Brock, 21, both of the 600 block of Sixth St., NE, were arrested on Dec. 18, following the fatal stabbing of Edward Butler, of the 600 block of Elliott St., NW. The incident occurred at Fifth and H Sts., NE.

According to testimony of Sgt. Carl A. Rudbeck during an inquest into the slaying, all three of the brothers have denied the crime. However, according to testimony of Mrs. Jacquelyn Demmings, common-law-wife of the dead man, she witnessed the slaying which followed an argument started after one of the brothers noted her leaning on his car.

Survey points out needs of Provident Hospital

By JAMES D. WILLIAMS

Provident Hospital is needed in he Baltimore community.

This was one of the major conclusions reached by a four-member survey committee in a sweeping study of the hospital which brought into sharp focus the present financial difficulties faced by the institution where almost half the patients are wards of the Department of welfare.

In spite of this and a variety of other serious problems which beset the hospital, the survey group recommended the continuation of Provident as a voluntary institution because:

"There is yet no evidence that the existing general hospitals of the city are prepared to take over and carry on the work which Provident is now doing."

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WHILE THE report did not specifically mention the discriminatory practices of some Baltimore hospitals, it did intimate that this practice has been at least partially responsible for the high number of state-aid cases treated at Provident.

As listed in the report, the work performed at Provident not only included the treatment of 14,414 emergency cases and the admission of 4,045 patients in 1953, but also the provision for the training of medical personnel.

In addition to its appraisal of the hospital financial position, the report also contained several critical comments on other areas of hospital operation.

Among these areas were staff personnel, staff organization, training program, patient care, nursing service, housekeeping, laboratory service and relations to other institutions.

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ONE OF THE basic causes for the financial troubles at Provident, according to the report, is to be found in the high (61%) percentage of service patients treated at the hospital.

These patients do not have their own physicians and look to the hospital to supply them with medical care.

Unfortunately, the majority of these service cases are not able to pay much if anything toward the cost of their case, and unless they are eligible for assistance from the Department of Public Welfare the hospital shoulders the cost of their treatment.

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TO MAKE THE financial situation even more difficult, even if the patient is eligible for medical care from the Department of Welfare, the city and state together only pay up to a maximum of $12 a day, while the hospital pays out $17.46 daily to maintain each patient.

To state it bluntly, the more state-aided patients a hospital has the more money a hospital loses, and with 45 per cent of its patients carried on relief roles, Provident is caring for a larger percentage of these patients than any other hospital in the city.

The next highest percentage of these cases is carried by Johns Hopikns Hospital which has 23.7 per cent of its hospital population as medical care patients.

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AS A RESULT of this factor, plus the "free work" performed by the hospital on members of the community, many of whom are in the underprivileged class, Provident provided $165,340 in unpaid services in 1953.

This total was reduced however, through the generosity of the Community Chest which gave the hospital $119,105 in assistance, gifts which totaled $1,513 and endowment fund of $1,474.

These sources left a net operating deficit of $17,823 for the year, and of the substantial help the hospital received from the Community Chest, the report had this to say:

"It is these contributions which have kept Provident going through the last ten years. Without them the institution would have been compelled to close its doors or modify greatly the character of its work."

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IN AN APPARENT effort to answer queries as to why Provident treated such a large percentage of state-aided patients, the report said:

"The problem of providing medical care to the existing colored population of Baltimore is already a formidable one. Not all of the general hospitals participate in it, either in the case of in - patients or outpatients.

"A relatively few hospitals carry the bulk of colored inpatient care, while the colored physicians carry the bulk of the home and office treatment. It is these last who must also after the majority of the clients of the Department of Public Welfare of Baltimore City."

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IN VIEW of the heavy number of stateaided patients the hospital treats, the survey said that the only immediate answer to the problem lies in the curtailment of the number of patients it admits who cannot pay for the cost of their care, including even those patients who are eligible for

"It must also try to raise additional revenue and must reexamine very carefully its present policy of operating on an inclusive rate plan" in which a patient is charged a fix rate for each day in the hospital.

