



The Price of Freedom...

A Brief History of the Chillicothe VA Medical Center

“To care for him who shall have borne the battle,
and for his widow and his orphan” - A. Lincoln

When entering the campus of the Chillicothe VA Medical Center, the first thing one notices is its natural beauty. Situated on 308 acres of what was once known as Camp Sherman during World War I, is a system of care for our Nation's Veterans. Among the beautiful setting are 72 buildings teeming with over 1,100 employees serving a Veteran population base of approximately 200,000, primarily in southeastern and south central Ohio. Acute psychiatric services, primary and secondary medical services, and a wide range of nursing home care services are the major functions and levels of care for the Medical Center. The center also serves as a chronic mental health referral center for the other medical centers in Ohio and surrounding states. But beyond its beautiful grounds and operational mission, the medical center holds a unique bond with the neighboring community, serving as a living link to its past, present, and future.

Chillicothe and the Scioto River Valley



Ohio Statehouse, c. 1803
Demolished 1852
Chillicothe, Ohio

From about 200 BC to AD 500, the Ohio River Valley was a focal point of prehistoric Hopewell culture, a broad network of beliefs and practices among different Native American groups over a large portion of eastern North America. The culture is characterized by the construction of enclosures made of earthen walls, often built in geometric patterns, and mounds of various shapes. Visible remnants of Hopewell culture are concentrated in the Scioto River valley near present day Chillicothe, Ohio.

In 1787, Congress set up the Northwest Territory, which included land in the current states of Ohio, Michigan, Indiana, Illinois, Wisconsin and parts of Minnesota. The portion of this territory to become Ross County was part of a grant given to Virginia military Veterans of the Revolutionary War. In 1796, troops led by General Anthony Wayne defeated the Indians at the battle of Fallen Timbers and forced them to sign the Treaty of Greenville, opening Ohio for settlement.

Also in 1796, Nathaniel Massie founded Chillicothe, a name derived originally from the Shawnee Indian word meaning “principal town.” By the following year, Massie’s offer of free “in-lots” and “out-lots” to the first 100 settlers had been fulfilled. From that date in history, Chillicothe began to grow and prosper, attracting prominent men of culture and vision to move west and make their mark.

Among these men were Ohio’s first governor, Edward Tiffin and Thomas Worthington, the “Father of Ohio Statehood.” The U.S. Congress designated Chillicothe as capital of the “eastern section” of the Northwest Territory in 1800. Two years later, the State Constitutional Convention was held in Chillicothe and in 1803, when Ohio entered the Union, Chillicothe became the first state capital, which later was moved to Columbus (1816).

The construction of the Ohio and the Erie Canals in 1831 made Chillicothe a major canal port and offered Ross County farmers adequate shipping of their crops to market.

The canal system, combined with the construction of the Marietta and Cincinnati Railroad, attracted many new settlers from Pennsylvania, Delaware and Maryland. One of these settlers was Colonel Daniel Mead, who purchased a papermaking plant in 1890 eventually becoming the nationally known Mead Corporation.

World War I and Camp Sherman

In April 1917, the United States Congress passed a declaration of war and, though ill prepared, the US soon entered World War I against Germany and her allies. Military training camps were needed and on June 8, 1917, Chillicothe, Ohio was selected as the site for training soldiers from Western Pennsylvania, West Virginia, and Ohio. A site north of town was selected because of its healthy climate, plentiful food and water supplies, transportation network, and extensive level terrain. The camp was named in honor of Civil War General William Tecumseh Sherman who hailed from nearby Lancaster. It would become the third largest training center in the United States at that time.

This area had a long history of military service as it had also served as the site of Camp Bull, one of the principal points of mobilization during the War of 1812, and the home of several hundred British prisoners of war until after the war was over. It was also a point of mobilization in the Mexican, Civil, and Spanish American Wars.

On June 8, the Scioto Gazette reported:

"PETERSBURG, VA. AND CHILLICOTHE, OHIO WERE APPROVED TODAY AS SITES FOR CANTONMENTS FOR THE SELECTIVE CONSCRIPTION ARMY, MAKING UP SEVEN OF THE SIXTEEN SITES TO HAVE BEEN DETERMINED UPON."

The land set aside as the staging area included the areas on which presently reside the VA Medical Center, Ross Correctional Camp and Institute, the Hopewell Culture Historical National Park, the Wildlife Refuge and the Chillicothe Correctional Institute. Construction began on July 1, 1917 with the first draftees arriving September 5.

When completed, the camp included over 2,000 buildings, including the camp hospital complex, which in itself contained over 50 buildings with a capacity of over 1,800 patients. The impact on the community was tremendous as Chillicothe quickly grew from a population of 16,000 to over 60,000. Over 40,000 soldiers were stationed at Camp Sherman.

On July 2, 1918, the first prisoners of war arrived in the form of one hundred German crew members of the Crown Prince Wilhelm, a sunken U-boat, and were placed in a stockade. As more prisoners arrived, plans were made to move them to the newly acquired Camp Extension but the war ended before this occurred. The Armistice was signed on November 11, 1918 and five days later, the Army announced its plans to discharge 12,000 men from Camp Sherman. All work on the Camp Extension was halted and the 40th Infantry was given the assignment of maintaining the camp as part of the peacetime army.



