

3-1974

Beacon Light: March 1974

St. Cloud Hospital

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The St. Cloud Hospital Beacon Light



Volume XXIII Number 7

March, 1974

Phase IV: Extended Economic Restraints on Health Care

For the past 2-1/2 years American Industry, including health care, has been under the controls of the Economic Stabilization Program (ESP). During that time, health care has been one of the few industries forced to keep its costs within guidelines set by the Economic Stabilization Program's Cost of Living Council while inflation in other industries has flourished and, in many cases, greatly exceeded the Nixon Administration guidelines. Yet, ironically, the present Administration plans to remove ESP controls on April 30, 1974, for all industries with the exception of petroleum and health care.

Economic controls on hospitals from August, 1971, to April, 1974, have been designed primarily as price control mechanisms with limits placed

on the total cost increases. Under Phase III, the prices hospitals charged were allowed to increase up to 6% per year if cost increases for wages did not exceed 5-1/2% and other expenses 2.7%.

"Phase III was essentially a price control system," says John Seckinger, Director of Fiscal Services at the Saint Cloud Hospital, "and did not attempt to control the level or quality of services rendered to patients." Under these regulations, the Economic Stabilization Program did not control the services used, it merely controlled the prices charged for the services rendered.

According to Seckinger, "the Phase III program was inequitable because the cost controls allowed a hospital to increase charges only for salary increases of 5.5% and other costs of 2.7%

continued on page 5

Nat'l Hospital Week Observed May 12-18

Wayne Lauermann, Business Office Manager at the St. Cloud Hospital has been appointed chairman of the 1974 National Hospital Week scheduled for May 12-18. The theme of this year's observance, according to Lauermann, is *Get To Know Us Before You Need Us*. Committee members and local activities will be published in next month's BEACON LIGHT.



Lauermann

"This year's National Hospital Week observance gives us an opportunity to provide members of our community, our patients and our hospital staff, with information about activities, services and objectives of our Hospital," said Lauermann.

"We have an active committee which is already making arrangements for an event-filled week," he said, and "I'm looking forward to it."



DR. MORAN HONORED—The St. Cloud Hospital Board of Trustees recognized the contributions of Dr. Paul T. Moran as Chief of Staff, 1972-73, at the annual Board of Trustee-Medical Staff dinner in February. Above, Dr. Moran receives formal recognition for his services in the form of a plaque from the Board President, Sr. Henrita Osen-dorf, OSB. Dr.'s Henry M. Broker, Otto C. Phares, and Harvey E. Sisk were also recognized for dedicated service to their patients for a period of 25 years. Sr. Patrick Joseph Flynn, OSB, was also recognized for her contributions and service to the Board of Trustees.

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The Chaplain's Corner



FR. STANGL

DEATH— RESURRECTION

By Father Al Stangl

A Cycle
 Death Comes
 Resurrection follows
 Winter struggles to leave
 In the struggle Spring arrives
 Hope is Present
 It becomes a reality
 Pain — Suffering — Agony
 Peace — Joy — Happiness
 A Seed is buried
 Bursts forth as a new plant
 You and I die to sin, evil
 We rise to a new life in Jesus

P.A.C. Rap

By Mary Leyendecker

Do you remember a time someone said to you, "Hey, that's a good idea!" You probably have heard that statement before. Is that all the further the idea went, or did it go to the suggestion box where it could do you and others here at the hospital the most good?

Maybe you've told yourself that someone else has probably suggested the idea already, so you didn't put your idea on paper. How do you know for sure unless you suggest it yourself? You probably never will until someone else gets an award for the idea you had a long time ago. Then its too late!

Your suggestion box system provides an opportunity to improve your area of employment. The suggestions are reviewed monthly and awards are granted according to their value and feasibility.

Unfortunately, there have been problems with our system in the past, but presently there is a greater problem at hand. The suggestion system is not being put to its most effective use by employees.

Has everyone run out of ideas? I, for one, don't think that's where the problem lies. We don't want the system? I don't think that's true either since it can be of great value to us as employees. Whatever the reasons, your PAC recognizes that suggestions should continue to be offered. New ideas and changes are vital to personal growth as well as to the hospital. Your ideas are valuable, but you'll have to put them on paper for everyone to see.

