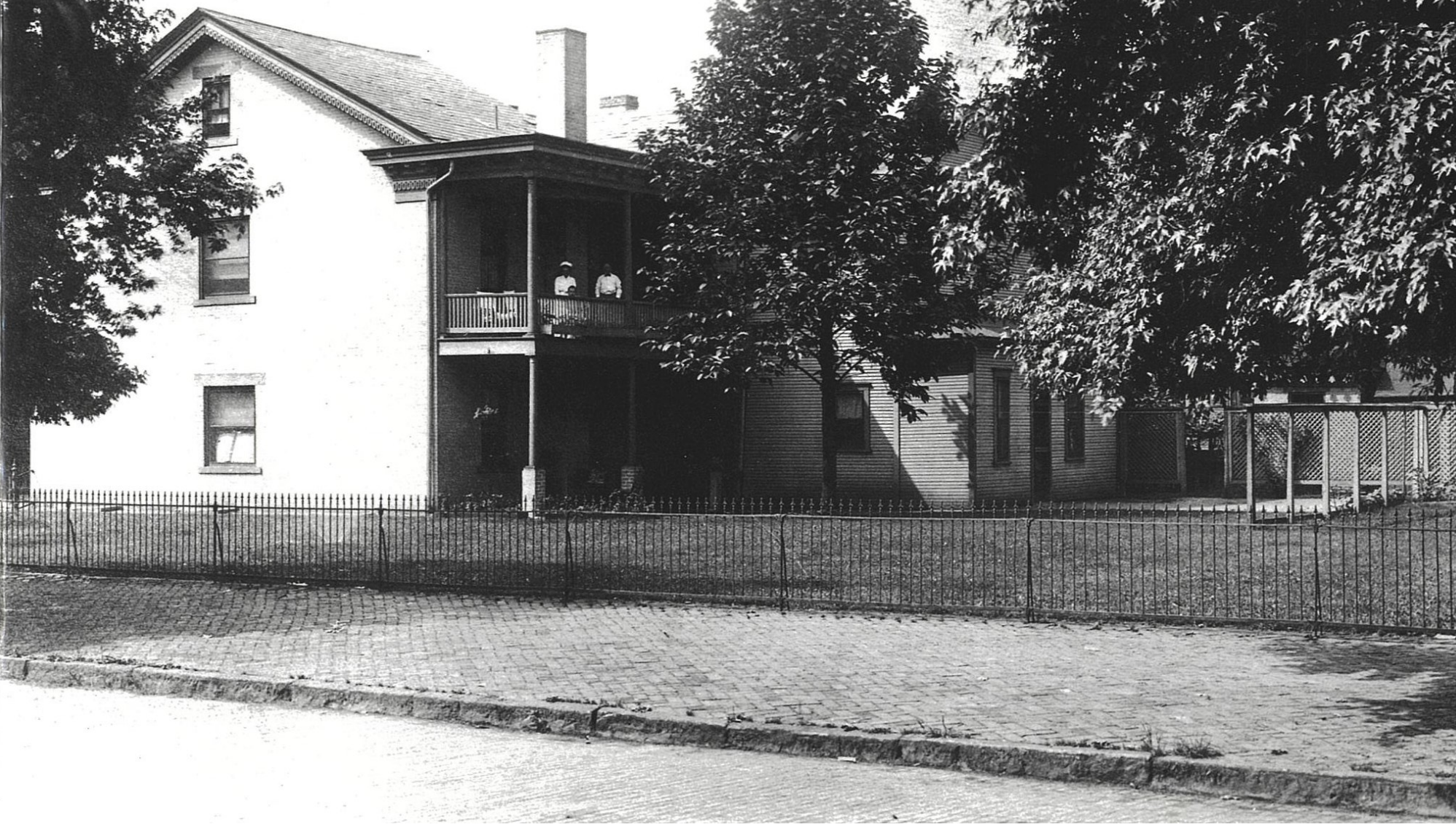


*Armstrong County*  
*Memorial Hospital*  
A CENTURY OF CARING





The office of Worthington native son Dr. Omar C. Clark was located immediately adjacent to his childhood home at Main and Bear Streets. The sign beside the front door reads, "Dr. O.C. Clark." Notice the marked contrast between his parents' spacious frame residence (left), and Clark's tiny medical facility with its lone window. The uneven terrain, lop-sided steps, precarious wooden walkway and rudimentary hitching post bear witness to the state of development common in rural areas in 1906. *From the collection of Lois E. Reed.*