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AS TO LONG range plans, the committee recommended:

1. That the trustees of Provident Hospital try to continue to operate the institution as a private hospital dedicated to the care of colored patients and to the training of colored doctors, colored nurses and other colored personnel, until such time as it can be shown that it is impossible to do so.

2. That the trustees of Provident Hospital request the Community Chest to ask the Maryland State Planning Commission to express, through its committee on Medical Care, an opinion as to the desirability, from the standpoint of the community, of having Provident dedicated to the purpose set forth in the above recommendation.

3. That the trustees adopt a more rigid policy of admission, looking toward to non-admission of bad credit risks save in the case of emergency.

4. That Provident join actively with the other hospitals of the city in any move to obtain from the City or State an increased allowance for reimbursing the private hospitals of the State for service rendered to the clients of the Department of Public Welfare.

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IN OTHER sections of the report, the survey committee commented on the following areas involving the operation of Provident:

PLANT—Specific items needed are an air conditioning apparatus for the operating room suite; the establishment of a recovery room adjacent to the fourth-floor operating room; enlargement of the nursery; establishment of a small clinical laboratory for the use of the resident staff; large quarters for the out-patient department; setting up of suitable library for professional staff; provision of storage facilities for case histories; replacement of converted buildings.

STAFF—There were no interns appointed for 1953-54 and none have been appointed for 1954-55, caused in part by the withdrawal of approval of Provident internships by the American Medical Association, (approval was restored last) November) and the tendency of colored medical graduates to seek posts in Northern white hospitals.

This has meant that Provident has had to appoint a number of residents from the Philippines and Haiti, and "these young men by and large do not appear to graduates from medical schools in this country and their faulty command of English poses a serious handicap in their communicating with patients and other members of the staff.

"These factors make it justifiable to say that at the present time the quality of the resident staff is not what it should be and definitely lower than in the past. Serious attempts must be made to improve that quality if Provident is to live up to its opportunities."

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TRAINING PROGRAM — Attendance at the clinical conferences and clinical pathological conferences by members of the visiting staff have been poor during the past year.

PATIENT CARE — There is great room for improvement in the quality of the patient's histories.

HOUSEKEEPING — Housekeeping in the hospital was poor due again to the lack of a competent person at the head.

LABORATORY SERVICE — Specimens for bacteriological dia- Specimens for bacteriological diagnosis are now being sent to the laboratory of the Baltimore City Health Department and this arrangement is not at all satisfactory.

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RELATIONS TO OTHER INSTITUTIONS — Those members of the staff who were interviewed by the committee were unanimous in their opinion that a closer relationship with the two medical schools in Baltimore was one of Provident's pressing needs.

Members of the survey committee are:

Dr. W. Berkley Butler, head of the medical staff; Howard H. Murphy, chairman of the trustee board; John L. Procope, hosital administrator and Dr. Alan M. Chesney, chairman of the survey committee.

Half of hospitals use discrimination against patients

Of the 29 hospitals and two convalescent homes queried by the recent Community Self Survey Committee, 15 said they accept colored patients, while 15 reported they did not, and one institution did not answer.

This report supplied an answer to the question raised by the Provident Hospital Survey Committee on whether the existing hospitals in the community are ready to take over the functions of Provident.

Of the hospitals admitting colored patients, the Self Survey Committee reported that these institutions showed a general pattern of racial discrimination.

The group also reported that in professional categories, colored persons are ineligible for various positions in from 85 to 94 per cent of the institutions. In at least six of the hospitals having training programs for medical and dental professions, there are limitations on colored applicants.