Beacon Light

published by
 The Public Relations Department
 of
 The Saint Cloud Hospital
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SUGGESTION AWARD WINNERS. Six staff members were recognized for their participation in the St. Cloud Hospital Employee Suggestion System at special ceremonies held February 6. Pictured above are, from left to right, Tom Fillenworth, Wage & Benefits Manager who served as MC, Eileen Bayer, Pharmacy; John Russell, Nursing Service; Lucille Witte, Nursing Service; and Gene S. Bakke, Executive Vice President, who presented the awards. Seated is Lillian Spaeth, Information Desk. Mrs. Spaeth was a patient at the time the awards were presented and was given permission to attend the ceremonies.

Also receiving awards, but not pictured were: Margaret Lye, Nursing Service; and Andrew Olson, Dietary.



Gene S. Bakke

COMMENT

by

Gene S. Bakke

Executive Vice President

On April 30, 1974, price controls under the Economic Stabilization Act will expire unless continued by Congress. The Nixon Administration has recommended that controls be continued, **but only on health care** (prices of petroleum products are controlled under another federal act until 1975.)

The recommendation that economic controls be continued only on the health field is grossly discriminatory on its face, but it is even more so in view of Consumer Price Index reports for 1973. From January 1, 1973 to December 31, 1973 the over all Consumer Price Index rose 8.8% — during that same period, hospital service charges rose only 3.9%.

At the same time, prices of commodities essential to hospitals to provide patient care rose dramatically. For example, fuel oil and coal rose 43.2%, and food prices increased by 17.7%.

But discrimination does not have much impact unless it affects people. And hospitals, of course, are a community of people — dedicated people who use their skills to enhance, safeguard, and restore health to patients who need their help. Obviously, hospital employees have borne the brunt of the discriminatory practices inherent in the economic controls over the past few years, and now it is being proposed that they be singled out as the only labor force to suffer under the same arbitrary and capricious rules.

There was a time not very many years ago when hospital personnel were inadequately paid, but in the past decade those wage and salary levels were brought up to the point where they compared favorably with other industries. In the past few years, however, because of economic controls, hospital employees have again lost ground. Continuation of controls after April 30, particularly if applied only to health care, would further exacerbate the discrimination that already exists.

The fact that hospital service charges rose only 3.9% last year

is clear proof that hospitals have effectively cooperated in controlling the costs of hospital care. But the reward for this effort is now proposed continuation of even more discriminatory and regressive controls. So repulsive is this action that four major national health organizations have filed suit against the government to restrain it from operating in such an arbitrary and unfair manner. The American Protestant Hospital Association joined with the Catholic Hospital Association to file suit this past January, and the American Hospital Association and the American Medical Association have since taken similar legal action.

There are some who suspect that the federal bureaucracy is attempting to so undermine the financial stability of voluntary, non-profit hospitals as to make government take-over of the nation's hospitals an apparent necessity. Whether this is the strategy or not, the effect will be to jeopardize "the continued existence of our finest hospitals" as stated by AHA President Alex McMahon in recent testimony before a Congressional committee.

If the proposed regressive controls are continued, the biggest loser will, of course, be the patient. With costs of supplies and equipment increasing at a rate of up to 40% per year, and at the same time being allowed to increase hospital income by only 7.5% under the new rules, it is clear that services will have to be cut back in order to maintain financial stability.

It would seem reasonable to suggest that people who are interested in having good health care available to them — the public, hospital employees and others — should write the Minnesota Congressional delegation in Washington urging them to allow the ESP program to expire on April 30. Members of the hospital's Board of Trustees and administrative staff have already done so.

EMPLOYEES COMMENDED. The St. Cloud Hospital Safety Committee has commended staff members for their prompt response to the emergency which occurred in the laundry on March 5. A new folding machine caught fire and was immediately extinguished by members of the laundry and maintenance departments. "Had it not been for their quick response," said Mike Seitz, Director of Safety & Security, "considerable damage could have been done to the laundry."

SCH staff members at the scene of the fire listed their experiences through "hands on" demonstrations held during Fire Prevention Week as the principle reason for their ability to control and extinguish the fire.

Members of the laundry have also thanked SCH's Nursing Staff for their cooperation by economizing on the use of linens while the folding machine was being repaired.

