ST. CLOUD VA HEALTH CARE SYSTEM

EST. 1924



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Message From Our Director



As we close in to our 100th anniversary, we honor the long and distinguished history of our health care campus and are busy forging a path into the future. Some of our buildings are close to 100 years old, however, their bones are strong, and we continue to adapt them to deliver health care services to our Veterans in modern settings.

Buildings are important, but as we celebrate the historic structures of this campus, we must keep in mind that our organization is more than a collection of buildings. Indeed, it the collective effort and will of almost 100 years —several generations—of dedicated staff members who provide the lifeblood of treatment and services that our Veterans need and deserve.

Dr. Brent A. Thelen Director St. Cloud VA Health Care System

Health Care System Directors

St. Cloud VA Health Care System Directors from 1924 to present.



Dr. Hans Hansen 1924 - 1935



Dr. Hugo Mella 1935 - 1939



Dr. Roger P. Hentz 1939 - 1943



Dr. John Pringle 1943 - 1948



Dr. Claude Lewis 1948 - 1957



Dr. Stanley B. Lindley 1957 - 1970



Dr. Raymond E. Reinert 1970 - 1980



Robert T. Dacy 1980 - 1986



Ralph W. Knoebel 1986 - 1989



Thomas A. Holthaus 1990 - 1996



Barry I. Bahl 1996 - 2016



Stephen D. Black 2017 - 2018



Dr. Brent A. Thelen 2019 - Present

Introduction

In March 1919, the largest federal hospital construction program in history (to date) was authorized by Congress to provide medical facilities for World War I Veterans. Public Act 194 of the 67th Congress, also referred to as the second Langley Bill, was approved by Congress on April 20, 1922 and called for an appropriation of \$17 million for the construction of twelve Veterans hospitals. A 500-bed neuropsychiatric hospital for Veterans Bureau District No. 10, which included the states of Minnesota, North Dakota, South Dakota, and Montana, was authorized as part of that law. In support of locating the hospital in St. Cloud, the St. Cloud Commercial Club staged a pledge drive and raised upwards of \$60,000 for the acquisition of 310 acres of farmland on the Sauk River. The property deeds were donated to the U.S. Veterans Bureau, and construction of the hospital began on July 17, 1923.

U.S. Veterans Bureau Hospital No. 101 at St. Cloud was officially dedicated on September 17, 1924. The St. Cloud facility was the first federal hospital for disabled veterans to be constructed in the Veterans Bureau's tenth district. On September 24, 1924, the first patient was admitted. Thousands of veterans from Minnesota received neuropsychiatric care at St. Cloud from 1924 to 1950. Since 1950 it has served thousands of American veterans from modern-era wars.

The St. Cloud VA Hospital Historic District was placed on the National Register of Historic Places on August 21, 2012, because of its significance to the history and evolution of American medicine and Veterans care, its representation of World War I-era federal architecture, and its role in providing quality health care to World War I Veterans after the war. The St. Cloud VA Hospital Historic District continues to serve as a physical reminder of medical care provided by the federal government through the Veterans Bureau and the VA to Veterans.

National Register of Historic Places Listing and Master Planning

Under a Multiple Property Submission context cover form entitled "United States Second Generation Veterans Hospitals", in 1980 the St. Cloud VA Medical Center campus was determined eligible for National Register listing as a characteristic example of a Sub-type 1 psychiatric hospital campus. The VA national headquarters office selected the St. Cloud VAHCS campus as one of its outstanding historic facilities and took the initiative to prepare a successful National Register nomination, as an example of good-faith governmental stewardship of an historic resource. On August 21, 2012 the St. Cloud VA Hospital Historic District was listed in the National Register of Historic Places as an historic district and is therefore subject to protections and review processes established under the National Historic Preservation Act of 1966.

As mitigation for past adverse effects on campus cultural resources, a Memorandum of Agreement was negotiated between Minnesota SHPO and the Veterans Administration (VA), stipulating that a masterplan addressing preservation issues be developed by VAHCS and coordinated with SHPO. The historic masterplan for the campus – that is the guiding principle of organization and purposeful order -- has served with surprising flexibility and accommodation of changes in Veterans' healthcare delivery. This thoughtfully balanced masterplan serves to clarify understandings between preservation experts interested in maintaining and preserving the character and characteristics of a historically important place; and pragmatic operating concerns faced by facilities management and medical staff in addressing the mission of providing healthcare services to the changing demographic of military Veterans.