Doughboys in action
Camp Sherman, Chillicothe, Ohio

A Legacy of Care for Veterans

Services have been provided to Veterans and those who have served in military service since the early days of this country. In 1636 the Pilgrims of Plymouth enacted a law which provided that *“if any man shalbee sent forth as a souldier and shall return maimed, hee shalbee maintained competently by the collnie during his life.”* The concept of service earned through service has long been part of the American consciousness. It is for this reason that the first U.S. Congress in 1789 passed a law to provide pensions to disabled Veterans and their dependents. In 1811 the Federal Government provided the first domiciliary and medical facility for Veterans. Congress in Philadelphia authorized the U.S. Naval Home as a “permanent asylum for disabled and decrepit Navy officers, seamen and Marines.”

In 1818, the Secretary of War assumed the responsibility of administering Veterans programs. In 1833, the program was assigned to the Bureau of Pensions. Sixteen years later, this activity was moved from the War Department to the Department of the Interior. It was not until 1833 that the home was first occupied. A separate hospital building known as the Philadelphia Naval Hospital was authorized in 1863. Congress authorized the US Soldier’s and Airmen’s home for disabled and invalid soldiers in 1851. During this period there were other agencies providing Veterans service. The National Home for Disabled Volunteer Soldiers, founded in 1866, provided domiciliary, hospital and medical care for disabled Veterans. The Public Health Service, preceded by Marine Hospitals in 1798, provided physical examinations to Veterans

The War Between the States provided impetus for a study of the medical needs of members of the military. In 1861, the Secretary of War appointed a Sanitary Commission to study the medical and hospital problems of the Union armies. Most people associate a federal Veterans system with President Lincoln, who in the moving conclusion of his second inaugural address, said, “With malice toward none; with charity for all; with firmness in the right, as God gives us to see the right; let us strive on to finish the work we are in; to bind up the nation’s wounds; to care for him who shall have borne the battle and for his widow, and his orphan -- to do all which may achieve and cherish a just and a lasting peace, among ourselves, and with all nations.”



Ward Science, Base Hospital, c. 1918
Camp Sherman, Chillicothe, Ohio

At the end of the war, the number of disabled Veterans and those who needed other support was so large, Congress established the National Asylum for Disabled Volunteer Soldiers in 1865. President Lincoln signed the legislation just six weeks before his assassination. In 1873 the word “Home” was substituted for “Asylum” and the organization, with its individual homes known as branches, provided domiciliary, hospital, and medical care. Eventually, there were 11 National Home branches across the country, which were initially intended only for Union Veterans who suffered economic distress from disabilities incurred in the Civil War. Later, they were opened to all Veterans suffering from disability from any war. The medical care offered in the National Homes was largely infirmary level, but by 1930 it had risen to an accredited hospital level.

In September 1914, the United States Congress created a Bureau of War Risk Insurance under the jurisdiction of the Treasury Department. The bureau insured US ships and cargoes against the risks created by mines, submarines, and surface warships during World War I. When America entered the war in 1917, a new system of Veterans’ benefits included disability compensation, insurance for servicemen and Veterans, a family allotment program for servicemen, and vocational rehabilitation for the disabled. The Bureau of War Risk Insurance administered all of the benefit programs except the vocational rehabilitation for the disabled. The Public Health Service provided physical examinations to Veterans applying for compensation and vocational training, as well as medical and hospital care.



New recruits during drill, c. 1917
Camp Sherman, Chillicothe, Ohio



Construction of the Veterans Bureau Hospital, Camp Sherman O., July 3, 1923
No. 14, Hathaway Art Studio, Chillicothe, Ohio

The Veterans Bureau

In December 1918, as the war injured started arriving at the Camp Sherman Hospital, group and casualty companies were formed. The convalescent soldiers maintained the vegetable farm, the cattle, the horses, and the mules. The government quickly realized that some of the injured would require indefinite hospital care. President Warren G. Harding appointed a commission to study Veterans' needs. The commission recommended \$35 million be set aside for hospital construction – enough for about 50 hospitals. The Veterans Bureau quickly made plans for a permanent Veterans Hospital on the site of the Camp Sherman Extension. They also created a Training School with instructors conducting classes in agricultural activities.

In 1921 Congress established the United States Veterans' Bureau which took over the responsibilities of the Bureau of War Risk Insurance, the vocational educational program for Veterans, and the Public Health Service programs that had to do with physical examinations and care and treatment of Veterans. The Public Health Service hospitals serving Veterans were assigned to the new Veterans' Bureau in 1922. Even with these changes, there were still three agencies that were involved in administering Veterans' benefits – the Veterans' Bureau, the Bureau of Pensions of the Department of the Interior, and the National Homes for Disabled Volunteer Soldiers.