Health Care

# A Hundred Year Legacy

“The beginning was in 1898 when the Buffalo, Rochester and Pittsburgh Railroad was being constructed across the country. ✂ A group of imported laborers, many from the South, lived in bunkhouses near Mosgrove. ✂ They were a hard, tough bunch and fights, stabbings, and cattle stealing in the area were frequent. ✂ Two of the men became ill with what was diagnosed as typhoid fever and, as there were no medical facilities at Mosgrove, efforts were made to secure beds for the patients with farmers of the area. However, no one wanted contact with the then dreaded disease. ✂ Through the efforts of Drs. Charles and Sam Jessop, the men were brought to Kittanning where a makeshift infirmary was provided in a storeroom on South Jefferson Street where the Foster grocery now is. ✂ The name Kittanning Hospital was attached to this hurriedly equipped room. ✂ One Sam Carnahan was engaged to care for the men, thus becoming the first hospital orderly and ‘nurse’ in the history of the town. ✂ The two typhoid patients were, for a time, the only inpatients in the hospital. ✂ But shortly after they were installed in the hospital, a bridge along the railroad collapsed, and six men fell. ✂ One was killed, five seriously injured, and the five were admitted to the fast-growing hospital. ✂ This makeshift hospital functioned until the railroad construction was finished and then Dr. Jessop began to campaign for a permanent hospital.” ✂

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This excerpt from the *Daily Leader-Times* of May 24, 1952, recounts the origin of a unique institution created by visionary individuals motivated to serve their community. Today, as a result of advancements in medical technology, training and physical plant expansion, Armstrong County Memorial Hospital far surpasses what anyone in Dr. Jessop's time could have imagined. Yet the impetus of Dr. Jessop's initial dream and his spirit of community service remains the wellspring of the hospital's development for the past hundred years.

The minutes of the Kittanning General Hospital commence on October 5, 1898, when the first board of directors addressed the community's need for a permanent hospital. They elected W. D. Patton president and Boyd S. Henry secretary-treasurer. Other board members included Ross Reynolds, J. H. McCain and Dr. Jessop.

In the ensuing months, Kittanning General Hospital applied for and was granted a charter for its incorporation as a charitable institution. In the spring of 1899, the board purchased the home of Marie E. Schaeffer at the corner of Mulberry and South McKean Streets for \$4,000. By June the board elected its first staff of physicians. Dr. Charles Jessop was designated chief of staff, and Drs. S. A. S. Jessop, T. M. Allison, A. P. Marshall, H. P. N. Painter, T. V. McKee, H. B. Stone and F. C. Manlis were named associates. Miss Viola C. Lawson was soon hired as superintendent of the hospital and Mrs. Josie Yingling as matron. By late summer, patients were being admitted.

An early history of the hospital describes the medical profession in the late 1800s as "in its early stages . . . Patent medicines, each elixir or salve claiming to cure multiple illnesses, were relied upon in many households. Superstitions and old wives' tales were still believed with strong conviction. For the most part, physicians were either general practitioners or surgeons. In reality, however, many of those general practitioners were, as needed, performing surgical operations. When a family needed a doctor, he was often called to the home. Hospitals were for the dying."

Converting the spacious Schaeffer home into a thirty-seven-bed hospital facility required little construction. The first floor contained one private room, two semi-private rooms, and two wards which could each accommodate sixteen patients. It also housed offices, the kitchen, a staff dining room and a bathroom. A narrow stairway led upstairs to a small operating room and x-ray facility to which orderlies carried patients on stretchers when necessary. In 1901, the average patient stay was thirty

days. Rates were \$10 a week for fever cases and "cases of a similar nature" and \$7.50 a week for other general types of care. Need for the hospital was great—but patients didn't always have the ability to pay. This was of great concern and, in 1901, the board minutes reflect a motion "not to receive any patients into the hospital unless . . . the patient is known to be financially responsible." A month later, however, a committee was appointed to oversee the treatment of and payment for charity patients.

FACING PAGE: Charles James Jessop, M.D., organizer and founder of the Kittanning General Hospital, a physician and surgeon of recognized eminence, was born on December 2, 1851. He received his early education in the public schools and academies of Kittanning. Having decided to enter the medical profession, he studied with Dr. John Dickson in Pittsburgh, after which he entered Jefferson Medical College in Philadelphia. He was graduated with high honors March 11, 1874. Following a one-year residency at Pittsburgh's Mercy Hospital, Dr. Jessop began an independent practice in Kittanning in 1875. *From the collection of Armstrong County Memorial Hospital.* ❀

The fledgling hospital had no facility to isolate contagious cases. In 1902, to avoid public panic when a woman was admitted with a diagnosis of smallpox, the hospital board chartered a boat and she was treated while floating on the Allegheny River for the duration of her illness. Records indicate that the hospital paid \$92.50 to rent the boat, \$5.00 for Pittsburgh Plate Glass Company to haul the boat, and \$5.00 for ice used in the woman's care. Clearly, there was need for expanded services and facilities. Within three years of the hospital's opening, the board was already planning a new building. A committee was appointed to engage an architect to design a new facility and a second committee was responsible for securing funding for the endeavor.