Architectural Notes

Two excellent, commissioned studies prepared on behalf of the VA describe in greater detail the historical evolution of the St. Cloud VA Medical Center architectural context. The Ramsay study (2009) and Kloss/EMR study (2010) are quoted and summarized here as they relate to the architectural/campus planning history and the historic campus landscape respectively. The patterns noted by these authors are maintained and continued as part of the historical objective guiding master planning efforts.

Ramsay comments, "In outlining the historic patterns that organize and characterize the historic campus we see today, Ramsay writes extensively about the prevailing approach to design of institutional campuses in the 1920s, and particularly medical campuses. The patterns Ramsay identifies can be recognized in many other Veterans Administration healthcare campuses nationally, and VA Medical Center campuses (particularly those influenced by Colonial Revival architecture and planning) were the further subject of a national historic context study recorded with the National Parks Service.

"Curved roads, axial arrangements and equally-spaced buildings of similar size and scale are typical of [Morell & Nichols'] institutional planning during the 1920s for both education and healthcare."

"Whether viewed as a single style or a cluster of related sub-styles, the Colonial Revival manifested itself in every aspect of American design, decorative arts, interiors, and especially in architecture [and institutional planning]. Colonial Revivalism is convincingly linked by historian William B. Rhoads with emerging American nationalism, a principle cultural theme during the 1920s."

"The Colonial Revival and Georgian Revival are sub-styles within a larger phenomenon of renewed interest in classicism at the turn of the 20th century. Styles, by their nature, consist of various visual and technological aspects: proportioning systems, rhythms of solid and void; material palettes, colors and textures. In the case of the Colonial Revival special attention is placed on brick bonding patterns and other masonry details such as impost blocks, sills, quoins, arches (flat or segmented). Doors, windows, architectural moldings and cabinetry are also drawn from a vocabulary of traditional forms."

"In contrast to the somewhat orderly Neo-Georgian character of the public side of the VA campus, something must also be said about the more practical, pragmatic structures on its private or rear side. American architecture was also in the midst of a revolution growing from industrialization and the developments of European Modernism, with all of its emphasis on economy, efficiency and durability."

[The initial phase of the VAMC campus's historical development], "shows the original intention toward balance, if not actual symmetry through the axial placement of Building 1 at the end of a formal approach drive, with Buildings 2 and 3 set back on either side forming a visual screen for the more utilitarian buildings to the north. The east-west arrangement of these three structures is reinforced with a drive branching in those directions and curving gently to the north around Buildings 2 and 3 – a parenthesis of pavement."

"But what had been a tight balanced composition on a north-south axis has developed a more genuine bi-axiality, with Buildings 29 and 48 through 51 establishing a secondary cluster of ward buildings and an implied termination of the westward axis . . . with multiple axes and both primary and secondary courtyards. A semi-circular service drive at the west side of the campus reinforces the closure of growth in that direction."

Landscape

"With regard to landscape features, there is a clear intention for the campus to reinforce these organizing axes through the planting of borders – alleés in the French sense of defined roadways or walks. These trees that border the principal drives add considerable dignity to an important government facility."

"Another important landscape element is the picturesque grotto at the northeast. The space between the service drive and the Sauk River has been developed in a romantic or picturesque grotto, very much in the character of WPA or CCC work contemporary with Depression Era parks and wayside rests. The attribution of these features with the therapeutic work of the hospital rehabilitation programs makes them doubly significant and worthy of preservation."

The landscaping of the St. Could VA hospital was not built into the original construction plan, but over time, became a distinguishing feature of the campus. Dr. Hans Hansen, the first director of the St. Cloud VA hospital sought out organizations that would donate trees, shrubs and other plantings for the beautification of the campus, as there was no budget for landscaping. A greenhouse was constructed at the rear of the campus in 1926 to house plants and shrubs for landscaping efforts. Landscaping projects were conducted by patients to serve as a form of outdoor recreation as well as a form of vocational training."

While the majority of the campus landscaping appears to have been done by patients in the early days of the hospital, by the 1930s the landscaping of the campus was undertaken by the facilities management division of the hospital. A map dated March 1, 1930 shows plans for the planting of shrubberies to flank walkways and enhance existing trees. A 1939 map shows plans for the addition of numerous trees to the grounds south of the main campus. The map indicates that in 1939 there were lines of existing trees flanking the long drive to the main hospital building [entrance]. The map also indicates the locations of the proposed landscaping, which was composed of a mixture of deciduous and coniferous trees placed in borders and small groupings that suggest the intention of the designers was to create a park-like setting.