The first Director of the Veterans' Bureau, appointed by President Harding, was Charles R. Forbes, formerly Director of the War Risk Insurance Bureau. With the appropriation of acquisition and construction funds, the Bureau, under Forbes' leadership, initiated the beginnings of a massive new construction program to replace the “deplorable, absolutely deplorable” conditions in “many cantonments” which he characterized as “all fire hazards,” and “wooden shacks.” Chillicothe, Ohio would be the site of the first Veterans' Bureau operated hospital.

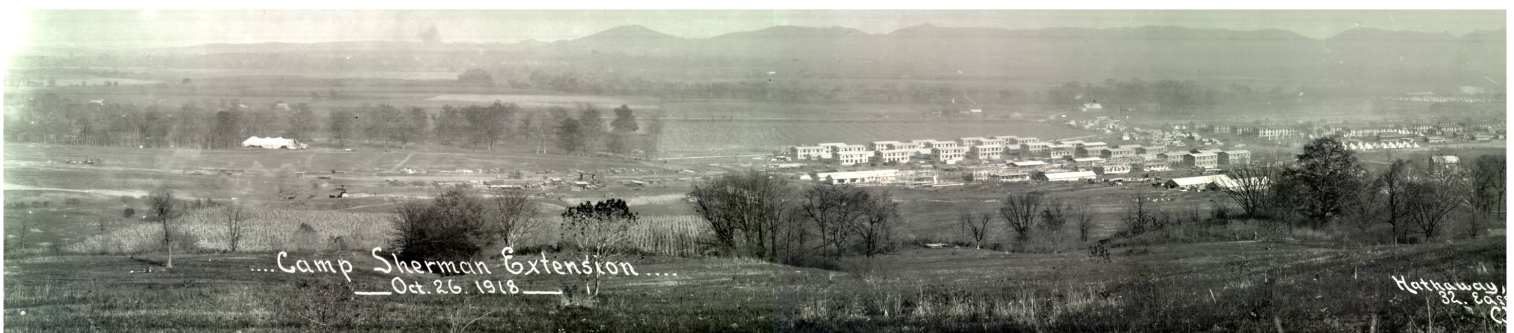
As a result of World War I, the need presented itself for a great amount of research into the diagnosis and treatment of patients suffering with one or more of the many classifications of mental diseases and Chillicothe became one of the prototype sites for the categories of patients for whom Forbes felt segregation was appropriate. VA neuro-psychiatric hospitals were designed as campus-style sites to provide one or more buildings for the exclusive care of each type of patient thus permitting assignment of duties, recreation, etc., by each type of patient together with such specialized treatment as would be required.



Such facilities, based upon the bed levels established, required a certain number of “hospital” beds in relation to controlled access buildings, intermediate stage buildings and low security buildings. Medical and surgical patients required a mix of acute (serious condition) versus convalescent buildings, while the treatment of TB required more long-term buildings and no security. These were supplemented by the appropriate administrative buildings, dining halls and other support facilities such as recreation halls, chapels, engineering shops, boiler plants and staff housing. The actual structure for each type of building, down to the floor plans for stairways and elevators, was standardized. The hospital buildings originally had multiple-bed wards, large day rooms and porches. The selection of sites was based upon a number of factors. The most important included:

- ☛ Demographics - The nationwide distribution of eligible Veterans in need of care and the type of care needed compared to the availability of existing beds.
- ☛ Type of Facility - General policy at this time called for the location of neuro-psychiatric and TB hospitals (long term care facilities) on large tracts of land away from major urban centers. General medical and surgical hospitals (acute care facilities) were to be located in or near major urban centers on less extensive parcels of land.
- ☛ Availability of Federal Lands - The transfer of existing federal lands between agencies and the transfer of facilities with structures suitable for or adaptable to medical care use avoided acquisition and some construction costs. The transfer of military posts slated for abandonment in the post World War I period, retained a federal presence in the areas and avoided the otherwise severe economic impacts on the local communities.
- ☛ Local Initiatives - Local communities, state governments and citizens’ organizations supported requests for the location of a Veterans hospital in a specific location with offers to donate land, funds, existing facilities or facilities under construction.

In 1923, Forbes was replaced as Director of the Veterans Bureau by General Frank T. Hines, a World War I Veteran of impeccable reputation who remained as Director until the creation of the Veterans Administration in 1930, when he became its first Administrator.



Camp Sherman Extension, October 26, 1918
Hathaway Art Studio, Chillicothe, Ohio

The Chillicothe Veterans Hospital



Dr. William Dobson
Medical Officer in Charge
Veteran's Hospital No. 97

Within four years after the establishment of Camp Sherman, the land had been assigned to the newly formed Veterans' Bureau. The land included 4,733 acres. Through the years the land was transferred to other departments and individuals, so that now the site contains 307 acres. Several buildings were also transferred to the Veterans' Bureau from the Army at the time of the transfer. Building T41, an Engineering storage building; Building T42, a Rehabilitation Medicine storage building; 179, the baling shed; and Building 60, Recreation Building (now called the Mace House) were four such buildings. (Buildings T41, T42 and 179 are now used for storage and the Mace House is part museum, part training center.) In 1923, Buildings 1 through 22 were constructed. By June 1, 1924, the hospital was completed and ready for occupancy. It had cost 2.5 million dollars to build and had a bed capacity of 452. The first patient was admitted on June 16, 1924 and came from Columbus.