But monies were not easily acquired and the business of healthcare at Kittanning General Hospital was not always financially sound. By 1918, despite years of lobbying at the state house in Harrisburg, the situation was becoming desperate. The hospital's financial resources were meager, the old house was expensive to maintain and both laboratory and expanded x-ray facilities were needed. On May 5, 1918, the board authorized a notice for publication in the Kittanning newspaper that no additional patients would be admitted to the hospital for treatment after June 1, 1918. The board determined to "apply to the court for a dissolution of the charter of the hospital and for the appointment of a liquidating trustee to wind up its affairs."

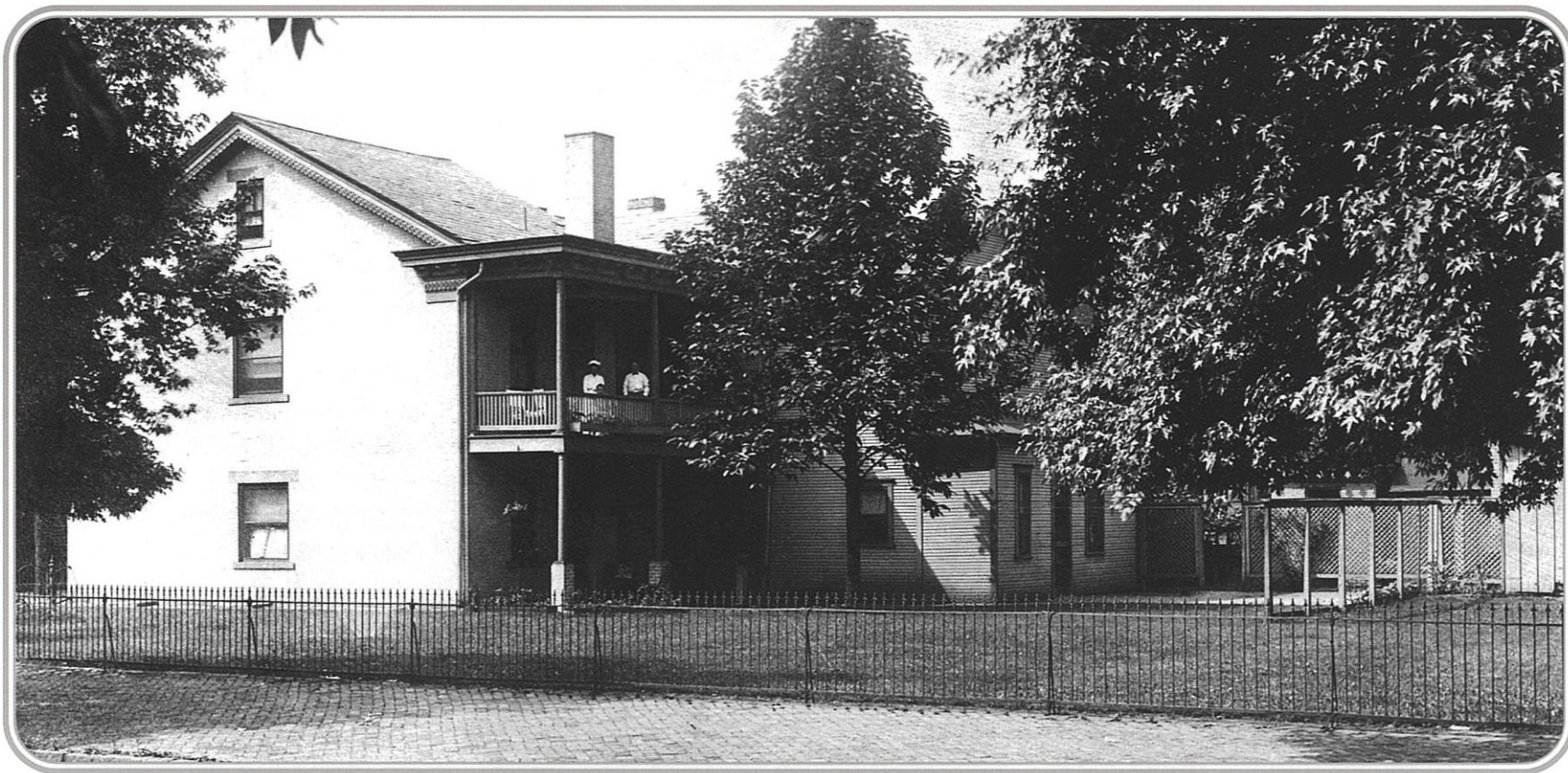
Apparently, there was strong disagreement over the closing of the hospital. The June 24, 1918, minutes indicate that a number of board

members—founder Dr. Charles Jessop among them—resigned. New directors were appointed and a decision was made to rescind the application for dissolution of the charter and appointment of a liquidating trustee. A bridge loan of \$1,000 was secured from the Armstrong County Trust Company and the hospital continued to serve the community.

Only a few months later, in the face of an insidious national influenza epidemic, the hospital received a request to turn the facility over to the Red Cross for the care of patients affected by the virulent disease. Reluctant to relinquish total control, the board agreed to allow the Red Cross temporary use of the hospital for \$300 a month. It was agreed that the Red Cross would also pay staff salaries during this time.