The St. Could VA hospital campus landscape can be divided into three categories: buildings (habitable structures and utility buildings), circulation system (roads, sidewalks, paths, and corridors), and landscaped areas. [A]ssessment of character-defining landscape features will focus on those features dating from 1923 to 1945 that retain their integrity and

work in conjunction to form a cohesive landscape. Although modernization and expansion efforts at the St. Cloud VA hospital have affected the historic integrity of the campus landscape, many character-defining landscape features [buildings, circulation system, and landscaped areas] have retained their historic integrity.

The buildings intended for patient care and treatment, as well as buildings that housed patient and staff support operations, such as dining and laundry, were constructed at the "front" of the campus. These buildings were generally oriented north/south and were in full view of those entering the property. Buildings intended for housing utilities were placed at the rear of the main hospital buildings and were therefore largely hidden from public view. Quarters for hospital staff were placed to the east and slightly apart from the main hospital.

Aesthetically, building placement within the St. Cloud VA campus was utilized to create a feeling of stateliness upon entering the facility. Visitors traveling down the long drive to the hospital's main building were greeted with a set of large, grand buildings that conveyed a sense of symmetry. This effect was mirrored in the addition of the three westernmost ward buildings which are located at the terminus of the road leading to the west. The more utilitarian structures are located at the rear of the campus.

Campus Circulation

The St. Cloud campus circulation system consists of roads, sidewalks, covered corridors, and paths. Many of the roads on the campus were designed to curve rather than change direction with right angles. This design feature was likely utilized to generate a smooth flow of traffic. The major disruptions to the historic feel and character of the campus include the route alteration to the service drive at the west end of the campus that severed the continuous nature of the drive, and the numerous parking lot additions. These [post-historic] parking lots do not reinforce the character or pattern of the original drives and serve to disrupt the flow of the original routes.

In stark contrast to the gracefully curving roads, the sidewalks are oriented almost entirely on east/west or north/south axes. In his history of the St. Cloud V.A. Hospital, Rotto states that patients were often required to move between buildings in organized, military-like columns.

[Historically] The Campus's clearly defined sidewalks with right angles offered precise and orderly routes from building to building. The angular [orthogonal] pattern of the sidewalks also created large, rectilinear yard areas . . . It appears that the primary purpose of the sidewalks was to provide access to the main front entrances of the buildings, as there are few sidewalks that lead to the rear entrances.

Covered corridors were an early design element of the campus and were designed to move patients between buildings in inclement weather. The corridors were built to reflect the brick structures and rooflines of the campus buildings. The routes of the corridors are angular, reflecting the angular routes of the sidewalks.

The only [in] formal pathways that exist on the campus are in the scenic park area north of the campus and adjacent to the Sauk River. The paths and related structures were created through a series of landscape projects that were undertaken by patients in the 1920s. The area is not represented on VA campus planning maps, but it is a well known feature of the campus. In contrast to the orderly campus sidewalks, the paths meander along the edge of the river and lead to several small, somewhat isolated sitting areas. While the sidewalk system functioned to move groups of patients in an orderly and efficient manner, the paths along the river were created for outdoor enjoyment and recreation, and as a therapeutic outlet for patients.

The tree-lined main entrance road to the St. Cloud VA is one of the most distinct visual features of the campus and contributes greatly to the stately feel upon entering the facility. Many of the campus roads were originally [tree] lined in the same manner, giving a strong sense of definition to the roadways. Numerous parking additions have impacted the tree-lined roadways once present on the campus. The east/west drive south of the administration building was once lined on both sides, but most of the trees on the north side have been removed to create space for parking lots.

Contributing and Non-contributing Buildings

The Multiple Property Documentation Form for the historic context of "United States Second Generation Veterans Hospitals" ((Spurlock, et al.) develops, in considerable detail, the context and defining characteristics of historically important VA campuses. The National Register nomination (Mollenhoff and Tupek) that was the basis of the 2012 NRHP listing, established the significance of St. Cloud VAHCS campus as an historic district. The nomination highlighted several features of the campus that should be regarded as "character-defining" in terms of masterplanning, including the cluster arrangement of ward buildings, the cross-axial configuration of circulation features, and gently sweeping curved drives at the perimeter.

"A wide H-shape was frequently used [for Georgian Colonial Revival buildings in the complex]. The set of buildings resembles many other V.A. Hospital stations in construction, functional layout, plan, elevations, and general approach to medical care design."

"The Georgian brick buildings are primarily two, and three stories (Building 1 peaks at four stories) in height and finished in common bond brick coursing. They are topped with slate hipped roofs and occasionally with slate gabled roofs [many of which have been subsequently replaced with substitute materials]. Two story engaged columns frame the entries of many of the patient buildings. Occasionally they support rich entablatures, slightly broken pediments, or dormered roofs. The architecture is highlighted by Georgian Colonial details, featuring soldier coursed brick bands, classical eave and cornice treatment, recessed arched windows, and gabled dormers with arched window openings. The windows, primarily six over six sash style, have flat brick heads. The single and double door entries are crowned with pediments, entablatures, or elliptical fan transoms."