Association Formed To Meet Changing Personnel Needs

Forty-one personnel directors representing hospitals and clinics from throughout the state took part in the first official meeting of the Health Care Personnel Association of Minnesota (HCPAM) which was held at the St. Cloud Hospital in January.

The Association has been formed to provide Minnesota personnel directors working in the health industry with a vehicle through which they can communicate with each other more effectively and to improve effectiveness of the personnel function in non-profit health care facilities in the state.

"Until just a few years ago," said Tom Fillenworth, Wage and Benefits Manager at the St. Cloud Hospital, "most non-profit health care facilities were exempt from many state and federal labor laws, which affected private industry. As a result, most hospitals did not have an established personnel program."

However, in 1969, when the Medicare program was implemented by the Federal Government, hospitals were required to perform more accurate documentation of employee records which resulted in greater centralization of the record-keeping system. To meet this new demand, hospitals began to expand their Personnel Departments, and in many cases, hospitals, along with other health care facilities, had to add a new Personnel Department to handle this function. "In most communities, the hospital is one of the largest employers which indicates the need for a good hospital personnel program", said Fillenworth.

"Now, with equal opportunity employment legislation, OSHA, continual changes in unemployment compensation, workmen's compensation and the minimum wage, health care facilities cannot afford to be without a personnel director and the personnel director cannot afford to be without a good state association to get him authoritative opinions on changes affecting personnel programs", he said.

HCPAM has been formed to meet these demands. Without state as well as Twin City Hospitals participating, the Association plans to develop a well balanced program of work designed to provide Minnesota health care facilities with an effective outline for personnel management.



HCPAM OFFICERS ELECTED. Pictured above along with Saint Cloud Hospital Wage and Benefits Manager, Tom Fillenworth, are the newly elected officers of the Health Care Personnel Association of Minnesota. From left to right they are: Fillenworth; Treasurer, Louis Russo, Personnel Director, Virginia Municipal Hospital, Virginia, Minn.; Secretary, John Brandt, Personnel Director, Immanuel-St. Joseph's Hospital, Mankato, Minn.; and President, Tom Kilian, Personnel Director, Rochester Methodist Hospital, Rochester, Minn. Not pictured is HCPAM Vice-President, Bill Calguire, Personnel Director, Hennepin County General Hospital.

CREDIT UNION NEWS

by Perky Burke

Biggest bit of Credit Union news... the final Annual Meeting, which was preceded by a cocktail hour and dinner, and followed by dancing to the Dave Leonard Trio. The meeting was held at Waite Park Legion Club on Feb. 15... 165 members and their guests attended.

Election of officers gave us Perky Burke, Dave Pflipsen, and Jerry Knuesel, re-elected to the Board of Directors, to serve with Harry Knevel, Claude Przybilla, Harry Affeldt, President, and Mary Kamphake as second V.P.

Elected to the Credit Committee, Esther Merklings, Tom Nahan, and Maynard Lommel, serving with Mike Nierenhausen and Earl Pedersen; and on the Supervisory Committee, Ron Spanier and Dan Boom, serving again with Jim Lange.

At the reorganizational meeting which was held on Feb. 25, interest was held at 5-1/2, 6, and 6-1/2% on Certificates of Deposit, presently. And of course you must know that a whopping 5% is being paid on shares.



Pictured above are the recently elected officers of the St. Cloud Hospital Credit Union. Back row, left to right, are: Jerry Knuesel, Dave Pflipsen, Ron Spanier, Maynard Lommel, Claude Przybilla, and George Nikko, manager of the T&L Credit Union. The front row includes: Harold Affeldt, Jim Lange, Mary Kamphake, Esther Merklings, Perky

Phase IV: Extended Economic Restraints

continued from page 1

while other industries were allowed to give employees more than a 5.5% salary increase and to pass those increases on, as well as any other cost increases they incurred, on a dollar for dollar basis in increased prices." During Phase III, health care was the only industry not allowed to "pass through" cost increases on a dollar for dollar basis, he observed. Since they were required to pay inflated prices for the supplies they needed from other industries, hospitals were forced to absorb large cost increases without corresponding compensation in patient charges.

Under current Phase IV regulations, annual inpatient prices increases are limited to 7-1/2% per admission and a 6% limit has been placed on outpatient services. Seckinger also noted, "that the inpatient regulations also control cost increases for those patients who have their hospitalization covered by a cost reimbursement program." This would include coverage under Medicare, Medicaid and Blue Cross.