Despite its financial limitations, the role of the hospital in the community continued to evolve. For the first time in 1918, a publicity committee was created consisting of both medical staff and board members. Community relations became a more formalized vehicle for information and communication. The board invited all ministers and pastors of area churches to attend a meeting "for the purpose of considering certain suggestions and recommendations for bettering the hospital's service and extending the hospital's influence throughout the community." The hospital seems not only to have escaped the financial ruin imminent in the near-dissolution of its charter, but actually to have emerged on firmer footing.





Two nurses enjoy some fresh air on the balcony of the Kittinging General Hospital. This first facility was located in the former home of Marie Schaeffer at the corner of Mulberry and South McKean Streets. J. H. Beers' 1914 history of the county recounts an amusing experience of one early physician: "A young man whose family lived some five miles from the village doctor called at his office late one night and asked him what his charges were to go out to his father's house. The doctor said, 'Well, the roads are rough and the night is dark and stormy; I will charge you about three dollars.' The young man heaved a sigh of relief and remained silent until he caught his breath. The doctor, not understanding the cause of the delay, hurriedly said, 'Well, I will go out for two dollars and a half,' fearing that the young man might go elsewhere. This was satisfactory to the young man and the doctor got his team ready and off they went, the conversation being principally of the topics of the times, until they reached the home, when the doctor incidentally asked the young man who was sick; and as the young man got out of the buggy he said, 'Well, doctor, no one is sick; I was anxious to get home and the liveryman wanted to charge me five dollars to send me out home, and it just struck me that you would go out for much less, and here I am home for just half the price asked by the liveryman and I am certainly much obliged to you. Good night'" (p. 90). *From the collection of the Armstrong County Memorial Hospital.*

Space remained a problem, however, and in 1920, a capital campaign committee was charged with raising \$25,000 in donations from the community. A second committee was organized to stage a benefit concert, the proceeds to be used to purchase the Thompson home on the corner of South Jefferson and Mulberry Streets. This newly acquired structure would house nurses and nurses-in-training.

By the end of the fiscal year 1921, the hospital had admitted nine hundred patients, a remarkable number for so small an institution. Since the turn of the century, the board had been acutely aware of the need for expansion, but continued to serve the community to the best of its ability despite the lack of resources to construct a new physical plant or expand the existing facility.

Dr. Frank McNutt, a general practitioner in the community from 1946 to 1988, remembers visiting the Kittanning General Hospital when it was located in the house on Mulberry Street. A sophomore in high school, he had recently decided to pursue a career in medicine. Doctor Ambler, a member of the hospital's surgical staff and a friend of the McNutt family, took the aspiring physician with him on rounds in 1933. "I remember going into a private room. The patient had had a gallbladder operation and was lying

in bed. The room had a mantel and on the mantel was a jar with the patient's gallstones in it—they always gave the gallstones to the patient. Dewey, the orderly, would carry the patients upstairs to the beds," recalls Dr. McNutt.

Surgery was one of the services in greatest demand, and the medical and nursing staffs were compelled to give it precedence over other patient needs as this was the only hospital in the county. Increasing numbers of children were also being admitted and they were attended alongside adults in the crowded wards. There was no maternity department for women who wished to have their babies delivered in the hospital. Again, the need to expand was evident. In a unanimous action in 1928, the board of directors committed to raise \$200,000 for expansion.

The campaign moved slowly, but by January, 1936 a new hospital had been built adjoining the original hospital and facing South McKean Street. The name was changed to Armstrong County Hospital. The *Daily Leader-Times* recounts: "Now that the actual opportunity to see what has been accomplished is to be given, hundreds are planning on visiting the building. Groups of women have been trained to act as guides through the handsome structure and they will be competent to tell each and every visitor what every

room is to be used for. Visitors will have an eye opening experience when they visit the building for the first time. No space has been wasted. No wanton expenditures have been made for decorations and for anything that is not useful. The builders have wrought well and should be proud to exhibit the fruit of their labors."

The new hospital applied the most up-to-date concepts in patient care. Boilers supplied heat and hot water. The two upper stories contained wards, private rooms, a pediatric unit, maternity rooms, an x-ray room, a laboratory and an operating room featuring Cararra marble walls to facilitate sterilization. Funding ran short of preparing the building for occupancy, however.

Then fate intervened. The relentless floodwaters of the Allegheny River kept much of downtown Kittanning underwater in January and February of 1936, filling basements and first floors of homes and businesses. Through mid-March, the waters continued to rage, rising to more than a foot on the first floor of the old hospital. Two infants and twenty adult patients were moved to the safety of the second floor. Continued occupancy of the old building became impossible; it was damp from the high water, the heating system had nearly given out and the odor of water-soaked wood was acrid.