While the original, standard interior plans of the Architectural Set of VA hospitals is the initial basis of its significance, only the exterior interpretation of that plan is presently significant. Since these medical centers were originally constructed (between the early 1920's and the immediate Post World War II period) the interiors have been renovated and remodeled repeatedly. As a result of these repeated changes to the interiors of the buildings the original fiber and significance of the interiors no longer exists."

Building List

Historic Buildings (includes those listed as contributing resources to the 2012 National Register of Historic Paces designation.) Dates and names listed are at time of construction.

1923 1924	Building 1 – Main Building Building 2 – Continued Treatment Infirmary building Building 3 – Disturbed Patient building Building 4 – Subsistence and Attendant's Quarters Building 5 – Warehouse Building 6 – Utility Shops Building 7 – Boiler House Building 13 – Transformer House Building 8 – Recreation Building Building 9 – Nurses' Quarters Building 10—Officers' Quarters Building 11 – Manager's Quarters Building 89 – Flagpole Building 32 – Garage
1926	Building 14 – Warehouse
1929	Building 28 – Neuropsychiatric Infirmary Building
1932	Building 29 – Continued Treatment Infirmary Building
1936	Building 48 – Acute infirmary Building
	Building 49 – Neuropsychiatric Infirmary Building
1941	Building 54—Garage
1943	Building 50 – Neuropsychiatric infirmary Building
	Building 51 – Neuropsychiatric infirmary Building
1948	Building 59 – Laundry

Non-Historic Buildings (includes those listed as non-contributing resources to the 2012 National Register of Historic Paces designation.) Dates and names listed are at time of construction

1958	Building 86 – Water Tower
1960	Building 87 – Pumphouse
1963	Building 88 – Chapel
1968	Building 91 – Pumphouse
1975	Building 92 – Recreation Pavilion
1977	Building 94 – Electric Meter Building
1983	Building 100 – Storage
1984	Building 97 – Generator Building
	Building 99 – Generator Building
	Building 105 - Storage
1985	Building 95 - Canteen
	Building 96 – Recreation Building
	Building 103 – Generator Building
1987	Building 106 – Game Farm Building
	Building 107 – Storage
1988	Building 104 – Logistic Storage
1990	Building 108 – IT Building and Pharmacy Intake
1992	Building 109 – Warehouse
2000	Building 110 – Storage
2001	Building 111 - Primary Care Clinic
2012	Building 112 – Generator Building
	Building 113 – Generator Building
2014	Building 114 – Generator Building
2015	Building 115 – Mental Health Building
	Building 116 – Rehabilitation Center
	Building 117 – Generator Building

2017	Building 118 - Kitchen
2018	T101 – Leased Building
2019	CT 100 – Leased Trailer

Under Construction

Building 119 – Parking Ramp Building 120 – Adult Day Health Care Building

Timeline

On May 4, 1922, a bill was put before the House of Representatives calling for an appropriation of \$12,000,000 for the construction of 12 Veterans hospitals. The appropriation was Public Act 194, also referred to as the second Langley Bill, and was approved by Congress on April 20, 1922. Local efforts to secure land near St. Cloud was led by a pledge drive in the summer of 1922 and raised upwards of \$60,000 for the acquisition of 310 acres. Deeds for the property, comprised of tracts owned by A.C. Cooper, E.P. Schwab, J.B. Murphy, and B. Lammerson, were obtained, and forwarded to the Veterans Bureau in September. The Consultants on Hospitalization interviewed numerous interested parties and in partnership with the Supervising Architect's Office of the Treasury developed standardized plans ("Report of the Consultants on Hospitalization Appointed by the Secretary of the Treasury to Provide Additional Hospital Facilities Under Public Act 384") for Veteran's hospital buildings. The initial 12 buildings of the St. Cloud campus were designed, and construction was supervised by the Department of the Navy's Bureau of Yards and Docks for the Veterans Bureau. Construction of the first hospital buildings was underway by the following summer.