"The real danger under Phase IV," said Gene Bakke, Executive Vice President of the Saint Cloud Hospital, "are the restraints it places on the practice of medicine by limiting increases in total inpatient cost and charges per admission to only 7-1/2%.

"While this should not effect hospitals that provide the same kind of care from year to year, it will place a severe financial burden on hospitals that are attempting to meet the needs of their patients by providing expanded medical care, new procedures, or handling more complex cases," he said. Bakke also noted that it would be especially difficult to finance normal cost increases plus new, expanded or improved services from the basic 7-1/2% increase allowed under Phase IV.

"If the American Public wants the best possible health care system, then a 7-1/2% increase in prices and costs per admission may not cover improved services and normal cost increases if more difficult cases with longer patient

stays are necessary," Bakke stated.

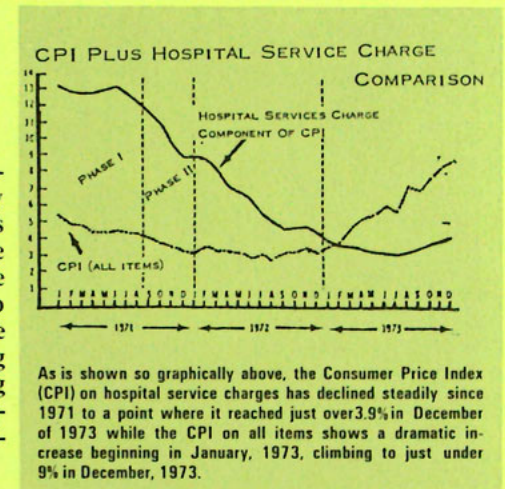
"In addition," he said, "our employees are also getting penalized by the 5-1/2% allowable increase in wages and benefits. Even if we can provide them with the full 5-1/2% total wage increase this year, it will be difficult to expect them to consider it adequate when we look at the total cost of living increases over the past few years along with the 7% to 9% increases other members of the labor force have been receiving."

Bakke also noted that hospitals economic incentives under Phase IV will be to reduce average length of stays for patients. By doing this, hospitals will be able to charge 7-1/2% more per admission. "The position of the American Hospital Association (AHA), the Catholic Hospital Association (CHA), the American Protestant Hospital Association (APHA), and the Saint Cloud Hospital is that the length of patient

rendered are decisions that should be based on medical need as determined by the patient's physician and should not be subject to arbitrary economic restraints imposed by the Government," he said.

Hospitals have responded to the Cost of Living Council by saying that Phase IV controls are not necessary because Professional Standards Review Organizations have been assigned as the regulatory mechanism for controlling patient services and area planning agencies, such as the Central Minnesota Health Planning Council, are the appropriate agency for controlling duplication of services. If these two programs are allowed to function, many hospital administrators cannot see a need for Phase IV controls.

"It is the position of this hospital along with the AHA, CHA, and APHA," said Bakke, "that all Economic Stabilization Controls should be lifted on April 30, 1974. It would not be equitable to continue price and cost controls on selected segments of the economy while the remainder is free of



economic controls.

"Finally," he added, "the hospital industry has out-performed the tests of the economy in fighting inflation and should not be penalized by further controls."

GUESS WHO?



Several attempts were made to guess the identity of the little girl in our last GUESS WHO column; and a drawing had to be held to determine the winner. Diann Psyck, Administrative Pool was awarded the free meal in the new Personnel Dining Room for correctly identifying Pauline Page, SCH's Employment Manager. Now, take a guess at this month's photo. The shovel he's holding might give a clue. He hasn't been here long, but its a cinch he undoubtedly knows you.