The first medical officer was Dr. William Dobson. There were 24 patients on dedication day, July 9, 1924. The first patients had been transferred from the old Camp Sherman Hospital (Barracks H) which was in the vicinity of the Chillicothe Correctional Institution (CCI) housing reservation. Later in the month, patients were also transferred from Hospital 86 at Sherman Tech; these patients were mostly surgical patients. (Sherman Tech was the vocational school established after the war by the Veterans' Bureau).

Communication was difficult at first, as there were no phones on the hospital grounds. Staff members were transported to work in "car" pools provided by the Red Cross ambulances. The riders had to hang onto the straps for dear life as the ambulances did not have rear doors.



Bird's Eye View of Veterans Hospital
Chillicothe, Ohio

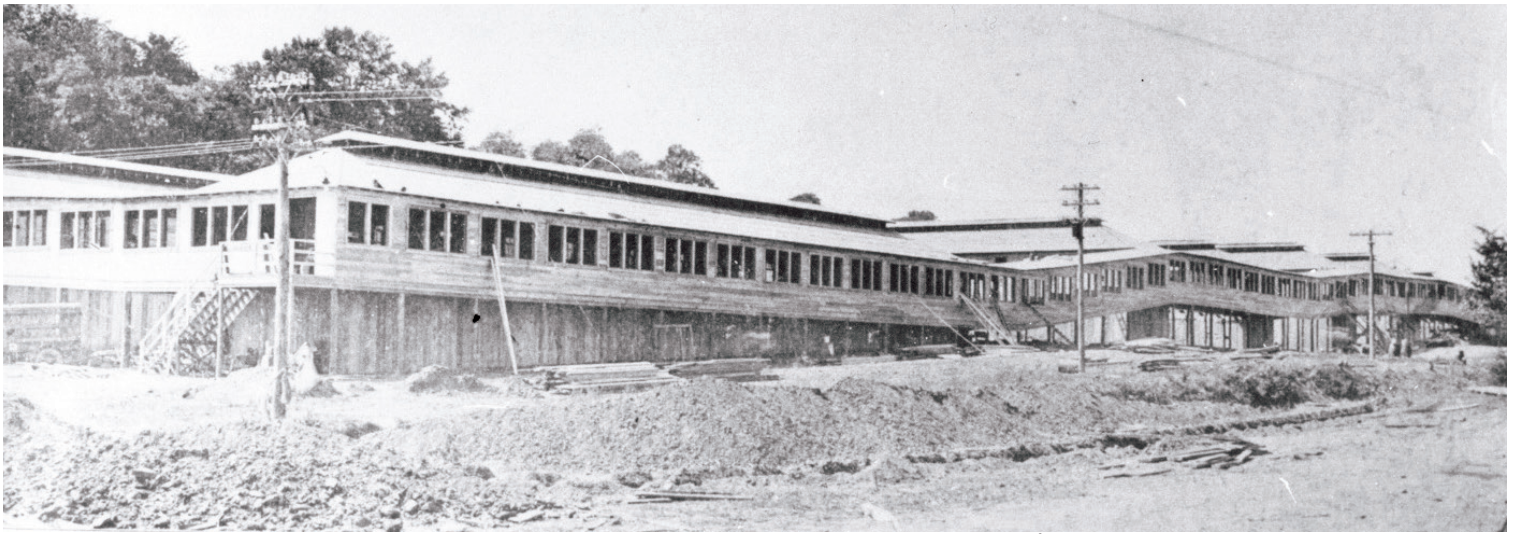
By 1925, Senior Medical Officer in Charge, Dr. George A. Rowland informed the Chillicothe News-Advertiser that the hospital had performed 170 surgical operations, made 550 Eye, Ear, Nose and Throat examinations, and conducted 2,844 neuro-psychiatric examinations. The cost of operations for 1925 was \$777,701.56. There were 267 employees, including part-time employees. The Medical Staff consisted of the Medical Officer in Charge, nine full-time and five part-time physicians. Other accomplishments in 1925 included:

- ☛ remodeling the main road to the hospital and building a new road to the garage
- ☛ installing radio receiving apparatus in each ward
- ☛ installing wiring for fans and desk lights throughout the Administration Building
- ☛ installing soap making equipment
- ☛ erecting two corn cribs with a capacity of 10,000 bushels of corn
- ☛ remodeling the old YMCA building for occupational therapy purposes
- ☛ purchasing 9 teams of mules for farm work
- ☛ removing concrete bases and filling of trenches left by the War Department
- ☛ transplanting approximately 600 fruit trees for the beginning of an orchard
- ☛ organizing a band, orchestra, and choir composed of employees and patients
- ☛ enlarging the library and installing a librarian to stimulate patients' interest along these lines
- ☛ installing a consolidated morning sick report

For many years the Chillicothe VA Hospital operated a farm and produced much of the foodstuffs for the patients. In the same letter to the Chillicothe News-Advertiser, Dr. Rowland noted that the hospital had raised and canned over 14,000 gallons of food products during the past season and had also raised over 100 head of hogs. The hospital also had a herd of about 80 sheep, a flock of 1,500 chickens, and a dairy herd of 98 cattle.



