A Review of the Hospitals of the University of Missouri-Columbia

by Keith J. Weinhold in April 1986

Introduction

The University of Missouri-Columbia Hospital is the third hospital, in a succession of hospitals, owned and operated by the Curators of the University of Missouri. The University has been in the healthcare business since 1901, when they first built and operated Parker Memorial Hospital. Later the University built and operated a hospital called Noyes Hospital. Then, three decades ago, the University completed the University of Missouri Medical Center, the third of their hospitals.

The casual reader of this article should be enlightened as to the succession and progression of this institution. In reading one will notice several things about this document. First, the University's School of Medicine is mentioned throughout this paper. This is a necessary inclusion since the history of the two is virtually inseparable. Second, one will notice there are gaps in the periods covered by this writing. These "gaps" result from the writer's concentration on major events in the hospital's history and the fact that one could find but little information on some periods of time in the institution's development. Finally, I would like to point out the fact that many of the problems we face today (like a reduction in our state appropriation) are nothing new or unusual but rather they have been with us from the very beginning.

Parker Hospital

In 1872 at Columbia, the University of Missouri reestablished its Medical School. The school had formerly operated in St. Louis from 1845 to 1855 in conjunction with the McDowell Medical School of Kemper College. The program was discontinued and lapsed into some academic limbo until February 26th, 1867. At that time the Board of Curators recommended that a Department of Medicine be established in Columbia. This lapse of time from 1867 to the actual opening in 1872 of the school is unexplained. The probable cause for the delay was either a lack of funding, space or possibly both.

In the spring of 1898 Dr. William McAlester (then Dean of the Medical School) presented a report to the Board of Curators on the status of the Medical School. In this report McAlester argued that to have a truly first rate school, the students needed a hospital for clinical experience. At this time the Medical School was a two year school endeavoring to become a
four year school. The Curators were sympathetic with his pleas and referred the matter to the Executive Board for approval.

On the 27th of September, 1898, William L. Parker (a Columbia businessman) donated $15,000 to the University for the construction of a hospital. One of the conditions of his donation included that at least five percent of the total care provided be charity care for indigent patients. Then, as now, nothing speeds up such processes as well as a nice large dose of outside funding. In 1899, a dose of state funding came in the amount of $11,000. Adolphus Busch of St. Louis, the original beer baron, also contributed $5,000 for construction and an additional $3,400 for the amphitheater which bears his name. Finally, a woman named Mary L. Hale designed the building and on October 20th, 1899 construction began. The building was completed in June of 1901 and after equipping the hospital for operation it was opened for operation in late 1901 or early 1902.

Upon its opening the hospital had twenty beds and was named Parker Memorial in honor of its chief benefactor. It possessed the capacity for forty beds and was eventually expanded to a forty-five bed hospital. The original cost for the building was approximately $35,000 of which less than a third was provided by the state. The hospital operated on a biennial budget of $6,000 (which is only $3,000 a year to cover all expenses). From the beginning the Board of Curators asked for $10,000 per biennial period but consistently received $6,000. Although the Board reported this amount as "grievously insufficient" appropriations remained low for years to come.

Besides being the original hospital of the University, Parker Memorial Hospital was also the origin of the University's School of Nursing. Beginning in 1901, Parker Memorial Hospital operated a training school for nurses. The ratio of nurses to patients was one nurse for every five patients. Training nurses were given room and board in a nearby house while staff nurses were given room, board and a yearly salary of $100. This program continued on until 1920 when the University assumed responsibility for the school.

By 1906 the hospital had been expanded to its full complement of forty-five beds. Dr. Guy L. Noyes, Superintendent of the hospital reported to the Board of Curators that although the forty-five beds were generally only half full the hospital should expand to one hundred beds. It was his contention that if the hospital could keep one hundred beds filled it could break even or make a small profit. Everyone associated with the hospital agreed that it was indispensable for the care of sick students and the poor. University students were treated for free by the faculty of the Medical School. The hospital was an obvious necessity for a Medical School which had expanded to a four year program in 1899 (the Medical School continued as a four year program until the fall of 1910 when for economic reasons it reverted to a two year program). This recognized need was to play an important part in the development of the original University (Noyes) Hospital.
Parker Memorial Hospital continued to be the only hospital of the University into the early 1920's. Even after it was replaced by Noyes Hospital as the primary hospital of the University in 1924 it still continued to function as a part of the hospital until the 1950's. Parker Memorial Hospital (now known as Parker Hall) still serves the University to this day. It served as a section of the hospital until the completion of the Medical Center in 1956. Currently, Parker Hall is office space for the School of Health Related Professions and for University Counseling Services. McAlester Hall (former home of the Medical School) is now the home of the Psychology Department.