After decades of employee exposure to incredible workplace hazards, industries began to address the pressing issues of workers' health and safety. As part of their planning, Allegheny River Mining staffed and trained a first aid team at each of the company's operations. Here, the Seminole Mine's First Aid Corps and their "victim" participate in the 1914 National First Aid Competition. *From the collection of Harry M. Atkins.* ☞



By 1929, Kittanning General Hospital's room rates had risen to three dollars per day and use of the operating room generated a charge of five dollars. In the early years of medical practice, "the fees of the physicians of Armstrong County varied somewhat. We find that some of the office work, examinations and consultations, by some of the pioneers in practice were free and they charged a small fee for the medicines, while others were high charges. One would charge twenty-five cents for examination and medicine; another would charge one dollar for the same. Their fees for visits varied much also; some men would make a visit into the country for twenty-five cents a mile and others would charge from fifty cents to a dollar a mile, but in those days money was very scarce, . . . and many a time the early doctor would take in exchange for his service a bolt of homespun linsey-woolsey, or the raw material, or products from the farm. We learn, too, that the early doctors were very charitable; but very few of their bills remained unpaid, for many people would . . . 'square up when the crops were off'" (Beers, p. 89). *From the collection of David and Elaine Craig.*

KITTANNING, PA., Mar - 18 - 1929

Mrs. Ada Earley  
R.D. #1  
River Pa

**TO KITTANNING GENERAL HOSPITAL**  
 KITTANNING, PA.  
 F. REISGEN, SECRETARY AND TREASURER

Hospital No. 9158 Account of Mrs. Ada Room No. Hard C

Room Rent from-	<u>Mar 12</u> to-	<u>Mar 18</u>	6 Days @	<u>3<sup>00</sup></u> per Day	\$ <u>18</u> —
" " "	" "	" "	" @ "	" "	
Operating Room Charge,					<u>5</u> —
Board of Nurse :	weeks,	days,	@	per week	
X-Ray Charge					
Extras:					<u>\$ 23</u> —

*Received Payment in full*  
Mar - 18 - 1929

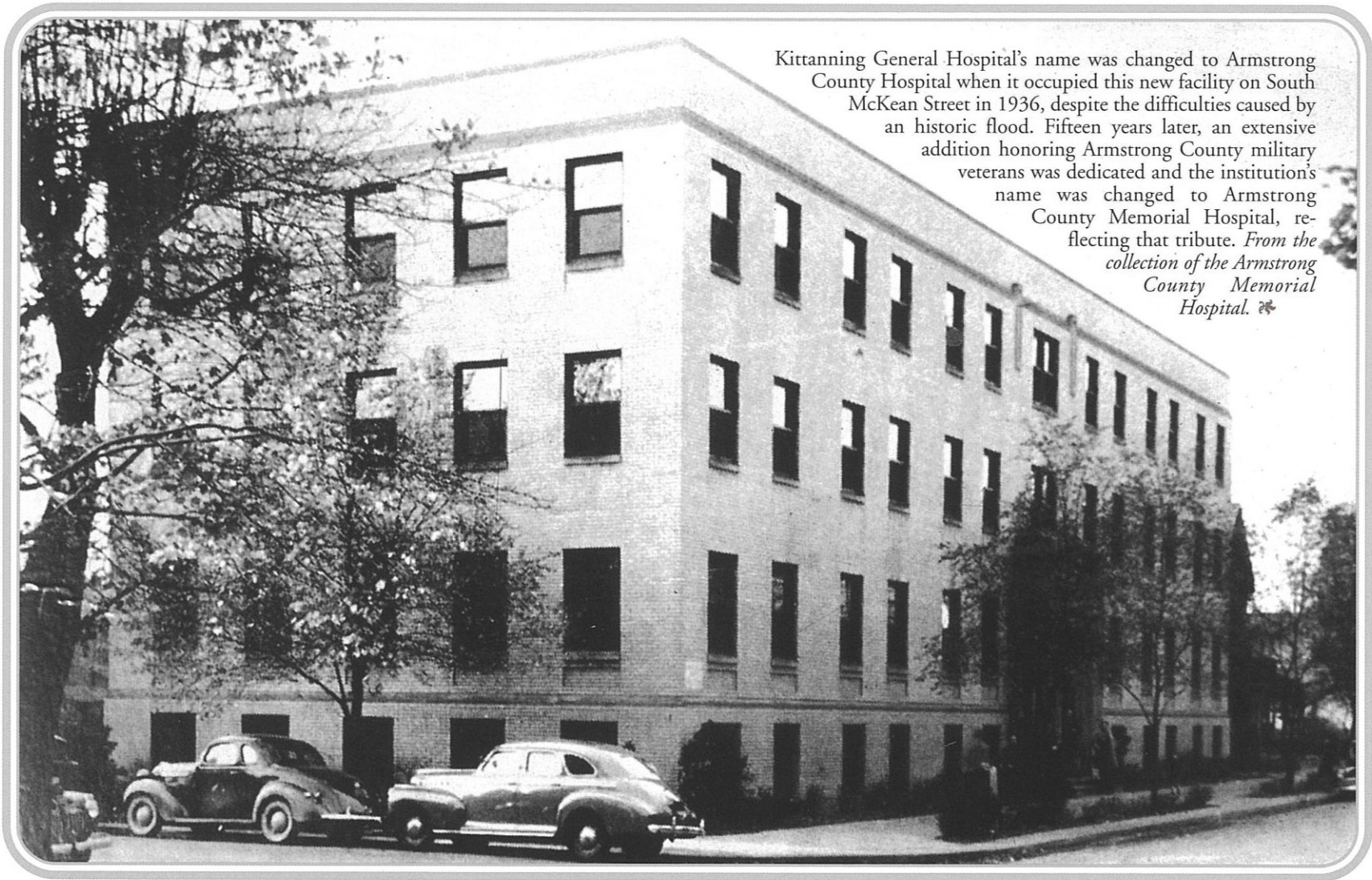
Volunteer high school faculty and students converged on the new building, assembling hospital beds and furniture, and distributing them to wards and patient rooms. They also prepared the operating room. On Saturday, March 21, hospital staff was forced to evacuate sixteen patients from the old building—some by rowboat—to the fresh, dry environment of the new hospital. Ten minutes after they vacated the old structure, plaster fell from its second floor ceiling. Undaunted, the staff performed the first surgery in the operating room at the new