Camp Sherman, Chillicothe, Ohio
F.E. Fuller, September 22, 1917, Columbus, Ohio



Barracks of Medical Corps, Camp Sherman, c. 1917
Chillicothe, Ohio



Construction of the Veterans Bureau Hospital, c. 1923
Hathaway Art Studio, Chillicothe, Ohio



The Veterans Administration

VAMC Chillicothe Construction Dates	
Building	Date
1	1923
2	1923
4	1923
5	1923
6	1923
8	1923
9	1923
10	1923
11	1923
18	1923
24	1929
25	1929
26	1932
27	1932
28	1932
29	1932
30	1938
31	1939
35	1939
210	1945
211	1945
212	1945

Congress established the Veterans Administration on July 21, 1930 to “consolidate and coordinate government activities affecting war Veterans.” The Bureaus and the Home were absorbed by the newly created agency. Brigadier General Frank T. Hines, who had directed the Veterans Bureau for seven years, was named as the first Administrator, a job he held until 1945. At the time of the creation of the VA, there were about 4.7 million Veterans nationwide. Initially, the VA had a staff of 31,500 and 54 hospitals. Between 1931 and 1941 the number of VA hospitals increased from 64 to 91, and bed capacity rose from 33,669 to 61,849. Special training programs for physicians and nurses were active, and Dr. Charles Griffith, the medical director from 1931 to 1945, believed in and supported active medical research. At the end of World War II, a new, and much larger and vocal body of Veterans pressed for the replacement of the World War I cadre of leadership within the agency by representatives of “their” war. Hines was followed by the “G.I. General,” Omar Bradley.

During the late 1920s and early 1930s, new buildings were added and the bed capacity increased. In 1931, Dr. Rowland transferred to the Veterans’ Bureau in Washington. In March 1931 the Columbus Dispatch noted that since opening its doors in 1924, the hospital had “handled 3,479 patients, of whom 2,825 have been discharged.” The capacity of the hospital was 640 patients and there were 320 “attendants and employees of various kinds.” The reporter was impressed with the occupation therapy division and commented that “Mops and brooms are made by the Veterans at Chillicothe for all of the other 50 Veterans hospitals in the United States. 34 tons of mop cotton were used the past year in this work.”

In 1932, six buildings were constructed or remodeled. Two attendants’ buildings and two patient buildings (Buildings 26, 27, 28, 29) were constructed, and the dining hall, kitchen, and recreation buildings were remodeled. The new bakery wing of the kitchen had an electric oven with the capacity to bake 400 one-pound loaves an hour. Electrical ice cream equipment was also housed in the wing. The recreation hall now had an auditorium with seating for 700, “with a small balcony on either side of the projection booth from which ‘talking pictures’ are shown.”

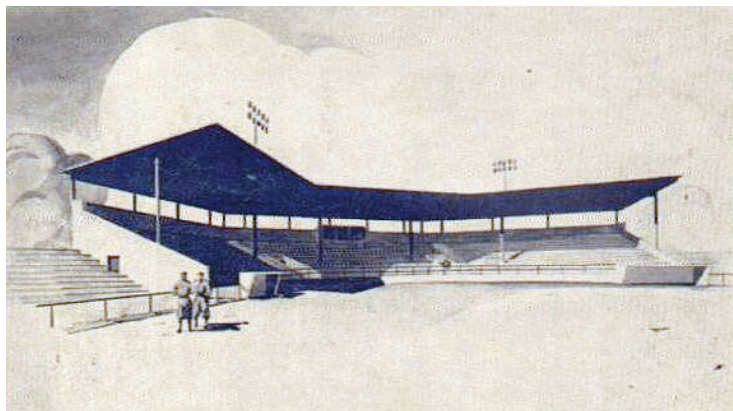
The construction and remodeling changes over the years made headlines often in local papers. By 1937 there were pictures and articles about the new “large circle.” Buildings 26 and 27 had been built in 1932, and in 1937, Building 30 was well underway. It would bring the bed capacity to 1,106. Even with a capacity of 944 patients, the daily census had been running 1,021. At that time, if all the buildings on the grounds were counted, including the sheds and dairy barns, there were 246 buildings connected with the institution. There were 9 ward surgeons, and a clinical director who was chief of the medical staff; 30 nurses including a chief nurse, all registered graduate nurses, and 406 employees including part-time and temporary employees.

By 1941, the Chillicothe VA was the fifth largest of the 29 neuro-psychiatric hospitals that had been established since World War I. There were 12 patient care buildings providing 1,522 beds. The staff included 13 physicians, 2 dentists, 54 nurses, 264 attendants, 1 recreational aide, 1 pharmacist, and 1 X-ray technician.