**Noyes Hospital**

Dr. Guy L. Noyes, and to some extent Dr. William McAlester before his retirement in 1909, started maneuvers to gain support for their plan to build a new hospital as early as 1906. Although Parker Memorial was barely five years old it was already seen as too small for the future needs of the University. Even though the beds in Parker Memorial were rarely more than half full and it would logically seem that a new hospital was not necessary, the good doctors Noyes and McAlester were oblivious to this obvious logic and maintained that the desired increase in capacity was necessary to obtain sufficient clinical material for the Medical School. They also argued that if these beds were kept full they would provide sufficient income to cover the expenses of the hospital.

The doctors finally convinced the Board of Curators of their need and the Curators requested an appropriation of funds to begin construction. After several requests for funding the state legislature finally gave way and appropriated $250,000 which was considered to be one-fourth the amount necessary for construction (notice the inflation rate between 1900 and 1921). Construction began in 1922 and was scheduled to be complete in 1923. The building was completed in August of 1923 at a total cost of near $1,200,000.

The amount listed as spent on the hospital (1.2 million dollars) contained an unknown amount of funds which were used for the expansion of the medical School building McAlester Hall. This hall was named in honor of the former Dean of the Medical School who passed away in 1922.

University Hospital was renamed "Noyes Hospital" in memory of Guy L. Noyes, hospital superintendent and sixth Dean of the Medical School (1914-1930). Dr. Noyes passed away on February 4th, 1930.

The new Noyes hospital opened in 1923 with a capacity of seventy-five beds. This brought the total bed complement of the University to 120 (Parker 45, Noyes 75). Apparently, the new hospital created the desired increase in patient load as census at the hospitals was reported as high as 104. Annual operating budgets were in excess of $35,000 (remember
Parker Memorial cost $35,000 to build in 1900 and its annual operating budget was $3,000).

The early 1930's saw the short lived attempt to reestablish a four year Medical School program. The Board of Curators authorized the third and fourth clinical years in the fall of 1930. One six member class managed to complete the third year of medical school in 1931. In August of 1932 the nations economic depression forced the cancellation of the third and fourth years of the program. The students, as before, transferred elsewhere with full credit for the first two years. This failed attempt was however, viewed as only a temporary setback. It was understood that the third and fourth years would be reestablished as soon as economic conditions permitted.

The remainder of the 1930's and the early 1940's saw little in the way of progress or advancement by either the Medical School or the Hospital but two events stand out. The first of these came in 1930 when the Board of Curators recognized Student Health as a separate department within the Medical School. Then, in 1936, the Student Health Clinic was built, linking Parker Memorial, Noyes Hospital and the Clinic into one complex. These buildings all remain in use today. Student Health remains in its original building and Noyes Hospital is now the home of the Career Planning and Placement Center.

**University Hospital**

The latest chapter in the story of the University Hospital and Clinics (formerly University of Missouri Medical Center) begins over three decades ago. When the Medical School failed in its attempts to reestablish the third and fourth years of the program it was for economic reasons only. The Board of Curators at the time noted that it would bring back the final two years as soon as economic conditions permitted. In 1942 the United States Army requested that the University increase its medical school class size by ten percent to assist in the war effort. Additionally, the early 1940's saw the origin of the doctor shortage. A recognized need at both the state and national level for more doctors then became apparent, especially in rural areas. In 1945 the Board of Curators decided to reestablish the final two years of the medical school in Columbia. The decision on the location of the final two years of the program set off one of the longest political battles in the history of the state, lasting nearly a decade from 1944-1952.

Finally however, the decision to locate the program in Columbia was made using the results of a study done by the Board of Curators. One of the chief reasons given in favor of locating in Columbia was the belief among many prominent educators that a medical school is properly located on campus with all the other programs of the University. This point is perhaps most clearly stated by Dr. Abraham Flexner who stated, "The unity of the University is essential, intelligent legislation and administration can solve the problem of
obtaining enough clinical material." Even the words of such prominent educators were not enough to sway the faction that opposed location in Columbia.