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CLARENCE DIXON, President Youth Council
MRS. FLOSSIE DEDMOND, Youth Advisor, Presiding
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My J. W. Dant is well done, people say — but not overdone, and it speaks well for itself as America's largest selling Bonded Bourbon.* And it's an amazing value, too. Enjoy Dant!
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Bye now-enjoy J. W. Dant
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FEEDING TIME—Care and feeding for infants who occupy 13 cribs on the fourth-floor maternity ward at Provident Hospital is the job of Practical Nurse Mrs. Margaret Davis. The young occupants here are treated to the soft color tones of blue and pink. For the sake of convenience, only a few steps away are six roomettes for the new mothers, playroom for the children, and incubators for infants. (AFRO photos by Otho Mackay).

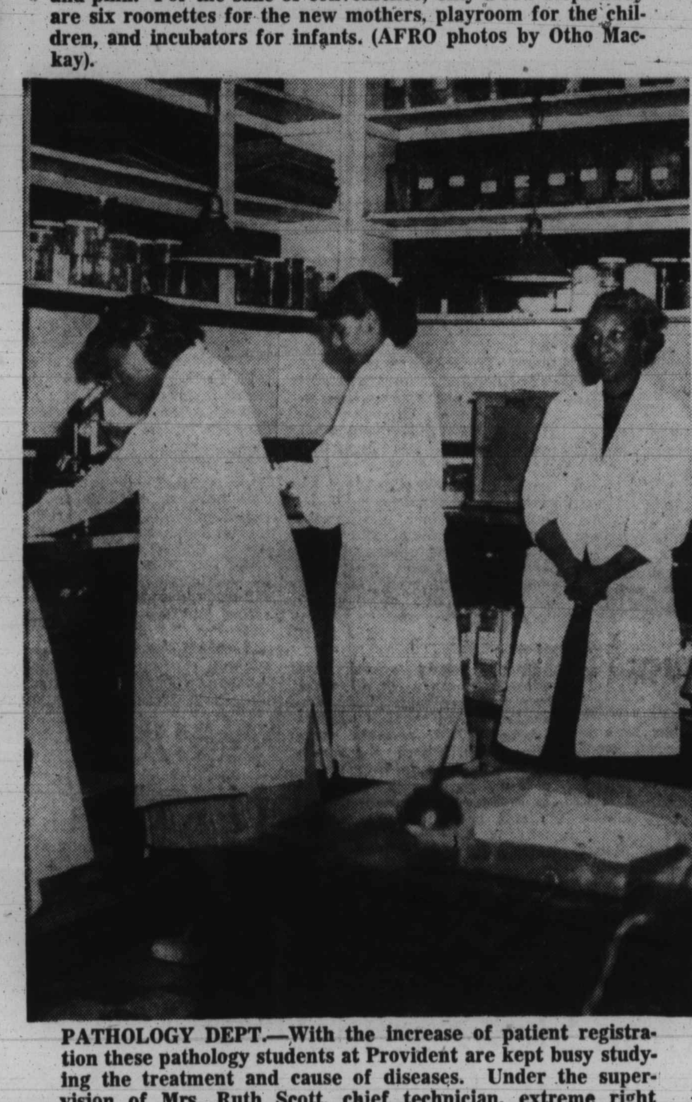
New look at Provident

Campaign contributions which made possible complete renovations are responsible for this new look at Provident Hospital.