An annual community event was the celebration of Hospital Day at the VA and one of the largest celebrations was held on May 1, 1955, when the Blue Star Mothers Memorial Stadium was dedicated. According to Chillicothe Gazette headlines, this Hospital Day attracted 25,000 people from many parts of Ohio. Among those attending were the Honorable Frank J. Lausche, Governor of Ohio; the Honorable Harvey Higley, VA Administrator; Mrs. Erma Hoffman, National President, Blue Star Mothers of America, and Chillicothe Mayor Burton E. Stevenson.

Many program and construction changes have occurred through the years. In 1959 a family care program, which provided for the therapeutic transition from the hospital setting to living in the community, was initiated. Social Work Service built what is still one of the largest community residential care programs in the VA system and the Community Nursing Home Care Program (CNCH) was started in 1963 as yet another community placement program. In 1992, the program diversified with emphasis on other alternatives to hospitalization including home health care and adult day health care.

Two significant additions were made to the medical center in 1960. The Therapeutic Exercise Clinic (Building 247) had been completed at a cost of \$550,000. It was “designed to meet the specialized needs of neuro-psychiatric patients” and featured “a gymnasium measuring 76 x 112 feet as well as a natatorium 35 x 60 feet.” The gym is still used today for the fitness needs of Veterans and staff. Also in 1960, Mrs. Louis Lengfeld, National President of United Voluntary Services, opened the first tee of the new golf course. The 9-hole, par 36 golf course covered 3,131 yards and was designed by local golfer, Ted Cox. Appropriated funding for VA golf courses was cut off in 1996, but through a cooperative agreement, the South Central Ohio Homeless Veterans Committee (SCOHVC) leases the golf course, overseeing general management, collecting fees, setting prices, etc. using patients from the Veterans’ Industries Compensated Work Therapy Program (CWT) in the Mental Health Care Line as the work force to maintain the grounds. Veterans work regular schedules, receive an hourly wage, and are expected to attend all appointments and classes. Payment is made by SCOHVC through the CWT Program. After gaining job experience and proving reliability, the Veterans work with Vocational Rehabilitation Counselors to find permanent jobs. The golf course was renamed the Forrest E. Everhart Memorial Golf Course in 1999. Mr. Everhart, a resident of Bainbridge, Ohio, received the Congressional Medal of Honor for actions during World War II.



Ohio Blue Star Mothers Memorial Stadium, c. 1955
Chillicothe, Ohio

Prior to October 1962, religious services were held in the recreation hall. Dedication of the All Faiths Chapel was held in 1963. The Chapel seats 400 persons, including an area for 20 wheelchairs. It also houses offices, study rooms and a devotional. A major modern luxury at the time – it was also air-conditioned! In April 1995, the Chapel was renamed the Joseph E. Quinlan Memorial All Faiths Chapel. Father Quinlan dedicated 54 years of his life ministering to the spiritual needs of others. Over 35 of those years were spent here at the Chillicothe VA, inspiring and helping Veterans, employees and community members alike.

By 1965, Chillicothe was the third largest neuro-psychiatric hospital in the VA system, with 2080 authorized beds and an average daily census of 1930. The cost per day of caring for a patient was \$14.12 and 6,000 meals were prepared daily.

Nursing home care continued to grow in the 1960s and 70s. In 1966, a \$259,000 renovation to Building 2 created a 107-bed Nursing Home Care Unit (NHCU). A 99-bed NHCU was dedicated in 1972. Remodeling had cost \$297,000.

Continuing a legacy that began with returning WWI Veterans receiving agricultural classes at the U.S. Veterans Bureau Training School at Camp Sherman, the medical center has always emphasized vocational planning and rehabilitation. The Hospital Industries Program (HIP) began in 1967 and allowed businesses to contract with HIP for assembly work, packaging, sorting and mailing. A major contract was signed in 1989 with Weastec Corp. for Veterans in the program to assemble parts used to make turn signals installed in vehicles manufactured by the Honda Corporation of America.



Main Buildings, Veterans Administrative Facility
Chillicothe, Ohio

Nine acres of VA property was deeded to the Mound City Group in 1972. Two other tracks along Egypt Pike, including 76 acres between the Pleasant Valley Game Reserve and the FCC Station, were deeded to Ross County.

1975 saw the beginning of \$2.9 million worth of capital improvements to convert the medical center from “an exclusively psychiatric institution to primarily a medical facility.” Air conditioning and 3,700 square foot of space was added to the Pharmacy, which had begun a prescription mail out service to 32 counties in Central Ohio. As modernization continued, another \$10.5 million was allocated for improvements to Buildings 7, 26, 27, 30 and 31. Included in the project were a new laboratory, an expanded radiology area, and connection of the corridors in the big circle, linking the buildings through the basement. To celebrate the National 50th anniversary of the VA as an agency in 1980, an anniversary clock donated by the VA Voluntary Services Organization was dedicated between Buildings 8 and 9. A time capsule planted in front of the tree near the clock contained the daily activity sheet, the latest Progress Edition from the Chillicothe Gazette, a history booklet about the VA, and every employee’s signature who wanted to participate.