Later in 1945, a bill was introduced into the Missouri House of Representatives (House Bill #138) which would have required locating the third and fourth years of the medical school program in Kansas City. The bill was however challenged by Guy A. Thompson, President of the Board of Curators, as being of "dubious constitutionality" and the pro-Columbia faction created such an uproar that the proposed bill was abandoned.

In the same year the Council of Education for the American Medical Association announced it would no longer approve of a divided school. This substantially raised the stakes in this political tug of war, for the prize now was the entire four year program and the hospital to go with it.

The two factions in this political battle are not exact but can be approximated. One side consisted of the people of Kansas City and vicinity, which dearly wanted a medical school in their city because they did not have one at this time. Two of the members of the Board of Curators, Dr. Glenn Hendren of Liberty and Stratton Shartell of Kansas City, represented this side. On the other side were those people and groups who favored a Columbia location for the medical school. This side included influential people from St. Louis, the academic community of Columbia and the local populace. This side was represented by two members of the Board of Curators as well. The members supporting a Columbia location were Roscoe Anderson of Webster Groves and Guy L. Thompson of St. Louis. By late 1945 it was obviously too political for the Board to arbitrarily locate the program in either city. So the matter was put aside to let tempers cool and give the Board time to gain a fresh perspective on the matter.

In May of 1949 the State Medical Association published a paper stating that the four year medical school program should be located in Kansas City. Interestingly, this is a reversal of an earlier position (1937) when the State Medical Association had maintained that the state did not need more doctors. At about this time sentiments in the state had built up to the point that the time had come to make a decision. The Board of Curators realized something must be done and true to bureaucratic form, they authorized another study.

This study was to be a formal, investigative study to determine which site had more merit as the location for a medical school. Members of the Board charged with performing the study included Dr. Glenn Hendren (Kansas City), Roscoe Anderson (Webster Groves), and John Wolpers (Poplar Bluff). A special fourth member of the group was Dr. Harold S. Diehl, Dean of the University of Minnesota's Medical School, who acted as a consultant and did not have voting privileges.
The study was concluded by the fall of 1950 and its findings were reported November 17th, 1950 at the quarterly Board of Curators meeting. The majority view, held by Roscoe Anderson and John Wolpers, favored the location of the medical school in Columbia. The minority view, (predictably) held by Dr. Hendren, maintained that the school should be located in Kansas City. Arguments supporting both views are contained in the report, of which complete copies still exist and are on file in the University's Archives.

The main points in favor of Columbia as the site of the medical school were as follows:

- It will be necessary to keep the program on campus to function with the medical/health extension program.
- A site on a campus in a small town atmosphere is more conducive to having doctors return to rural areas.
- The central state location is both logical and convenient.
- Several existing facilities (the State Cancer Hospital and the Crippled Children Service) are already located in Columbia.
- Administrative practices and procedures are simplified and facilitated if a medical school is located on the same campus as the rest of the University.
- It provides faculty, staff and students close contact with related basic sciences located on campus.
- It would be difficult to keep the medical school free of non-educational influences if it is not located on the main campus.
- A campus location is best suited to develop the educational interrelationships of the medical division which are needed for the development of work in laboratory technology, dietetics and medical records.
- A University gives the proper atmosphere in which a medical school should work and operate.
- For purposes of medical research, working interrelationships with veterinary medicine, agriculture, sanitary engineering, zoology, genetics, etc. are of the utmost importance. All these programs are located in Columbia.

Dr. Hendren held the minority view and presented the case for the location of the medical school in Kansas City. The case was founded on two primary points. First, there is a much greater variety and volume of clinical material available in a city the size of Kansas City. Second, there would be a much lower capital outlay on the part of the state because Kansas City was willing to offer the use of hospital facilities for free. Dr. Hendren also maintained that annual operating costs would be lower in Kansas City. Finally, he made the point that the medical schools of Illinois, Nebraska, Tennessee, Oklahoma and Colorado Universities were all in larger major cities. So went the case for location in Kansas City.
So at the November 17th meeting the Board of Curators moved to a vote on the subject. The vote was six to two in favor of locating the medical school in Columbia. Voting in favor of Columbia were John Wolpers of Poplar Bluff, Frederick Stonner of Chamois, Allen McReynolds of Carthage, William Elmer of Salem, Roscoe Anderson of Webster Groves and Guy Thompson of St. Louis. Those voting in favor of locating the school in Kansas City were Dr. Hendren of Liberty and Stratton Shartel of Kansas City. F.C. Mann of Springfield was absent and did not cast a vote by proxy.