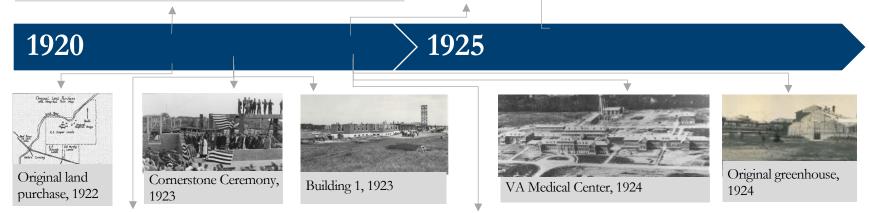


Barn, 1926



Boiler house, 1924

By February 1928, 336 patients were receiving treatment at the St. Cloud neuropsychiatric facility. The institution employed 115 people, including six medical officers, a dentist, thirteen nurses, a laboratorian, six occupational and physical therapists, a dietician, and forty-three attendants. The hospital's gross cost of operation the previous December was \$29,501.90. Between its opening in 1924 and July 1929, 47.5 percent of patients receiving treatment at the St. Cloud facility were discharged as cured, earning the institution the highest ranking among the Veterans Bureau's neuropsychiatric hospitals.



On September 25, 1923, the cornerstone was laid during a ceremony attended by a number of dignitaries, such as the State Legion Commander, the State Auxiliary President, State Commander of the Disabled American Veterans, President of the Disabled American Veterans Auxiliary, State Commander of the Veterans of Foreign Wars, and Congressman Harold Knutson of St. Cloud, among others. The St. Cloud facility was the first federal hospital for disabled Veterans to be constructed in the Veterans Bureau's tenth district. The Veterans hospital at St. Cloud was officially dedicated on September 17, 1924.

Dr. Hans Hansen, the hospital's first medical officer in charge, was hired in July 1924. Hansen was largely responsible for the development of the hospital's occupational therapy programs, most notably the hospital farm. The chief aim of the agricultural program was to teach practical skills from which the patients, including many that were from agricultural communities, could benefit upon their discharge from the facility. The program was highly successful providing hospital patients with both trade skills and locally produced food, including fresh garden crops and milk. The products of the farm operations were utilized in the hospital's kitchen, while the excess produce was sold at a slight profit. Patients were also engaged in landscaping the hospital grounds as a form of occupational therapy. Landscaping projects included the construction of gardens, arbors, grottoes, and pathways.

A bill presented before the Senate in February 1931 called for an appropriation of \$370,000 for the construction of an additional infirmary building on the St. Cloud campus. In April of that same year, Dr. Hansen received approval from Veterans Administration (VA) authorities in Washington, D.C., for the purchase of additional farmland and for the construction of two-story porches on the hospital's existing buildings. Approximately \$35,000 in federal funding was allocated in 1931 for the aforementioned real estate transaction and other improvements to the hospital campus, including a new greenhouse. VA records indicate that in addition to the 247-acre tract acquired in 1931, approximately 20 acres were purchased the previous year at a cost of \$3,671.25.

In August 1935, President Franklin D. Roosevelt authorized an appropriation of \$140,000 in Works Progress Administration (WPA) funds for improvements at the St. Cloud facility, including grounds repairs, construction of an additional spur track, painting, repairing sidewalks, construction of a tunnel between two of the hospital's buildings, construction of a garage, and the completion of a sewage system. Approximately one-eighth of the allotted funds had been spent by the end of the year, facilitating the employment of 102 WPA workers. That same year, Congress also allocated funds for the construction of additional ward facilities.



Gardens and grotto area near the river, 1936

Approximately \$10,000 was spent in 1939 on improvements to the hospital campus, including a hollow-tile silo. an addition to the station garage, additional landscaping in the area in front of the hospital, and a shed in which to manufacture concrete blocks.

1930

1935

By the end of 1932, forty-four buildings comprised the St. Cloud campus, with construction of the newest infirmary building nearing completion. That year, hospital employees reconstructed St. Cloud's first golf course, which had been located on the property prior to its acquisition for the Veterans' facility. Those interested in the project formed a club and went to work recreating the course's original greens and fairways.

The VA announced plans for the construction of two buildings with a combined capacity of approximately 300 beds in April 1936, and in July the contract for the new acute and infirmary wards was awarded to A.G. Wahl in the amount of \$458,766.

The St. Cloud contractor turned the buildings over to hospital director Dr. Hugo Mella in late 1937. The total cost of construction for the new facilities, which increased the total capacity of the institution to 1,050 beds, was \$649,414.



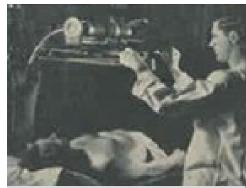
The granite scrap damn in the Sauk River. The reservoir behind the dam was used to form a smooth ice field from which sufficient ice was harvest in the winter to keep all summer in the station's cool houses. (1939).

