
Robeson County Memorial Hospital

History

SRMC's history dates back to two predecessor organizations. In 1906, Dr. Neil Archie Thompson opened Robeson County's first hospital, Thompson Hospital. Then in 1921, Dr. Horace M. Baker opened Baker Sanatorium. In 1946, the Thompson Hospital, merged with the Baker Sanatorium to form Baker-Thompson Memorial Hospital.

In 1953, a new 140-bed hospital was constructed to replace the aging Baker-Thompson Memorial Hospital's facility. The new hospital was called Robeson County Memorial Hospital, to express the facility's position as the only hospital in the county. In 1954, a nursing residence was completed on the main campus. Although the nursing school closed in 1966, today a large portion of that original building is used for classrooms and labs for BSN students attending the University of North Carolina at Pembroke.

In 1956, the hospital underwent its first major expansion adding 50 beds, a laundry, and two operating suites.

In 1960, as the hospital continued to grow, its name was changed to Southeastern General Hospital (SGH) in order to more accurately reflect the regional nature of the facility's services. In 1961, another major expansion added 75 beds and air conditioning throughout the building. In 1969, 80 long-term-care beds and a 23-bed psychiatric unit were opened in a 3-story building on the main campus.

Outpatient surgery was offered in 1975, and in 1976 a neonatal intensive care nursery was opened.

In 1980, SGH began providing clinical training for Robeson Community College's associate degree nursing students. Home Health services were offered beginning in 1984. In 1986, the 80 long-term-care beds were moved to a new facility off campus and, in 1987, an additional 35 long-term-care beds were added which included a 15-bed dedicated Alzheimer's care unit.

In 1991, diagnostic cardiac catheterization services were first offered. In 1992, SGH opened its first primary care clinic which is located in Fairmont, NC.

SGH celebrated its 40th anniversary on August 16, 1993, and announced a name change effective January 1st, 1994, to its current name--Southeastern Regional Medical Center (SRMC).

In 2003, a six story 134-bed Patient Bed Tower was opened replacing many of the out-dated patient rooms in the original building. In 2006, a seventh floor with 34 additional beds was opened, Southeastern Heart Center was dedicated, and SRMC performed its first open heart CABG procedure. Southeastern Hospice House, a 12-bed inpatient hospice facility, was opened in 2007 a few miles from the main campus.

Southeastern Health is still the only hospital in Robeson County and serves patients throughout southeastern North Carolina. The hospital is currently licensed for 452 beds, including acute care, psychiatric, inpatient hospice, and long-term-care beds. The hospital employs more than 2,100 people, has 117 active medical staff, and has a total of 395 credential providers (including physicians, physician assistants, nurse practitioners, and CRNAs).

Southeastern Health Fast Facts

The history of Southeastern Health dates back to 1906 when Dr. Neill A. Thompson opened the first hospital in Robeson County. The Thompson Hospital consolidated with the Baker Sanatorium, under the direction of Dr. Horace M. Baker, Sr., to form the Baker-Thompson Memorial Hospital in 1946. These two older facilities were replaced by a new 140-bed hospital known as Robeson County Memorial Hospital in 1953. On January 1, 1960, the hospital's name was changed to Southeastern General Hospital to reflect more accurately our service to all of southeastern North Carolina. In 1994, after a number of expansion programs, the organization became

Southeastern Regional Medical Center. On January 1, 2013, the organization's name was changed to Southeastern Health while the medical center retained the Southeastern Regional Medical Center name.

Baker Sanatorium

Situated on a landscaped corner lot in a suburban neighborhood of Lumberton, North Carolina, Baker Sanatorium represents the physical presence of the medical sciences which relocated during the early 1920s from the congested downtown commercial district to the restful environs of the city's premiere residential community. The choice of site was fortuitous because it gave the architect and client the chance to create a facility that blended with the residential character of the area and reflected the well-executed craftsmanship of the era. The sanatorium was established for the purpose of providing obstetrical and gynecological services, as well as pediatric care and surgery, for a region where such services were not conveniently available. Dr. Baker sought to bring women's medicine into the twentieth century by reversing the common tradition of engaging ill-trained midwives in the prenatal, childbirth, and child care fields. So successful were his efforts that the sanatorium received wide acclaim and expanded services throughout the county and into adjacent areas. During his brief career, Dr. Baker, his staff, and his successors kept pace with the growing population, and the hospital continued to maintain its role into the 1990s.