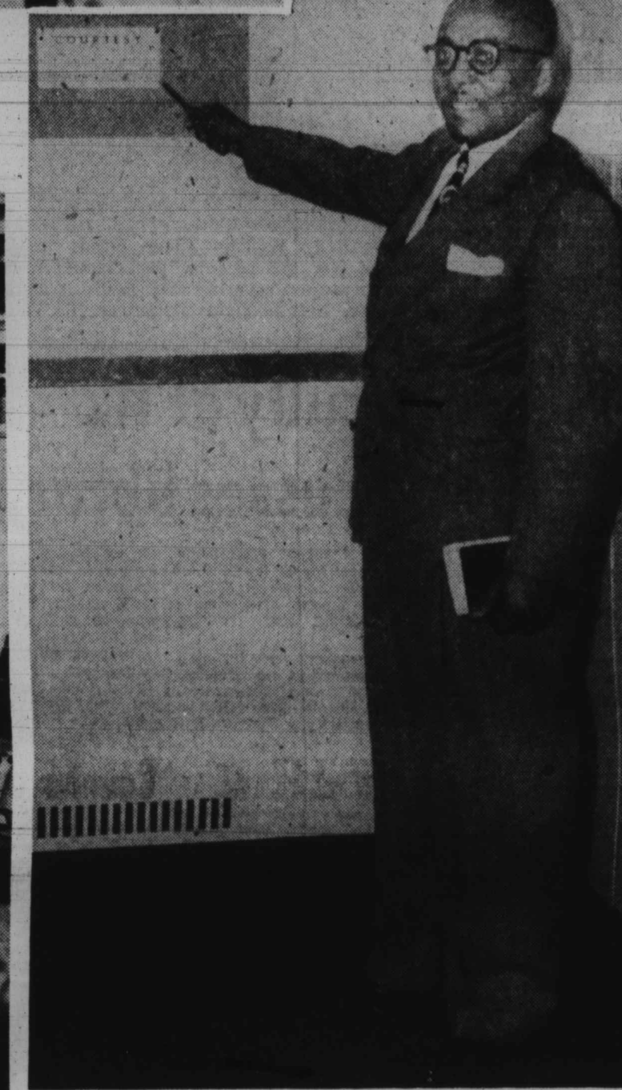
A total of $225,000 was spent to place the institution on a modern operational basis providing more privacy for patients and improved working conditions for the staff.

Added to this is a new $16,000 X-Ray machine which will go into operation next week. Construction work started in the fall of 1952 and was recently completed.

PLEASED PATIENT—Typical of the semi-private rooms available at Provident Hospital is this section where Mrs. Francine Biddle, of the 1000 block N. Bentalou St., is a patient. The above section, located on the third floor, is one part of the hospital that was renovated at a cost of $225,000. The rooms are in muted pastel colors and are equipped with overhead radios, bed lamps, gleaming white cabinets and tile floors. This pleased patient is receiving a visit from her daughter, Mrs. Gwendolyn Biddle.



PATHOLOGY DEPT.—With the increase of patient registration these pathology students at Provident are kept busy studying the treatment and cause of diseases. Under the supervision of Mrs. Ruth Scott, chief technician, extreme right Misses Francis Seay and Shirley Holland go about their assigned duties at the microscope. Not shown is Miss Lille Hany.