facility that very evening. Sixty patients could now be accommodated in the hospital. The *Daily Leader-Times* lauded it, "a monument to the generosity of the community."

Within a few years, the board of directors recommended additional construction to raise the bed capacity to 105. The hospital had become the center of health care for Armstrong County, receiving patients from widespread rural areas and outlying communities.

Dr. McNutt, who returned in 1946 after completing medical school and serving in the war, established a practice in his

native Ford City and was on staff at the hospital. "It was a nice, convivial atmosphere; friendly. The board of directors wanted the doctors to do a good job, and I always felt the hospital provided us with whatever we needed," said Dr. McNutt. He wasn't the only native doctor to return—about 60 percent of the physicians then on staff had been reared in the community, among them Dr. Harry Thompson, Dr. Carberry and Dr. Edward Bierer. Others came from as near as Tarentum and as far as Maine. "The surgical staff at that time was competent in



Kittanning General Hospital's name was changed to Armstrong County Hospital when it occupied this new facility on South McKean Street in 1936, despite the difficulties caused by an historic flood. Fifteen years later, an extensive addition honoring Armstrong County military veterans was dedicated and the institution's name was changed to Armstrong County Memorial Hospital, reflecting that tribute. *From the collection of the Armstrong County Memorial Hospital.*

most general surgeries—but complex procedures, such as certain cardiology cases, were referred to specialists in Pittsburgh,” according to McNutt.

The demand for medical services rapidly outpaced the current facility. “We

had patients in the hall as a routine. The rooms were all filled and we’d have a screen around them [in the hallway] so they were sort of sectioned off,” remembered Dr. McNutt. In 1948, a campaign to renovate the existing building and construct an

addition was launched. A year-end audit showed the hospital operating in the black despite writing off approximately \$15,000 in free care.

Then, in 1952, the United Mine Workers first negotiated an insurance pro-

gram for their members. Both doctors and the hospital generally acknowledged it as a positive event despite some early misgivings since health insurance initially had the connotation of “socialized medicine.” “There was a concern about socialized medicine in the form of the union paying the bills,” said Dr. William H. Pitts, who began his practice in Rural Valley in 1952. “The UMW was taking over the insurance for their men and would pay for hospitalization, too. We didn’t want someone else calling the shots.” It soon became apparent that the arrangement worked to the great benefit of both the hospital and the medical providers in the area, each having previously gone without payment because they would not deny treatment to those without financial resources.

May 25, 1952, marked the date of formal ceremonies dedicating the latest addition to the hospital. An L-shaped wing was added to the existing building in downtown Kittanning housing additional ancillary facilities and patient beds that increased capacity to 115 patients. The new wing paid tribute to Armstrong Countians who had served in the armed forces and, in their honor, the facility’s name was changed to Armstrong County Memorial Hospital. One hundred forty employees, including thirty registered nurses, staffed the hospital.

Undertaken at a cost of over \$900,000, private contributions for the modernization and expansion project reached almost \$450,000 and numbered over 6,500. Individual and corporate contributions ranged from 10 cents to \$60,000. Meyer Greenbaum, chairman of the finance and building committee and a twenty-five-year board member, Judge J. Frank Graff, and Francis T. Benson, board president, were credited with this achievement, the culmination of nearly ten years of planning and fund raising. The federal government provided nearly \$300,000 under the terms of the Hill-Burton Act for construction of local hospitals.

The newly refurbished hospital once again featured all the modern medical conveniences: two operating rooms with an adjoining recovery room; a new obstetrics department with two labor rooms, two delivery rooms, and patient rooms for twenty-seven mothers and twenty-two bassinets; piped-in oxygen; and an emergency generator to insure uninterrupted electrical power. Three wards with baths on the first floor comprised a new pediatric department while the modern laboratory boasted the most up-to-date equipment.