The VA entered the computer age in 1983. Terminals began to appear on desktops that previously were the scene of pencil, paper, and/or a typewriter. The early use of computers was restricted to very few individuals and was mainly used for transmission of purchase orders, receiving reports, payments and other types of coding sent to the Austin data processing center. Today, employees have access to instant online information via 900+ networked personal computers in use at the main campus and its community clinics. Clinical operations have supplanted administrative tasks as the primary customer of information technology including a computerized patient medical record system, bar-coded medication administration, and medical imaging.

In the first half of the nineteenth century, a Federalist style brick home was built on what later became part of the Camp Sherman Extension and ultimately, the VA campus. Known as the Mace House, Building 60 has majestically stood watch as men prepared to leave for war, and then welcomed them back to this scenic and tranquil valley to rest and recuperate from the tragedies of those same wars. Many owners enjoyed the view of the Mount Logan Range from the front yard of the Mace House. Estelle Mace last held the property prior to the United States Army acquiring it as part of Camp Sherman in 1918. Through most of the twentieth century, the house stood vacant and neglected, used only for storage. With vision, determination and hard work, the VA Staff and patients restored the property to a new spirit of warmth and charm. Restoration began as a patient therapy program in 1982, with assistance from Engineering employees. The building was completely reworked to include rebuilding whole sections of walls and ceilings, new wiring, plumbing, and molding. Wall, woodwork and floors were completely stripped and repainted. Fireplaces were redone. The original walls had been stenciled with floral designs in vogue in the late Victorian period. Some sections have been left untouched and framed to illustrate the original stencil design. The restoration was complete in 1985 and the Mace House was reopened in 1986. The first floor is now used for conferences and training purposes for small groups. The second floor houses a small museum of 19th and early 20th century antiques and artifacts that include the era between World War I and World War II.

The Federal Reformatory had always supplied water and sewage treatment services for the Chillicothe VA, but this free service ended when that facility converted to state ownership in December 1966. In the 1980s, increased water demands from a second prison and the prohibitively high cost for obtaining water from the local utility company spurred VA engineers to seek other alternatives. In April 1985, the VA requested permission from the National Park Service to drill test wells within park boundaries. Although concerns about ownership and the National Historic Preservation Act caused some delays, the final interagency agreement was finally signed in November 1986.

In exchange for water, the agreement called for the VA to extend use of its facilities and certain privileges to National Park Service employees, formalizing a practice that had long been in place as the NPS could always rely on the VA to loan equipment or provide a critical service. In 1964, the VA began providing exams and licensing Mound City Group employees with government drivers' licenses when the first park assigned vehicle arrived. VA firemen and equipment responded to park fire alarms and drills, and staged cooperative fire prevention activities on monument grounds. In 1979, the VA's gymnasium became available to park employees two mornings each week. In 1983, permanent park employees were invited to join the VA's credit union. A year later, the NPS joined the VA in staging what became an annual disaster drill on monument land. In 1986, the VA installed a special crystal on its radio system permitting expanded monitoring and radio communication with National Park Service law enforcement rangers, a service that became especially vital during emergencies and after park operating hours.

"Take me out to the ballgame" and cheers for the Frontier League Chillicothe Paints have been heard sifting through the night air on VA grounds since June 30, 1993, when the Chillicothe Paints played their first home game. VA Memorial Stadium and field have been renovated and leased by the Paints organization, the only original member of the Frontier League, providing affordable family entertainment for the community.

Recognizing that our youth are our future, the Chillicothe VA was the first business in the community to formally agree to participate in the Adopt-a-School Program in 1993. We provide judges for academic fairs, tutoring, mentoring, and career shadowing to schools throughout the county.

The 50th anniversary of the end of World War II was celebrated in 1995 with historical exhibits, a health fair, a visit by the Ohio Vietnam Memorial, and of course, a parade! Five thousand visited the medical center that day, reminiscent of past Hospital Days.



Administration Building (Bldg. 1), c. 1924

Each visitor to the medical center is greeted by an entrance sign that reads, “The Price of Freedom is Visible Here”. On no previous Veterans Day was that sentiment more felt than in 1995. During the yearly ceremony held in the Recreation Hall, the surviving family members of Joseph and Mae Dennewitz sat quietly and listened as their three oldest brothers were memorialized. Fifty years earlier, John, Harold and Bill Dennewitz gave their lives in defense of freedom. John died in Africa in July 1944. Harold lost his life in Germany nine months later. And Bill was killed in the Pacific – within hours of his brother Harold’s death. During World War II, a flag in the window with white stars signified a son or daughter was serving overseas. Gold stars meant the family members had perished. Mae Dennewitz was the only triple Gold Star mother in the state of Ohio. The Dennewitz family sacrificed much in freedom’s name. Building 4, home of the Pickaway-Ross Joint Vocational nursing school, was renamed in their honor as Dennewitz Hall. In comparison to their loss, our honor to these three brothers and their family may seem insignificant, but all who enter will know that “The price of freedom IS visible here.”