In 1790, the county population was 5,326. In 1800, it had increased to 6,389. Between 1800 and 1840 the numbers leveled off, but during mid-century they again rose steadily on an average of 266 people per year, with peaks reached in 1880 and 1890.¹³ At the turn of the twentieth century, the population slowed again, but reached 54,674 residents in 1920 and 105,179 in 1990.¹⁴

The successive growth of the population in Robeson County made manifest the need for improvements in the medical field. Folk medicines and superstitious cures were common in isolated regions. In larger towns many doctors were equipped with the barest scientific knowledge, having received only apprenticeship training. IS Nevertheless, a large number of these men entered medical schools and attained their M.D. degrees. 16 The most sought after school of medicine was at the University of Pennsylvania, founded in 1765, which required an apprenticeship for admission. I? Those North Carolinians who studied there, and at other established universities, returned home with a considerable knowledge of human diseases, their treatment, and prevention. Among the medical practioners, several joined forces to establish the North Carolina Medical Society in 1799. 18 Robeson County listed nineteen doctors, twenty-one to fifty-six years of age, in the 1850 state census. Among them were doctors Angus Duart McLean and Edmund McQueen of Lumberton. McQueen was elected first mayor of Lumberton. 19 From 1850 through the Civil War, seven out of the ten doctors practicing in Robeson County were natives: John B. Brown, David Carlyle, Kenneth McKinnon, Samuel B. Morrissey, Stephen B. Rozier, Daniel Smith, and Duncan Smith.20 Later, in 1867, the state's first chartered medical school, Edinborough Medical College, opened on Dr. Hector McLean's plantation near Raeford, in the northwestern part of Robeson--now the seat of Hoke County.21 Eight students signed up for the classes and eagerly absorbed Dr. McLean's considerable expertise. He was held in high regard by his associates because of his wide range of talents: performing brain surgery; operations for breast cancer, mastoiditis, and stones in the bladder; treating epilepsy; and executing hip joint amputations. 22 Among the graduates of the school were doctors F.O. Hawley in Charlotte, J.D. McNeill in Whiteville, David McBryde in Raeford, Angus R. Currie in Antioch, and William Ray in Galatia. 23 Some doctors had talents other than the medical profession, as was the case of Robesonian Dr. James Robert Adair, who wrote a History of American Indians, which was published in London in 1775. 24 His burial in Rowland, southwest of Lumberton, was marked, in 1934, by the Colonial Dames. z5

The North Carolina Business Directory for 1866,67 lists no physicians in the county, but in 1867-68, there were a dozen doctors practicing in towns that included Lumberton, Red Bank, St. Pauls, and Shoe Heel. 26 In 1869 there were thirteen physicians in the region, increasing to nineteen doctors and one dentist in 1877, the year the North Carolina State Board of Health was organized. 27 By 1883, the number of dentists had risen to three.28 A distinct augmentation of professionals occurred in 1884 when twenty-eight doctors (including one black) and four dentists served the county.29 By 1916, forty physicians and ten dentists served the region. 30

The first hospital in Robeson County was established in 1906 under the care of Dr. Neill Archie Thompson. 31 Three years later, plans were set forth to appoint a county health officer. In 1911, the state legislature initiated county boards of health to replace county sanitary committees, and on March 1, 1912, Robeson became the first rural county in America to install a full-time county health officer. This historic event was led by J.W. Carter, chairman of the county board of health; doctors H.H. Hodgkin and T.L. Northrop; J .R. Poole, the superintendent of county schools; and A.E. White, the mayor of Lumberton. 32