To satisfy steadily increasing demands, the new hospital also developed a centralized core of outpatient services including laboratory, urology, basal metabolism test-

ing, and electrocardiography. Hospital-based physical therapy treatment was inaugurated and a dental suite was created in which area dentists could treat or operate on their patients. Hospital dietitians assisted patients with special nutritional needs. Additionally, there was an eye examination room and a radiology and x-ray suite was also installed. To accommodate the increasing needs of the community, the hospital again expanded in 1960 when a fifth floor, designed to treat inpatient psychiatric patients, was completed. The first patients were admitted in July, marking the establishment of the region’s first inpatient psychiatric unit.

Administrator Robert L. Engel, who had joined the hospital in 1962, shepherded the institution through yet another crisis in 1964 when the swollen Allegheny again lapped at the hospital doors. Personnel rapidly crafted homemade floodwalls, preventing the waters from entering the hospital and keeping damage to a minimum. Upper hallways were congested with canned food cartons, medical records and filing cabinets hastily relocated from the basement. Visitors were barred for a day, despite the fact that six babies were born during the crisis.

Use of the hospital soared between 1959 and 1969. Demand for services from the growing county population out-

stripped the capacity of the facility once again. Admissions reached 5,395 in 1959 and that figure increased by 50 percent to 8,096 in 1969. Emergency cases in that same time span increased by almost 250 percent, from 4,800 in 1959 to 16,658 in 1969. Surgical procedures increased 68 percent in the decade, from 2,005 to 3,363. And demand for x-ray exams increased by over 300 percent, from 12,956 to 53,813. Patient beds lined the hallway, screens placed between them providing only minimal privacy. Long lines of patients waited for treatment and tests in the radiology and pathology departments while an overload of cases crowded the emergency room.

Overflow departments were housed in a home adjoining the main hospital building where nurse aides and radiology students received clinical instruction in a makeshift, second-floor classroom. In-service classes for staff nurses also were held there and the purchasing department occupied the first floor. By 1966, the hospital board again faced a critical need for expansion.

Until the late 1960s, the hospital functioned essentially as a community health center with local residents relying on Pittsburgh hospitals for advanced medical resources to cope with more complicated procedures. The ensuing trend toward

board certification caused the practice of medicine rapidly to become more specialized. Armstrong County Memorial Hospital decided to follow that path reasoning that the community would be better served by having advanced medical specialties and services at hand. To wit, Dr. W. Donald Minter, a radiologist, joined the hospital staff in 1952 and Dr. John Bono, a boarded ear, nose and throat specialist, arrived in 1957. In 1964, Dr. Kenneth R. Kost became the first board-certified surgeon to join the staff and he began recruiting other surgeons, like his partner, Dr. Paul L. Frederick, who arrived in 1970. Also joining the surgical staff during that time were Dr. David H. Kohl in 1966, and Dr. Jae T. Yang in 1972.

A backlog of weeks of scheduled surgical procedures renewed the urgency to expand the hospital. The board engaged a national consulting firm that recommended building a new facility and a decision was finalized when the Pennsylvania State General Authority offered to purchase the old hospital for use as a geriatric center.

Dick Laube, president of Freeport Brick Company, was then president of the hospital board of directors. "We had no board specialties before that time, and if you looked at the future of medicine, that was really the only way to go—but if we didn't have a modern facility we couldn't

attract boarded physicians," explained Mr. Laube. "But it would have cost us a fortune to retool the old hospital. We found 175 acres in an ideal location, which gave us an opportunity to build a campus."

Architects began designing a facility for the West Hills site on twenty-five acres of land generously donated by Dr. Samuel R. Black and his wife Twila. Dr. Black, a urologist and prominent member of the medical community, was instrumental in developing a vision to move the hospital into the future. A community fund drive began in 1970 with a goal of raising \$800,000 locally. Eventually, contributions from the community and hospital personnel topped \$1.5 million, almost doubling the initial goal. Slated to cost \$10 million, the new hospital received almost \$2.5 million in the form of a federal Hill-Harris grant, \$1.8 million from the sale of the former hospital and \$750,000 in an Appalachian Regional Commission grant. Cash on hand funded almost \$3 million of the construction cost with the balance financed by a long-term loan.

Judge J. Frank Graff turned the first spade of earth, breaking ground for the new hospital on March 9, 1971. Completed on May 15, 1973, seventy-five years after the first Kittanning Hospital opened, the cost of the new three-story building was \$12 million. Members of a pool from



In the early 1930s, the hospital board of directors produced a brochure to support their efforts to raise capital for a new, greatly expanded facility in which they promised that “a children’s department will provide for the little patients who make up one sixth of those admitted.” It went on to say, “Babies in Armstrong County are just as precious as those anywhere else. They and their mothers are entitled to the same skilled and tender hospital care that is given in other communities with ample maternity service in their hospitals. The new Armstrong County Community Hospital will have a maternity department and our babies will have a fair start in life. The new hospital will provide a children’s department. At present there are no accommodations for boys and girls, despite the fact that 552 of the hospital’s patients have been children. These children had to be cared for in adult wards. This practice is not good for either children or adults, but it is made necessary by lack of any other accommodations.” When the Armstrong County Hospital opened in 1936, it featured both maternity and pediatric units and these hospital services have been provided continuously since that time. *From the collection of the Armstrong County Memorial Hospital.* ❖

all departments completed the move and nursing services coordinated patient transport.

