Sisters of Charity of Leavenworth
CHEYENNE, DE PAUL HOSPITAL
1952-1992

Sister Catherine Louise Lebhart, S.C.L.

When Bishop Patrick McGovern invited the Sisters of Charity of Leavenworth in 1945 to establish a Catholic Hospital in Cheyenne, he knew that they would bring with them knowledge, experience and good will to their mission.

In 1875 the Sisters had come west to Laramie, Wyoming, to build St. Joseph Hospital, to serve the Union Pacific workers and the residents of the small town that had developed there. Twenty years later they gave the Hospital to the Bishop and left Laramie because of threats from the A.P.A. (American Protective Association), the forerunners of the K.K.K. (Ku Klux Klan) in Wyoming.

Seventy years later, the Sisters were urged to return to their healing mission in Wyoming. Bishop McGovern donated land for a building east of the city in the new Mountainview addition. The city’s fund raising effort on behalf of the Hospital realized $300,000, so that the bids could be let and the construction started. The Sisters would be responsible for the remainder of the two million dollar construction cost. The City of Cheyenne gave a gift of spruce trees which were planted at the west end of the Hospital. The Sisters brought in the trees, on the east side, from the mountains, and the apple trees were gifts from friends.

Bishop Patrick McGovern told Mother Mary Francesca O’Shea, the Superior General of the Sisters of Charity, that the name of the Hospital should be “Mercy Hospital.” She was living in Santa Monica, California at the time. Telegraph wires began humming. Mother did not think that the name was meaningful. Her idea was to call it “St. Patrick’s” because
this was the Bishop’s project. This time it was “no” from the Bishop. His suggestion of “DePaul” won approval.

Opening of DePaul, 1952

Dedication of DePaul Hospital was set on the feast of the Sacred Heart, June 20, 1952. The cornerstone was laid. One sad note was that Bishop McGovern had died only seven months before at St. Joseph’s Hospital in Denver. However, for those of us who knew him and his work for the Hospital, he seemed very present.

The band from the Warren Air Force Base came to enhance the dedication ceremony with their music. They helped carry out the chairs for the program. One unfortunate musician cut his hand badly when opening the chair and needed bandages. The medical supplies had not yet been delivered, so we had to run across the street for help from the neighbors. A lovely dinner was served to the visiting clergy, dignitaries, and Sisters of the area.

July 2, 1952, was announced as the opening date for patients to be accepted. Many ambitious souls anxious to be the first patient had lined up early that morning. The line reached all the way to the corner of 18th and Hot Springs. Sister Ann Raymond, administrator, had other plans. She received a call early that morning concerning a traveling migrant worker whose infant son became very ill during the night. Sister arranged to go to the family and bring the baby in the side door of the Hospital. Rueben de Leon was admitted for treatment of dehydration and malnutrition. It was a most fitting way to honor St. Vincent de Paul, the Hospital’s patron, by accepting as its first patient a very poor, sick infant. St. Vincent was famous for his nightly ventures through the streets of Paris in the 1660’s in search of abandoned babies. He took them to the Daughters of Charity to receive care. Rueben became a healthy child after several weeks of loving attention.
DePaul Hospital was an imposing sentinel as it stood etched against the eastern horizon of Cheyenne. The north and the south wings were joined at the center by a tower and formed a wide letter L. It seemed to be standing guard until the Sisters could take over. The building dominated the whole neighborhood because of its location in the new Mountainview addition. No residences had yet been built. DePaul’s arrival seemed to invite neighbors to share the delights of Cheyenne’s new eastern addition.

The chapel, the gem of DePaul, was the pride of the Sisters. Mrs. Nellie Derr, a Cheyenne resident, gave a gift of $20,000 to make the chapel a fitting memorial for her son who died several years earlier. Mrs. Derr and her son, C.E., had a doughnut shop near downtown which was a very popular stop for motorists. Announcement of the coming of a Catholic Hospital made the Derrs very happy and they started saving to build a donation fund. Before the Hospital’s completion, C.E. died unexpectedly. Without hesitation, his mother knew the fund would supply a special memorial for her son. She wanted a unique place of worship to draw many visitors. Mother Mary Francesca worked with Mrs. Derr, and their achievement won the praise of all.

The decorations, furnishings, vestments and vessels were all selected to form a unity of design. The pews were made of walnut. The altar was birdseye maple with walnut trim. The frame for the reredos was made of the same wood. The cross on the altar and the altar railing matched the same scheme. The Stations of the Cross and two statues came from Bolzano, Italy, and were carved from Italian limewood. The corpus on the large cross over the altar was also carved in Italy. The drape on the reredos at the back of the altar was a bright gold crushed plush. The most expensive items in the chapel were the mural decorations and the pews. The gold in the murals was genuine gold leaf. Anton Schwarzler was the chosen artist. He was a native of Austria where he did his first painting and later lived in Wheatridge, Colorado. He specialized in
ecclesiastical design. Original sketches were made for each of his contracts. At DePaul the motifs depict the articles of the Apostles’ Creed.