The increase in the gener.al as well as medical population in the county during the early years of the twentieth century brought about serious concern about the general health~ Steps taken to inform the public and the profession were the publication and distribution of pamphlets and enacting laws such as "An Act to Prevent the Spread of Infectious and Contagious Diseases in Robeson County." The legislation made it mandatory that "between occupants a house must be cleaned with lye, bichloride of mercury, or formaldehyde." The increased attention to disease prevention resulted in the reduction of typhoid fever over a period of twenty-on~ years from fiftysix cases in 1915 to seven cases by 1936. Children and adults were vaccinated against diphtheria,

smallpox, and other endemic maladies. By the mid-thirties, nearly 50,000 inoculations had been administered to the end that diphtheria dropped by 25% and smallpox was eradicated. Dental care facilities were also made available to all school-age children, both black and white. 33 Other important steps initiated by the county health department during the period were the elimination of 3,000 privies, the addition of new sanitary facilities in several of the county schools, and the introduction of seven clinics to attend to pre-natal and child care case. In 1925, the department presented findings on the old-established custom of midwifery. "These midwives," stated the report, "are, except in rare instances, ignorant, untrained, incompetent women, and

some of the results of their obstetric incompetence are unnecessary deaths and blindness of infants, and avoidable invalidism, suffering, and deaths of mothers." Miss Cora Bell McLeod was appointed the first county public health nurse. She immediately began classes to teach midwives professional methods and educated expectant mothers and other women about cleanliness, safety, and general health. 34

Following Dr. Neill Thompson's death in 1922, after sixteen years as head of the county hospital, Dr. Thomas C. Johnson was installed as the new chief of staff. In the previous year, the Baker Sanatorium was placed in service by Dr. Horace M. Baker to attend to more specific medical services in the region. The architect for the new sanatorium was Roger C. McCarl, a native of Florida, who studied architecture under Paul Cret at the University of Pennsylvania. In 1912, at the age of twenty-five, he moved to Wilmington:., and was employed as a draftsman by James F. Gause, Jr. until he set up his own practice in 1918. In the 1919-20 Wilmington City Directory, he advertised: "Engineer of Fireproof Construction, Reinforced Concrete, Structural Steel, Heavy Mill Buildings

A feature article announcing the completion of the sanatorium appeared in the February 24, 1921

Robesonian newspaper, with a photograph of the modern facility, and the comment that "The building is designed to meet every requirement that the most scientific treatment may call for in internal medicine, obstetrics, disease of infants and children, and general surgery The medical and obstetrical departments [are] open to all the physicians in the county." The curriculum vitae of the medical staff was also presented: Dr. Baker, director of the new sanatorium, trained at Boston Children's Hospital, performed surgery at the Lowell Corporation Hospital, served as head of surgical pathology, serology, and bacteriology in the United States Army medical department, and practiced medicine in Lumberton for a year-and-a-half; Dr. Russell S. Beam, chief of the eye, ear, nose, and throat branch, received his training in Philadelphia and New York City hospitals, and supervised a 2, 700-bed facility of the Allied Expeditionary Forces in Europe; Dr. C. V. West, came from Baltimore's Johns Hopkins Hospital where he was on the surgical staff

for a decade; Dr. H.T. Pope, a specialist in skin, cancer and obstetrics, joined Dr. Baker in the medical department. In addition, the paper reported that "A full corps of graduate nurses has been secured. Miss Beta Alkenes is superintendent of nurses."³⁶

After the death of Dr. Johnson in December of 1944, and Dr. Baker in February of 1945, the operations of the old county hospital and the sanatorium were combined to form the Baker-Thompson Memorial Hospital. The continuing success of the facility was such that, in the 1940s, it was enlarged with the enclosure of porches and verandas, and a two-story nurses' residence was constructed just east of the main building. The hospital continued in operation until 1993, when, the structure was adapted for general office use, with a pharmacy remaining at the first level.