Produced by patients employed in the facility's occupational therapy program, the concrete blocks were used in the construction of a new \$25,000 garage in 1941. Additions and alterations were made to the main kitchen and dining facilities that same year at an approximate cost of \$35,000.

The additional ward facilities were initially scheduled to be built in 1945, but due to a heightened influx of patients during World War II, the project was expedited. Plans for the construction of the infirmary buildings were confirmed in early 1943; however, erection of the administrative building annex (Resource 1, main building, 1923) was postponed due to the increased costs of construction during wartime.



Administration building on national hospital day, 1947



New X-ray unit installed, which increased the number of patients that could have been seen, 1949

1940

1945

In December 1942, the VA requested bids for the construction of two new infirmary buildings and an addition to the administrative building.

Building 50 and 51 were completed increasing the total beds to about 1300 beds in 1944.

In 1945, the farming operation at the medical center did so well during World War 2 that about \$8000 was sent back Central Office.

Purchase of greens and gold course equipment which included the seed for fairways and mowers. The total cost was \$7,645. Also, the Social Work Service was activated with Carl G. Pettijohn as the Chief in 1946.



Laundry building completed, 1949



The Veteran's Hospital Drum and Bugle Corps regularly participated in the St. Cloud Memorial Day parade, and in the other area community celebrations and parades. Black banner muffling the drums for a parade in 1956.



Bowling alley, 1957.

In July 1959, the General Services Administration (GSA) announced plans to sell 182 acres at public auction. That same month, an ordinance annexing the hospital reservation was approved by the St. Cloud City Council in July 1959, increasing the population of the city by 1,300.

1950

1955

There was an increase in bed capacity from 1924 to 1951. In October of 1924. There were 325 beds in buildings 1, 2, and 3. In December of 1929 there were 494 beds in total due to the addition of building 28. In March of 1933, there were 755 beds in total due to the addition of building 29. In December of 1937, there were 1046 beds in total due to the addition of buildings 48 and 49. In February of 1940, there were 1059 beds in total due to the alteration to building 3. In November of 1944, there were 1387 beds due to the addition of buildings 50 and 51. There was a decrease in beds in July of July 27 to 1382 beds because a space in building 1 was being used for the Department of Psychology. There was a decrease in beds July of 1951 due to the reduction in Ward 1-D.

Two hundred and seventy-five acres of the hospital reservation were declared excess to VA needs in January 1956, effectively reducing the area of the reservation to 302 acres.



Set-up of instruments for a lobotomy. (1958)

Psychology, Nursing and Occupational Therapy created a new behavior therapy program called Project target. The project was geared towards regressed geriatric patients that needed constructive change. Poker chips were used to purchase items. The program has proven to be effective molders of mature personality patterns, 1960.



The evergreens serve as majestic sentinels at the Eighth Street entrance, 1965



Louis F. David, Chief of Engineering Service, cuts the ribbon to open the new east road. Note: Apollo High School in the background, 1969.

1960

1965

Closed-circuit television facilities was used for patient therapy, education, training, and research. Equipment that were available: video switcher, audio mixer, control area, cameras, video teape recorders, microphones, and other essential equipment, 1960



Farm and cattle auction, 1965.

In January 1967, the VA approved the installation of a forty-four bed nursing home care unit in one of the hospital's psychiatric units. The project was funded through a congressional appropriation of \$85,000. The GSA announced plans to sell an additional 9 acres of excess property to the City of St. Cloud for \$3,510 in November 1968.



Installation of warning lights on the tractors and snow plow trucks, 1968.



VA Medical Center garden, circa 1970

In 1974, The laboratory moved to the first floor of building one. The Surgery Clinic was remolded.



50th Anniversary. The Golden Anniversary parade through the Veterans Hospital grounds, 1974.

In 1978, quality assurance begins. The ACOS/Education office was established. The redesignation of field activities from VA Hospital to VA Medical Center.

The Intensive Care, Respirator Care, and Pulmonary Function was built in 1977

1970

1975



The hospital's self-sufficiency by the existence of a fire department. The international truck on the left and the older Howe which it was replacing on the right. When fire protection was assumed by the city of St. Cloud in 1972, the hospital discontinued its own fire department.



Hospital in the spring of 1974

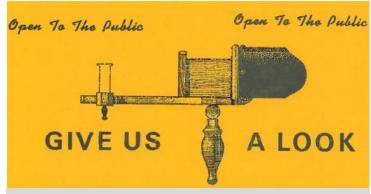
In 1976, The Mental Hygiene Clinic was established. The library was remolded. The rainbow classes were built. Bed counts reduced from 1,002 to 845. Surgery Unit closed.

The closure of brief treatment unit in building 3 in 1979.