Patients in VA medical centers traditionally did not have access to phones in their rooms. Through a cooperative volunteer effort of the Communications Workers of America, the International Brotherhood of Electrical Workers, Bell Atlantic, NYNEX Corporation and the Telephone Pioneers of America, our medical wards received telephones, installation, system support equipment and remote computer access at no cost to the VA or hospitalized Veterans. To christen the new telephone system, President Bill Clinton called Veterans at four VAs across the country on Veterans Day 1995. Bill Frizzell, a 71-year-old Marine Veteran of World War II, received Chillicothe’s first call.

Shuttle Service between Chillicothe, Cincinnati, Columbus and Dayton started in 1996. A contract shuttle provides door-to-door transportation for Veterans and family members or caretakers between the campuses for scheduled appointments, allowing the Veteran to avoid the hassles of traffic and parking.

1996 was an award-winning year for the Chillicothe VA. The Ross County Labor Council presented the Ross County Excellence in Labor-Management Relations award to the medical center. We also received the Robert W. Carey Quality Award in Healthcare, the most prestigious recognition given by the Secretary of Veterans Affairs. Several employees traveled to Washington D.C. to attend the award ceremony and receive the trophy from Veterans Affairs Secretary Jesse Brown. Upon return to the medical center, the award was presented to the employees during a celebration in the Recreation Hall. Medical Center Director Michael Walton and Associate Director Ralph Gigliotti paid off on a wager made earlier in the year pertaining to the award. Each received a “free buzz” on stage to the great delight of the audience.

The Alvis House Veterans Residential Program, a halfway house for non-violent Veteran parolees, opened in Building 5 in September 1997. The building had been unoccupied for years and used for storage. The inmates completely renovated the inside of the building and maintain the grounds immediately surrounding the building. The primary focus of this partnership between the Ohio Department of Rehabilitation and Correction, Alvis House and the VA Medical Center is to provide treatment to inmates who have been diagnosed with post traumatic stress disorder. They will participate in case management, corrective-thinking therapy, community service, employment readiness training, life skills education and structured recreational services. This is the first program of its kind in the state of Ohio, and perhaps the country.

1997 brought tragedy when flooding bombarded the southern Ohio area. VA showed their readiness and community spirit during this emergency when the American Red Cross (ARC) and the Federal Emergency Management Agency (FEMA) needed easily accessible space from which to operate command centers for the sixteen-county disaster area. Almost overnight, space, furniture and phones were provided in Building 1 and the gymnasium for the recovery efforts. The combined efforts of the ARC and FEMA service centers provided help to 1,621 families. 1,162 dwellings and small businesses were damaged, 213 homes were completely destroyed, and projected relief costs exceeded \$700,000. The Red Cross again used the VA grounds as a command center during heavy snows in the spring of 2003.

HOPTTEL, opening in 1997, is a program developed to help meet the temporary lodging needs of Veterans and family members while the Veteran is being treated. If bad weather, long distances, or an additionally scheduled appointment prevents the patient's departure until the next day, lodging may be furnished to Veteran and caregiver.

New pharmaceuticals and practices, decreasing budgets, and changing societal attitudes have required agency self-assessment and adjustments in how health care is delivered. Outpatient treatment delivered by Primary Care Teams has replaced unnecessary long-term hospital stays. Community Based Outpatient Clinics (CBOC) provide routine evaluation and treatment closer to the Veteran, eliminating the need for travel to the main medical center. The Chillicothe VA opened CBOCs in Athens (1997) and Portsmouth (1998), Lancaster (2000), Marietta (2001), and Cambridge (2004). A clinic was opened in Wilmington in 2010. The other medical centers in the VISN have also opened CBOCs close to their main sites, making VA healthcare accessible to Veterans throughout the state. A \$3.2 million dollar state-of-the-art outpatient clinic addition was dedicated in the last year of the twentieth century. The 14,000 square feet has 20 new examination rooms for the primary care teams, conference rooms, waiting and vending areas, a new entrance and admissions area, and a new emergency entrance. The addition is the first new clinical area built at the medical center since 1945, and it allowed consolidation of several services into one area, making accessibility to treatment easier for our Veterans.

A number of internal organizational changes have taken place. In 1946, the VA Department of Medicine and Surgery was established followed in 1953 by the Department of Veterans Benefits, created to administer the GI Bill and other VA compensation and pension programs. The Department of Data Management, later the Office of Data Management and Telecommunications, was established in 1963. The National Cemetery System was transferred to the VA from the Department of the Army in 1973.

In 1989, the VA gained Cabinet status and was renamed the Department of Veterans Affairs. After years of operating as individual hospitals in regions across the country, the agency was revamped in 1996 into 22 (now 21) Veterans Integrated Service Networks (VISN). Each Network operates as a supportive cluster of VA Medical Centers and Outpatient Clinics. The Chillicothe VA Medical Center is a member of VISN 10, the VA Healthcare System of Ohio, which also includes facilities in Cincinnati, Cleveland, Dayton and Columbus.

Our past has played a significant role in the community, in the agency, and in the health and well being of our nation's Veterans. We continue to strive to "care for him who shall have borne the battle" and we look forward to providing the very best **"Healthcare for Heroes"**.

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