Several reasons were cited by the members of the Board who voted for the Columbia location over the Kansas City location. Primarily, plant facilities such as laboratories, dormitories, libraries and the like did not exist at the time anywhere in Kansas City. Duplication of the plant facilities would be very expensive. So the cost of building a medical school building would be cheaper because no hospital would have to be built with it but a large part of the plant would have to be duplicated so perhaps it was not truly cheaper to build the school in Kansas City after all. The Board felt that on the matter of cost they should use a long term approach and not do what is cheapest or most expedient at the moment. A hospital in Columbia would be available to all citizens of the state, while a hospital in Kansas City would be primarily for citizens of that city. Medical care is a necessary by-product of operation. The state would not wish to furnish hospital facilities for residents of only one locality.

Soon after these events Guy Thompson retired from Board activities and John Wolpers passed away. Political patronage reared its ugly head and some alleged that Kansas City officials were pressuring Governor Caulfield Smith to pick pro Kansas City people to fill their vacant positions on the Board. This apparently did not happen as the matter was again voted on in April of 1951 and the result was six to three in favor of Columbia as the location of the school.

At long last the matter was decided and an appropriation request was sent to the 66th General Assembly. As legislators are wont to do they became involved in debate and nearly authorized another study to investigate the problem. The study never came about but then again neither did any funding in 1951. Finally, in early 1952, the General Assembly voted for the four year medical school in Columbia and appropriated $13,500,000 for construction.

In early 1953 excavation of and construction on the hospital building of the Medical Center complex began. This seven floor structure was designed as a 441 bed, 28 bassinet, outpatient and emergency care facility which was completed in 1956. Two other buildings combined with the hospital to form the Medical Center complex. Those buildings are the Medical Sciences Building and McHaney Hall. When it was originally occupied in 1956 the Medical Sciences Building was only four stories. It was built with the idea of expansion to the present seven floors in mind. By the mid-1960's the need for more space was evident.
and consequently, the top three stories were added to form the Medical Sciences Building as we know it today. McHaney Hall was built as a nurses dormitory (capacity 105 students) and was completed in 1956. It was connected to the hospital by an all weather tunnel.

Thus the dream of a modern medical center was reality. Utilization of services came quickly as the hospital became a referral center for the state. By the mid-1960's patient admissions were over 9,000 per year, outpatient visits were in excess of 60,000 per year and the operating budget was $8,000,000 with nearly 75% provided through the annual state appropriation. Hospital staff at the time was nearly 1,200.

The latest years figures show that the operation has grown considerably since the mid-1960's. Admissions are over 12,000 per year, the outpatient clinics now have more than 150,000 visits per year and the annual operating budget is in excess of $100,000,000 with just over 10% provided by the annual state appropriation. Hospital staff now numbers approximately 2,500.

As demand for its services have expanded so has the Medical Center. In the middle 1960's the Mid-Missouri Mental Health Center was constructed adjoining the hospital on the west side. The 120 bed inpatient facility shares many services with the hospital to avoid a costly duplication of services. Also built in the 1960's (1965-1967) was the Harry S. Truman Veterans Administration Hospital. Located across the street, due south of University Hospital, the Veterans Administration Hospital shares medical staff with the University.

The 1970's saw the continued expansion of services provided at the Medical Center complex. McHaney Hall became the Howard A. Rusk Rehabilitation program in November 1974. The hospital and clinics were administratively separated from Medical School control and became officially known as University Hospital and Clinics in 1976. 1978 saw the completion of the Outpatient Clinics corridor. Still in the 1970's, 1979 saw the completion of the new Nursing School Building, connected to the northern end of the Medical Sciences Building.

With the 1980's over half behind us the expansion of facilities has continued full speed. The Medical Records temporary facility was erected in 1981. Following close behind were the Mason Institute of Ophthalmology in 1982, and the Rock Quarry Center in 1983. Late 1985 saw the completion and opening of the Same Day Surgery Center.

Project "Access 85/86" is now nearing completion. Included in this project are a new lobby/entrance to the hospital, a "Marriot" full service restaurant and a 500 car parking garage. The completion of this project helps to ensure both the University and State of Missouri have a modern, comprehensive, and full service medical care facility ready to meet the needs of present and future generations.