Donation of music instruments from the Veterans of Foreign Wars Auxiliary Department of Minnesota, 1981 Patient TV systems were enlarged. Compressed work schedules began also known as flextime, 1982

> Locks were replaced and new keys were issued, 1983



Flea market and white elephant sale. The fund-raising event for raising money for the VA St. Cloud 60th anniversary celebration, 1984

1980

1985

Building 96 was created, which was the opening of the new recreation building. The nursing stations were remodeled. A new entrance from 8th street was created, 1980



The Minnesota American Legion donated this van, 1984.

Construction begins on the Canteen. Entrance of building 1 was remodeled. Building 29-1 treatment unit closed, 1984



VA float constructed for the Wheels, Wings, and Water Festival Parade, 1987

Groundbreaking ceremony for the expansion project of ambulatory care, 1996

Primary Care model initiation for medicine. Also, the telephone triage program was established, 1995

The Intensive Care Unit was discontinued, 1990 The mobile laboratory initiative was established for the Pathology and Laboratory Medicine, 1994

Opened a newly remodeled specialty clinics on the second floor of building 1, 1998

A new outpatient clinic for Medicine Primary Care. The outpatient clinic was increased from 9,087 sq ft to 12, 288 sq ft, 1997



Opening of Community Based Outpatient Clinic, Brainerd. (1999)

1990

1995

Sweat lodge established for Native American ceremonies to provide another form of spiritual healing and cleansing, 1990 Mental and Behavior Health outpatient clinic remodeled, 1996

SMOKING OR VAPING IN THIS AREA

St. Cloud VAMC becomes a "smoke-free" medical center, 1997

Specialty Care Clinics remodeled, 1998



CPRS (Computerized Patient Record System) enhances the electronic medical record, 1999

The first decade of the 21st Century saw tremendous growth and expansion, as patient workload increased from 17,159 unique Veterans in 2001 to 37,027 in 2010. To meet this demand, Community Based Outpatient Clinics aligned under the St. Cloud VA were opened in Brainerd (1999), Montevideo (2002), and Alexandria (2009). To further meet the increased demand for services, the focus of organizational planning centered on adapting and enlarging the infrastructure of the medical center while simultaneously modernizing and expanding the health care services needed by Veterans.



Al Loehr Veterans and Community Apartments. Housing offered to Veterans. (2008)



Opening of Community Based Outpatient Clinic, Alexandria. (2009)

2000

2005



Opening of Community Based Outpatient Clinic, Montevideo. (2002)



A Groundbreaking Ceremony was held for the new Primary Care Expansion in October of 2004.

The new Urgent Care Clinic opened in 2008, which serves veterans who have acute medical illnesses.



New Lab (2009)

Based on the objective in 2010, the Surgical and Specialty Care spaces were renovated on the second floor of Building 1.



Wind Turbine, 2011

In 2018, a new special dementia treatment was established within a recovery program. The recovery program was veterans who had dementia and behavioral issues, which provided them with support and tools to use at home.

As 2014 ended, the design to reconfigure Buildings 9 and 28 and add 23 beds to the Residential Rehabilitation and Treatment Program was being finalized; a project was awarded to build a new Adult Day Health Care Building; and a plan to build a 35-unit housing project for homeless Veterans using leased VA property was nearing finalization. Now listed on the National Register of Historic Places, the St. Cloud VA Medical Center has served Veterans for 90 years and is postured to continue serving them for the next 90 years and beyond.

Sweat lodge program returns to the St. Cloud VA, 2019

2010

2015

In 2011, a new state-of-the-art Ambulatory Surgery Center was opened, and the former Cannery, Building 57, was transformed into a Vocational Resources Laboratory. In 2012, the planned renovation of all Community Living Center Buildings 48, 49, 50 and 51.

In February 2014, Audiology Clinic expansion was opened in Building 29. In April, the construction began on a new kitchen. The space that the kitchen formerly occupied was used for the expansion of the Primary Care Clinic. In May 2014, the expansion of the Pharmacy was completed. In July, a walking path on the front lawn was completed.

In April 2013, construction of a new 19,000 sq. ft Mental Health Building began. In September, the first MRI services were offered. In December, a groundbreaking ceremony was held for the start commencement of construction of a new 19,000 sq. ft Rehabilitation Building.



Reusable surgical containers instead of non-recyclable blue plastic. In 2017, STVHS received the Environmental Stewardship in Healthcare.

The best feasible option decided in 2019 to remove the wind turbine following a full study.