DePaul Hospital had the capacity of 121 beds and forty-three doctors made up the staff. In 1991 this statement was made for the DePaul Archives: “The bed capacity has remained the same, but there are now over a hundred physicians and dentists practicing at De Paul. Departments have enlarged and have become more proficient in delivering the best health care in Wyoming. The Hospital employed 469 people, 337 full time people and 132 part time. Monthly pay roll amounted to more than $800,00, making the annual sum of almost $11,000,000. This was quite a boost for Cheyenne’s economy.”

The medical staff was of prime importance to the Hospital. Forty-one medical personnel made up the DePaul staff in 1952. These were nineteen in general medicine, five dentists, three in radiology, 2 surgeons, 2 each of pathologists and otologists***, and one each of the following, ophthalmologist, urologist, pediatrician, internist, orthopedist, and gynecologist. The figures indicate that the majority of the physicians were family practitioners, but that could be misleading because many of the doctors had become specialists through past training or graduate studies. As a result, it was quite difficult to delineate members according to specialties because many of them were masters in several areas. Over 100 doctors were on the staff in 1992.

In 1953 DePaul Hospital was incorporated in the state of Wyoming, which meant that the Board of Directors was legally responsible for the management and operation of the Hospital. The first lay Board of DePaul Hospital was created in 1953 as an advisory group. They met every other month. Because the group had no authority to make changes and could only make suggestions, there was small chance for effective follow-up. Sr. Mildred Irwin, president of the SCL Health Service Corporation, instructed the Board that eleven members would make up the Board, five lay men or women and six Sisters of Charity who had
knowledge of Hospital operations, but she emphasized the impact and value of lay members. Their business expertise, their knowledge of the needs of the community with projected goals were vital to the functioning of the Board. The two groups formed a professional team for effective Hospital management and the Sisters could not accomplish their goals without both teams working together. The Board members were serious about their commitments and were quick to realize that public relations were of prime importance. They offered to visit doctors’ organizations and surrounding areas to acquaint the people of the special services of DePaul. They looked into the possibility of sponsoring a Poison Center. It was suggested that clubs and organizations hold luncheon meetings at DePaul and take a tour after their meetings.


The Hospital Guild

The women of Cheyenne were eager to be a part of the service to the patients who came to DePaul. Mrs. W.H. McInerney and her deanery committee initiated a patient library, the first patient service. They purchased a library cart, secured magazine subscriptions and solicited book donations. The service was ready for operation before the Hospital was opened. This was the inspiration for the Hospital Guild.

Sister Ann Raymond Downey, S.C.L., administrator, asked Mrs. John (Ruth) Loomis to organize a Guild. She saw the need to provide patient services not directly provided by nursing care. These included a sewing
committee, Gift Shop, an information desk. These would be set up and maintained by the members. The first planning meeting was set for October 20, 1953. Mrs. Loomis was the first president, Virginia Hirst, secretary, Ethel Norris, treasurer, Elizabeth Hoffmann, membership chairman, and Jessie Lummis, publicity chairman. Suzanne Pattno reported that the purpose of the Guild would be “To create a firm foundation for a broad social support for the community to assist in meeting the needs of adequate Hospital and health facilities.”

A membership tea on December 6, 1953, brought 210 interested new members. Six in-Hospital services were defined and developed so that the members could designate their choice of activity. By February 1, 1954, these services were in full operation.

As the Hospital grew, more medical equipment was needed. In April 1954, the Guild sponsored its first benefit to raise funds for a diathermy machine for the new Physical Therapy department. A game night was held at the Elks Club and the Plains Hotel. So successful was the event that the diathermy machine was obtained, and an iceless electric oxygen tent was also added.

Christmas sales were held in the downtown area until 1988 when it became a much larger project named Wyoming Professional Craft Sale and moved to the National Armory. Craftsmen from around the state rented tables and sold their crafts. DePaul received a percentage of the sales. Since the crafts were juried, a high quality profile was maintained. It proved to be a profitable venture and the proceeds, as always, were given to DePaul.