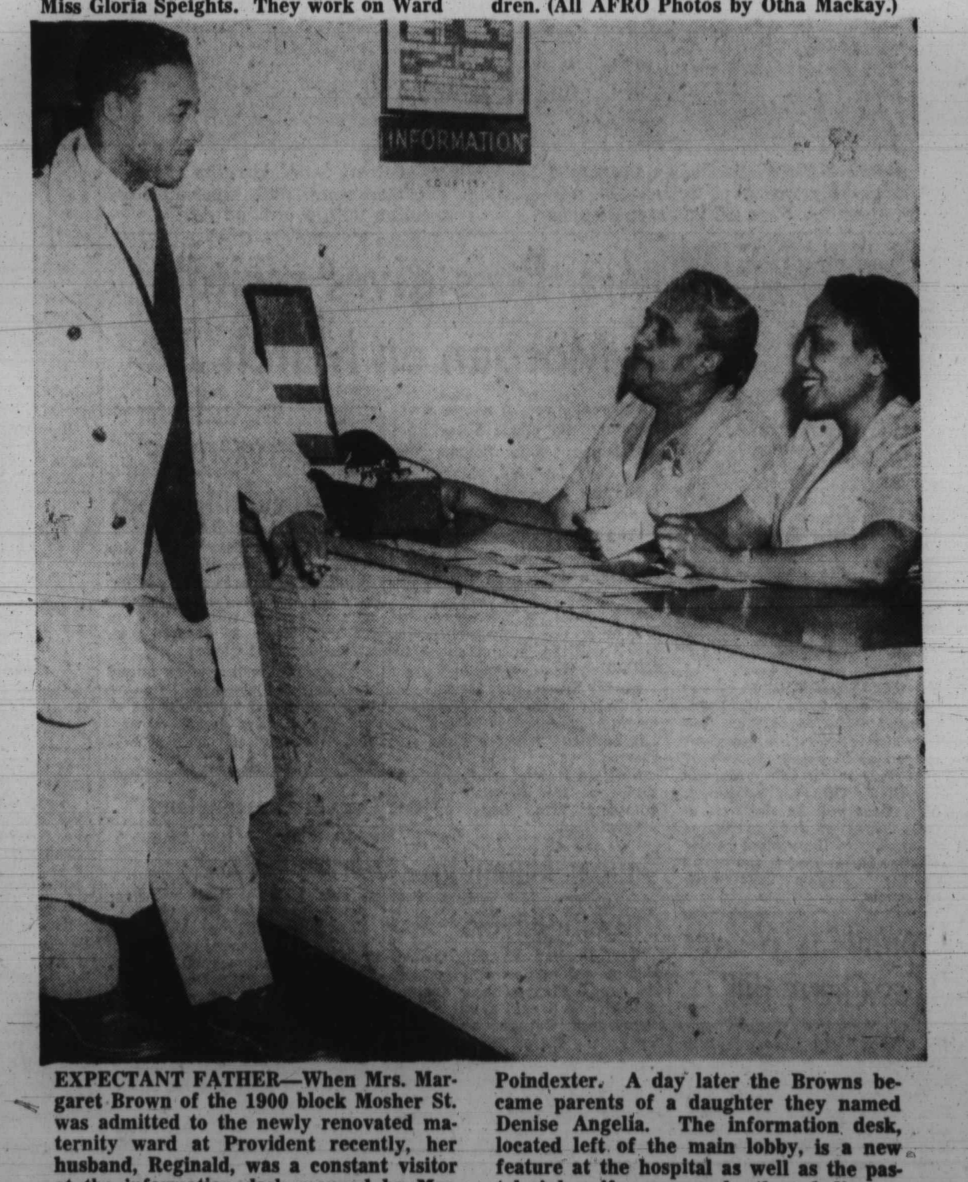


ADMINISTRATOR—Charged with keeping Provident Hospital in running order, Adimnistrator John L. Procope boards the new self-service elevator for an inspection tour. He is pointing to one of the many courtesy cards which have been posted throughout the building asking the staff to be more courteous to patients and visitors. The up-to-date elevator was included in the recent renovation program.

AIDES—An important part in the operation of Provident is the work of nurses' aides like Mrs. Carmartie Odalee, left, and Miss Gloria Speights. They work on Ward 314 under the supervision of Nurse Lattice Sherrill. Behind each door of this hall are modern hospital facilities for six children. (All AFRO Photos by Otha Mackay.)

CENTRAL SUPPLY—In this room at Provident hospital, surgical supplies are placed in the tubes at left for sterilization. Mrs. Alberta Williams, supply aide, works at the sterilizer while Mrs. Lillian Spencer, nurse-in-charge, prepares the equipment. Miss Doris Proctor, nurse's aide, is busy testing rubber surgical gloves. This department was expanded under the renovation program.

HOSPITAL PLAYROOM—Even the little ones have been given consideration in Provident's renovation program. In their expanded quarters these children are about to undertake a reading and picture study task under the direction of Mrs. Mamie Debnam, play therapist, who is assisted by Miss Narvie Washington, senior nurse student. The pediatrics ward at Provident has been made up into three sections of six cubicles each.



EXPECTANT FATHER—When Mrs. Margaret Brown of the 1900 block Mosher St. was admitted to the newly renovated maternity ward at Provident recently, her husband, Reginald, was a constant visitor at the information desk manned by Mrs. Rosina Thompson Cole and Mrs. Bessie Poindexter. A day later the Browns became parents of a daughter they named Denise Angelia. The information desk, located left of the main lobby, is a new feature at the hospital as well as the pastel pink uniforms worn by these ladies.