A Veteran assembling a model car. The Recreation Therapy department is offering numerous creative and flexible recreation and leisure activities. (2020)

2020



New Women's Health Clinic, 2021

Historic Structures Today



Building 1 – Main Building (1923): The only three-story building on campus serves as the signature facade of the St. Cloud VA. Building 1 currently serves as the main entrance and houses primary and specialty medicine clinics, urgent care clinic, laboratory and imaging services, respiratory therapy, and eligibility offices. The interior was extensively remodeled in 1997 to support a shift from inpatient outpatient care. In 2004 an annex was added north and west of the original building to provide more primary care space. In 2010 the east wing first floor was remodeled to expand the Urgent Care Center. In 2011 a second floor to the annex was added to house the Ambulatory Surgery Center. The third-floor houses surgical and specialty care offices. **Building 2 – Residential** Quarters (1923): Building 2 provides living space for Veterans' resident in the Mental Health Residential Rehabilitation Treatment Program. Veterans live here for several weeks at a time while enrolled in this voluntary outpatient program. Programs for alcoholism, drug addiction and post-traumatic stress disorder have been expanded in recent years, along with attention to environmental hazards, and the residential setting is a key component of recovery programs.





Building 3 (1923): The first floor houses the Dental Clinic and the second floor houses the Facilities Management offices.



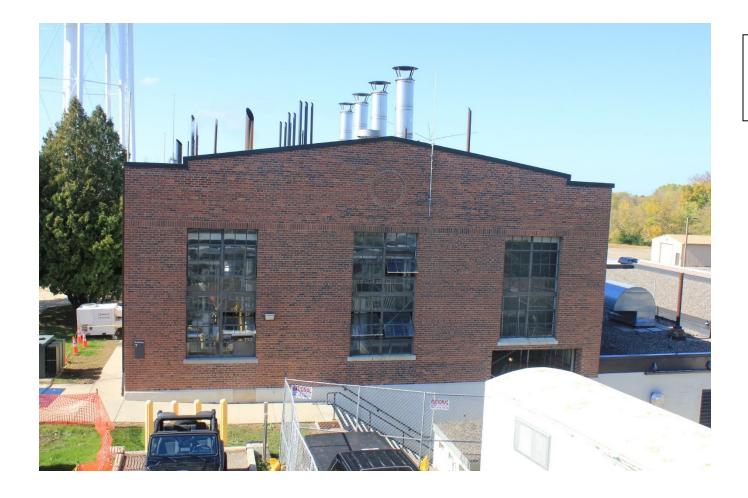
Building 4 (1923): The first floor houses the pharmacy waiting area, a primary care clinic and the nutrition clinic, while the second floor houses administrative offices. At least three additions were made to the center and east wings as the hospital's kitchen and dining operations increased in size.



Building 5 (1923): This one story building houses the Pharmacy.



Building 6 (1923): This one story building houses Facilities Management workshops.



Building 7 (1923): This one story building houses the boiler plant.



Building 8 (1924): This building houses the auditorium and recreation spaces, including a 4-lane bowling alley in the basement.



Building 9 (1923): This two story building houses Mental Health service's administrative spaces and the VA Police station.



Building 10 (1924): This two story building houses administrative offices.



Building 11 (1924): This two story building houses administrative offices.

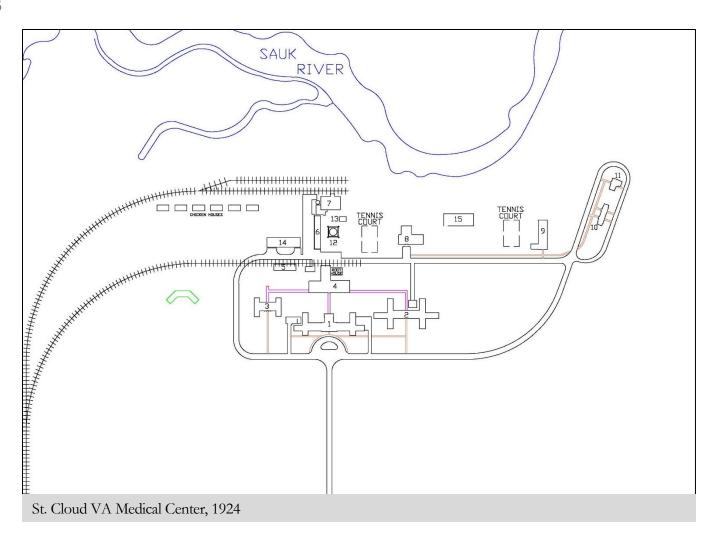


Building 13 (1923): This one story building houses facilities management offices.



Building 14 (1924): This one story building serves as the primary warehouse.

Maps





St. Cloud VA Medical Center, 2021

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