In 1961 Guild members launched a larger, more elaborate endeavor for raising needed funds for Hospital equipment. The DePaul Charity Ball became a reality in April as “A Spring Affair” and achieved such success that Cheyenne society wished to designate the opening of the spring social season each year with the Charity Ball. The first ball was held at
the Hitching post. The Harry Smiths donated the Coach Room for the dinner dance. Blue Barron, noted orchestra leader, provided the music. Because of the ball the Guild was able to give a substantial down payment for a new Mark II Imperial X-Ray. The Charity Ball became a much anticipated spring event which always presented a different theme with matching decorations and menu.

The last Charity Ball was held in 1992, the thirty-second event for the Guild. All participants enjoyed a gala Mexican fiesta with all of the music, decorations and menu from South of the Border. A Mexican dance group from Denver performed a program of genuine native dances. The guests entered into the spirit of the event and made the final Charity Ball a memorable one.

The Gift Cart, a 1968 addition to Guild activities, brought sundry items to the patient’s bedside. Soon the patients were waiting for the highly decorated cart with essential articles as well as magazines and candy. A year later the cart evolved into a glass case in the lobby to supply small gifts and some crafts for visitors and patients. Success brought a need to enlarge the service by opening a gift shop. By using the cashier’s office to the right of the front entrance, carpenters created a very attractive room for all the wares of the Guild. It attracted the attention of all those who came to the Hospital. The Lemon Tree was opened Saturday, July 16, 1977. The name was suggested by Mrs. William Dineen. Gift items included stuffed toys, plants, silk flowers, religious articles, cards, magazines, candy and sundries. The Lemon Tree received visitors seven days a week managed by the Guild volunteers. They contributed from $8,000-$12,000 each year to the Hospital.

A junior volunteer service was begun in 1979 under the direction of Barbara Murray. Young people between the ages of 14 and 18 enrolled. These were not Candy Stripers because that organization did not enroll boys. Mrs. Norman Stark, Mrs. Jack Brubaker and Mrs. Dana Lanier
coordinated the group until it became the responsibility of the Director of Volunteers.

The ladies of the Guild should be congratulated for their great work. I am indebted to Suzanne Pattno for the history of the Guild which she wrote in 1991. Many of the facts were new to me so her writing was vital. I’m sorry that I couldn’t use all of the material because a book would be the end product.

Equipment

Pediatric Services became a part of DePaul in 1981. The unit needed new decor and furnishings, so Mrs. Earl Kincheloe, Mrs. L. Wallace and Mrs. Russell planned and actually did much of the work to make Peds a special place for the little ones. An additional service was added in 1987. Small patients were given pillows, and teenagers received autographed animals. The whole Guild became involved in the project. A sewing committee was formed to provide the gifts and another group was to finance buying the material. Their idea was a very popular one. “Breakfast with Santa” was held at the Knights of Columbus Hall with the help of the Kiwanis Club. A delicious pancake breakfast was served. When Santa and Mrs. Santa arrived they visited with the children and passed out gift packages. Only a nominal fee was charged, but it was enough to provide material for the pillows.

The last service of the Peds department was the TLC program. If a child was ill and needed attention but not in need of a doctor, a working mother could be relieved of the worry by bringing her sick child to pediatrics for the day to be supervised. That was the TLC program.

Increase in the number of patients and demand for services soon made it obvious that plans needed to be made for expansion. The Board of Directors started gathering information on everyone’s needs and
developed an addition that would enhance the appearance of the building, and add new medical procedures by providing space for their accomplishment. The bids were let and construction began in 1976 on a two-story attachment to the north side of the Hospital. It would contain a thirty-two bed medical floor, a new radiology department with the most recent designs in equipment so that they could boast of a state-of-the-art facility. The new surgical suite included five operating rooms, cystoscopy room and a cast room. Also added was a recovery area with room for ten patients, a large central service department, physical therapy, materials management, two meeting rooms and a large auditorium on the ground floor. The emergency entrance was greatly improved by allowing through traffic access.

Since the opening of the emergency room in 1976, the patient count increased every year. An average day meant that thirty-five patients saw doctors and had been treated for minor or major ailments. The staff had an enviable record of 100 years of accumulated service in the field of emergency medicine. They maintained “business around the clock” seven days a week, an essential part of DePaul’s health care package.

The concept of Hospital-based Home-Health care was new in Wyoming when DePaul initiated their program in 1975. It was a well-established part of the Hospital extension service. It included home nursing, volunteer caregivers, physical therapy, occupational therapy and speech therapy.

In the early 1970’s the two Hospitals in Cheyenne agreed to share services for the sake of efficiency. Laramie County Memorial Hospital took all of the OB/GYN patients while DePaul specialized in developing an outstanding pediatric department for the whole region of southeast Wyoming and surrounding areas.