OUR RECORD OF SERVICE

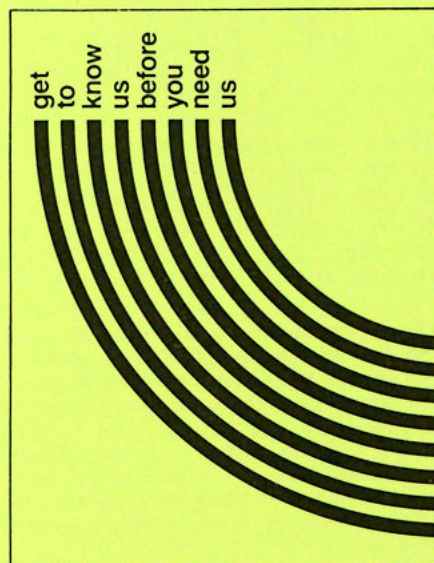
	Admissions	Births	Operations	X-Rays	Lab Tests
January 1974	1569	116	678	4277	26804



Louis Canfield, pictured above receiving his first retirement check from Wage and Benefits Manager Tom Fillenworth, is the first benefactor of SCH's amended Pension Plan. The recently amended pension policy now makes staff members who have been employed 5 years before their normal retirement date eligible to receive pension benefits after 5 years of continuous service. Ted was hired as an Assistant Dishroom Supervisor in 1967 and held that position until he retired on December 1, 1973 at the age of 65.

We hope you'll become better informed about our services and accomplishments and lend your support to the achievement of our goals.

national hospital week
may 12-18



SCH Receives Employee Attitude Survey Results

Tabulated results of the November, 1973, Employee Attitude and Morale Evaluation conducted by W.I. Christopher and Associates, Hospital Consultants, have been submitted to the administration of St. Cloud Hospital.

According to Sam Wenstrom, Director of the Personnel and Public Relations Services Division, a total of 1,037 employees participated in the study, for which there was a three-fold purpose.

1. To identify both the strengths and weaknesses in current employee attitude and morale with regard to administration and working relationships as part of a continuing effort by the hospital administration to evaluate operations and to project new working objectives for the year ahead.

2. To identify any major areas of concern that need prompt attention from administration either in corrective action or corrective communication.

3. To establish priorities for future improvements in the personnel program.

"From just a cursory review of the report," Wenstrom said, "it is evident that we have tremendous support from our personnel for most of our programs. In fact, 85% of the responses to the survey questions were very positive.

"Our job now is going to be to

thoroughly review the report, and to the best of our ability take action to



ABOVE: Sam Wenstrom studies the 326 page employee attitude survey.

reach the three goals which are stated above," he added.

After the survey is analyzed by administration, reports on the study and resulting proposals will be provided to personnel.

Sam Wenstrom, Director of the Hospital's Personnel and Public Relations Services Division studies the 326 page employee attitude survey which was recently compiled by W.I. Christopher & Associates, Hospital Consultants.

FROM THE ST. CLOUD HOSPITAL KITCHENS

This month's recipe will add elegance to any meal or coffee party. It's a tangy desert which is highly favored by SCH staff members.

LEMON DELIGHT

Crust

- 4 egg whites
- 1/4 tsp. cream of tartar
- 1 cup sugar

1. Beat egg whites and cream of tartar until frothy. Add sugar very gradually and continue beating until stiff and glossy.
2. Spread in 9 inch pie pan. Bake at 275 degree oven for 60 minutes. Turn off oven and leave in until cool.

Filling

- 4 egg yolks
- 1/2 cup sugar
- 1/4 cup lemon juice
- 1 cup whipping cream, stiffly whipped
- 2 Tbsp. grated lemon rind

1. Beat egg yolks until thick and lemon colored. Gradually beat in sugar. Add juice and rind.
2. Cook over hot water stirring constantly until thick. Cool.
3. Fill pie shell. Spread with whipped cream.
4. Chill about 12 hours before serving.

Job Evaluations Have Important Role In Determining Employee Wages

by Tom Fillenworth, Wage and Benefits Manager

Defining Job Classifications

Listed below are the 12 factors that are used in defining the requirements of the nearly 250 different job classifications at the St. Cloud Hospital. Included with the factors are just a few examples of the items that are considered in determining their value.