The new Armstrong County Memorial Hospital boasted 204 private patient rooms, unusual in 1973, each with a scenic view and featuring amenities including a personal telephone, individual temperature controls, a private bath, and color television. The most technologically advanced equipment available was installed in the intensive care unit, four operating rooms and surgical recovery room, and it was regularly updated as technology evolved. The Radiology Department housed a special procedure room with angiography and additional specialized equipment for nuclear medicine, radiation therapy, mammography, dental and orthopedic exams.

Board President Edward J. Steiner conducted the opening ceremonies on June 9, 1973, before an enthusiastic audience gathered in front of the new building.

At the time of the grand opening, hospital personnel numbered 525 professionals and ancillary workers capable of providing a broad spectrum of health care services. The nursing staff of 275 included 130 registered nurses. The medical staff numbered fifty, representing many of the major specialties and sub-specialties.

With its new, state-of-the-art facility, ACMH began to attract a wide diversity of specialists. As technology advanced, it became increasingly important for the hospital to keep pace. New diseases and the increasing prominence of such afflictions as cancer required advanced strategies, equipment and training.

In 1990, the Richard G. Laube Cancer Center opened to meet the needs of area patients suffering from this disease and to provide them with comprehensive cancer care close to home. A multi-disciplinary treatment team composed of psychiatrists, psychologists, social workers, nurses and other healthcare professionals provides con-

sultation and services to these patients.

In the 1990s, Armstrong County Memorial Hospital once again addressed the changing demographics of the community. In response to that analysis, an eighteen-bed skilled nursing unit for recovering elderly patients opened in 1992, and physical therapy and ambulatory surgery departments were expanded. In time, the hospital’s geographic service area also expanded. Increasingly, patients came from counties surrounding Armstrong—Butler, Indiana, Clarion, and northern Allegheny Counties. It became evident that the hospital should reach out to the region to make its services more available and convenient.

A facet of the institution’s long-range strategy was implemented with construction of the hospital’s first primary care center in Leechburg in 1992. Services offered there include pediatrics, family practice, occupational medicine, obstetrics/gynecology, orthopedics, nutritional

counseling and general medicine diagnostic and laboratory services. The Elderton Primary Care Center opened in 1994 with a new building erected in 1998. It was followed in 1997 by the Sarver Primary Care Center designed to address the needs of the growing population at the crossroads of Armstrong, Allegheny, and Butler Counties.

14 In 1991, the hospital created the Armstrong Health and Education Foundation as a funding vehicle for programs that address community-based health care needs such as screening programs, health fairs, and wellness clinics. Armscare, Incorporated, a for-profit subsidiary of the hospital providing durable medical equipment, was also formed. ACMH opened a state-of-the-art cardiac catheterization lab in 1993 that provides local accessibility to those diagnostic services.

In December of 1995, Jack D. Hoard was appointed president and chief executive officer of the hospital. For Mr. Hoard, the allure of the Armstrong County facili-

ty is that, "ACMH has a breadth and scope of services not usually found in a rural community hospital. The cancer center, diagnostic and imaging technology and the specialists and subspecialists on staff or available to ACMH patients are hallmarks of a comprehensive health care institution."

As Armstrong County Memorial Hospital prepares for the new millennium, the institution, which has successfully met the health care needs of the community for the past hundred years, is preparing proactively to continue that role in the region. With its up-to-date facilities and 125 staff physicians representing forty-five specialties, ACMH is well-positioned to navigate the course it has charted.

Underpinnings of the future are still similar to those that anchored Dr. Charles Jessop as he fought to create the hospital a century ago. The strategies may be increasingly complex, the technologies greatly advanced, but the philosophy of caring for the health and well-being of the community remains the hospital's core mission. ❧

CHAPTER IX TEXT BY LYDIA STROHL  
EDITED BY RON GDOVIC





At its West Hills location, the present ACMH functions in great measure as a regional medical facility with the capacity to treat a wide variety of diagnoses in many specialties. Even in the turbulent healthcare environment of recent years, ACMH's administration and board of directors have remained committed to Dr. Jessop's original vision of providing quality healthcare in a compassionate setting. By continually adapting to new circumstances in the healthcare industry and modifying services to reflect the changing needs of the community, ACMH has remained an independent institution with local governance able best to assess the medical requirements of the patients and families it serves. *Photo by Timothy W. Lehner.*