In 1980 the doctors were especially anxious to initiate a more sophisticated heart treatment for the people of Cheyenne. At the time it
was necessary to send seriously ill heart patients to Denver. Our doctors worked at the Denver Hospitals on their critically ill patients. This posed hardships on both the physicians and families. In 1981 the cardiac lab became a reality, and cardiologists and nurses were hired to complete the staff. The ICU unit, a part of the cardiac unit, had ten beds equipped with the latest monitors and equipment needed for cardiac patients. In the fall of 1988 the first open heart surgery was performed. The program became a very valuable asset to the Cheyenne community. Over 100 successful bypass surgeries were performed in the unit. Other diagnostic tests and treatments became available to heart patients in the Cath Lab, such as angioplasty, pacemakers, scanning machines and stress tests. Another service of the cardiac team was outreach education. They spoke to groups, businesses, and schools about heart attack prevention and the necessary components of a healthy lifestyle.

At the same time that the Cath Lab was organized, the Chemical Dependency Center was given priority and a place to set up a treatment center was on the third floor. The twenty-eight day program included individual counseling, group sessions, family involvement, and an individual plan of behavioral modification so that a greater degree of success was made possible. A rate of over 66% success, compared with the national average of 39%, was a great achievement.

DePaul administrators also took an interest in sponsoring medically supervised wellness programs aimed at preventing acute illnesses through exercise and nutritional instructions.

DePaul Health and Fitness Institute (DHFI) was established in 1984. Classes and programs were held in the Tower Room on fifth floor. The response was so great that it was necessary to find larger accommodations. A satellite was established when they were able to use part of the Warehouse Grocery on East Pershing Boulevard. They remodeled and furnished it with equipment necessary for classes and other services. Physical Therapy, Sports Medicine, Massage, Cardiac
Rehab II were vital parts of the help patients received there. Health programs such as weight-loss and stop-smoking seminars added to the effectiveness of the work done for the wellness of the city.

Volunteers performed many valuable services for the patients and the nurses throughout the Hospital. One hundred thirty-five men and women donated 12,200 hours annually doing tasks that relieved the nurses to spend more time in the actual care and comfort of the sick. They were also able to file or type and do other office chores to relieve the office workers.

Goldencare Plus was an outreach to the senior citizens of Cheyenne established in 1988. They planned to aid the seniors with their Medicare and insurance payment problems. They also received free coffee in the cafeteria, preferred parking spots, a private room for the price of a double room when the beds were available. Educational and social programs were planned each month. Membership numbered almost 1350 at its peak. The age level was to be lowered to sixty through sixty-five. Their part was to be called Prime Life Plus, but it was still in the planning stages when the Sisters departed in 1992.

Some of the new machines in the radiology department increased the ability of the physicians to diagnose and treat patients with more accuracy due to the sophistication of the technology of the machinery.

SPECT made images of the body by rotating around the patient taking pictures at a high rate of speed so that the technicians were able to build 3-D images of any organ. It could also slice an organ at any angle so that the interior of the organ could be seen as well. Nuclear imaging was made possible through the use of the machine. It was the only SPECT machine in the state. CAT SCAN also took high speed pictures. Magnetism was used to produce the images so that it was safer than the Xray. ULTRASOUND INSTRUMENTS AND EKG monitoring were two of the valuable tools used by doctors.
Meals were served to the patients from the kitchen where dietitians were in charge of seeing that each patient received the kind of nourishment he or she needed. They also maintained the cafeteria on the ground floor to feed the employees and guests.

The last addition to DePaul Hospital was dedicated in 1991. The third floor extended the surgical floor by adding twenty-six beds. Most of these were private rooms. Renovation of the boiler rooms and the installation of three new boilers made the heating of the plant more efficient. The Chemical Dependency Center building was outside the Hospital, but joined to the cafeteria so that the patients could get their meals there. It housed seventeen guests, two large meeting rooms and six counselors offices.

The Skilled Nursing Facility located on fourth floor cared for those patients who were ready to leave the Hospital, but were not able to return to their homes because they needed nursing care. The unit has twelve beds, a dining room and a recreation room.

DePaul was the only Catholic Hospital in the state and one of two that was privately owned. DePaul received no tax money from the county or the state, or any financial support from the Sisters of Charity of Leavenworth Health Services Corporation. DePaul’s revenue was from the daily income from patients, donations from bequests, the Guild, and the Foundation.

Departure of the Sisters, 1992

The prospects for the years ahead were happy and exciting ones. 1991 was the year of growth and change. Many more changes would be made possible in the future. The front entrance would be extended to the sidewalk, the Lemon Tree extended and the foyer of the Hospital would be enlarged and refurnished. The approach to the emergency room
would be enclosed so that the patients could be protected in inclement weather. Our slogan, “Moving Forward with the proud tradition of care,” seemed to pinpoint the administration’s view of DePaul’s position in Wyoming’s medical environment.

This was 1991 and everyone at DePaul was aware that the big day was coming fast upon us, DePaul’s 40th birthday! Committees were grouping, getting heads together to brainstorm the possibilities of making this a day to remember. The struggle seemed over and there was much to celebrate. But times were changing for Hospitals and administrators were starting to seek solutions to the growing problems. In 1989 Manuel Ortiz of DePaul and Jon Gates of Memorial met often to gain understanding of the situation and to suggest possible solutions.

The first problem was the product of improved surgical methods. Outpatient surgeries made hospitalization unnecessary. The result was lower patient occupancy for the Hospital. The second problem was the large sum of unpaid bills because of the high cost of the care, and the third was the low rate of reimbursement from the government’s Medicare and Medicaid.

A research firm was hired to conduct a survey of the situation. Since both institutions were financially sound it was not a question of saving only one of them. The fact that faced each one was the need to enlarge the cardiac services department by building a unit that could house large sophisticated equipment. The decision rested with the Health Service Corporation of the Sisters of Charity. They sent back the decision that the Sisters would sell DePaul to Memorial. It was an unbelievable shock to all at DePaul, because it was a foregone assumption that DePaul was in a position to create a medical center in Cheyenne.

Reflection on the Last Days at DePaul
The following is a reflection of the final days at DePaul Hospital in Cheyenne written by Sister Catherine Louise Lebhart, S.C.L., Director of Volunteers. Forty years! Forty years of skillfully, cheerfully serving the sick and the community of Cheyenne. Forty years of struggle daily to make ends meet. Forty years of successfully sharing the SCL mission of respect for the individual regardless of race, color, creed, or ability to pay for the services rendered. What about now, in 1992? DePaul’s services and mission have been entrusted to Laramie County Memorial Hospital. The many facets of the health care situation in Cheyenne had to be diligently and prayerfully studied to reach the decision that would most benefit the two hospitals, the community, and the patients who needed the best care possible.

Motivating the decisions were these factors: the cost of duplication of services and equipment to the customers, the administration of Medicare and Medicaid monies by the government, the pressing need to update DePaul’s heart program which boasted ten years of successful treatment for scores of patients. These were the most pressing needs.

Did the welfare of DePaul’s employees enter into the negotiations? Most certainly. Attrition rather than dismissal would bring the needed total of nurses and other employees to the proper level. The few who were not needed or who did not wish to stay received help in relocating or finding another job.

It was a privilege of sorts to be a part of the transition, to be with those who had shared all that DePaul stood for. When the study began, it was taken for granted that DePaul would assume responsibility for Memorial. Most of us could see no other solution. As time passed, the climate changed drastically when Memorial proposed to buy DePaul. The final decision was announced September 8 by Sister Mary Andrew. Tears flowed copiously, some in anger that Memorial seemed to triumph, some in fear of what the future held, while others expressed a feeling of betrayal. Denial and disbelief quickly replaced the anger and fear, and
one could hear offers of possible ways to change the course of events. The pall of heavy hearts everywhere in the Hospital gave one the feeling that a death in our family had saddened all. It was difficult to visit with employees or friends because tears were in the voices and on the edge of the eyelids ready to spill over if anyone else’s started. The knowledge of the Kubler-Ross steps of grieving helped us understand what was happening to us here. Yes, it had to be that way to help us cope with our shattered feelings, and to be a support to the employees and friends of DePaul.

The final week, the last week of October 1992, was very busy, fortunately. Tasks of packing, meetings, seeing and visiting with as many of the DePaul friends as schedules could handle made the time slip by more easily. The Guild hosted a tea honoring the Sisters and employees on Wednesday afternoon. The Governor and Mayor attended and proclaimed October 28 as Sisters of Charity Day. Thursday, the Hospital hosted an Octoberfest for the employees. The menu, music and costumes gave an authentic German air to the celebration. Prizes were awarded to employees whose names were picked from computer lists. It was a heart picker-upper event.

A notable change was taking place in the tenor of the remarks we heard during that last week. We heard exciting ideas expressed about the spirit of DePaul’s employees and how it might be possible to take that spirit with them to Memorial. One young physical therapist said to me, “It is our job to make it the best that it can possibly be.” How can we consider the forty years a waste if those who worked with us owned our mission statement and were determined to carry its ideals with them wherever they went?

The final steps of Kubler-Ross took longer to become reality, but I have the feeling that in the end DePaul’s spirit triumphed.