EDUCATION

- High School
- High School plus graduation from a 3 year training program
- Graduation from a recognized college or university

EXPERIENCE

- No experience
- Three to six months specific experience
- One to two years specific experience
- Over 10 years specific experience

CONTACTS

- No contact with the public
- Incidental contact with the public or patients
- Frequent contact with the patient, public and other employees
- Constant or almost continuous contact of a highly important nature with the public at large and with all classes of employees

INITIATIVE AND JUDGMENT

- Requires ability to follow detailed instructions
- Requires ability to follow general instructions
- Requires ability to act independently
- Requires high degree of initiative and judgment

ACCURACY

- Some accuracy required
- Requires accuracy in the performance of work routine
- Requires high degree of accuracy

RESPONSIBILITY FOR WORK OF OTHERS

- Responsible for 1 or 2 assistants performing same kind of work
- Responsible for supervising the work of up to 25 employees
- Responsible for overseeing the detail work of a department
- Responsible for the overall direction and supervision of the entire organization

RESPONSIBLE FOR SAFETY OF OTHERS

- Some responsibility for safety of others
- Responsible for general safety of other employees, patients, and public
- Performing work of such a complex nature that the safety of patients and personnel is a most important factor in the job

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For the past several years, the Hospital's method of determining salaries has relied on a job evaluation system. The recent employee attitude survey conducted by W.I. Christopher & Associates indicated that employees are interested in learning more about this system and its role in determining wage classifications.

Basically in developing a compensation plan, an organization establishes two goals. The goals should be equity and competitive compensation. Equitable compensation means that the pay received by an individual is fair in relation to that of other individuals inside and outside of the place in which he works. Competitive compensation means that the hospital pays enough to attract adequate or better than adequate candidates for new positions.

If an organization is relatively small, it will usually have a simple system to determine wages. However, because we are a large organization with nearly 1400 employees and 250 job classifications, we require a rather complex program.

The system that has been developed here might be distinguished as a numerical or point-rating system. Numbers or points are used to express degrees of skill, responsibility, and application required in most jobs. In view of the wide variety of different jobs inherent to this hospital organization, twelve factors have been selected to define the requirements of each job classification. (Listed in left column).

Our system includes four major phases. To begin with, there must be an up-to-date job description. Next the Wage & Benefits Department evaluates the position described though the use of the job description and personal interviews with the supervisor who wrote it. Following the completion of the evaluation a Job Evaluation Committee and the Wage and Benefits Manager meet to review and approve the point values assigned each of the twelve factors. Finally, an assignment of the dollar value and implementation completes the process.

After a job has been evaluated and located within a range, 5 annual increments have been established. These increments are dependent upon a satisfactory performance appraisal by the supervisor and are granted at the employee anniversary date. In addition to the annual increment, credit may be given in the form of Merit increases for outstanding performance.

The hospital's job evaluation method has been effective in fulfilling its goals of equity and competitive compensation. There is no scientific method, from the standpoint of exact measurement, that exists for the evaluation of uncommon jobs, but we know ours does provide an accurate basis for determining the relative standing of all jobs within the hospital. Our relative standing is regularly verified by doing labor market surveys to determine how our wage scales compare with those of other industries as well as the health care industry.

RESPONSIBILITY FOR EQUIPMENT * SUPPLIES

- Work involves use and handling inexpensive equipment... seldom over \$10
- Work involves use or handling of moderately expensive equipment or supplies... seldom over \$250
- High degree of responsibility for safeguarding complicated and expensive equipment or large volume of supplies... in excess of \$2500

PHYSICAL DEMAND

- Very slight physical effort required, not sustained
- Considerable physical effort required
- Arduous physical work or very difficult work position with constant physical strain or intermittent severe strain

MENTAL DEMAND

- Routine simple job, requiring minimum mental effort
- Fairly diversified job requiring intermittent sustained mental effort
- Highly complicated and diverse job, requiring intense mental effort, superior planning and organization

EMOTIONAL DEMAND

- Some emotional stress or strain involved
- Numerous and constant exposure to situations involving considerable emotional control
- Constant and sustained emotional and psychological tensions

WORKING CONDITIONS

- Good working conditions
- Periodic exposure to unfavorable conditions or hazards
- Constant exposure to intensely disagreeable or dangerous items

One Staff Member Retires After 32 Years; Another Celebrates 30th Anniversary

Sr. Amarita Bartylla, OSB, Accounts Receivable Manager in the Hospital's Business Office, officially retired as an active SCH staff member on February 1. Sr. Amarita began her employment at the hospital in June of 1941. During her 32 years of service to the hospital, she saw the Business Office expand from a scant handful of people that hand-posted each patient account to an office of 19 employees which is using the most modern office equipment available and conducts patient billings through the use of a computer and is ultimately responsible for collecting the nearly \$14 million which is anticipated in patient accounts receivable this year.



Pictured above with Sr. Amarita during a special retirement party that was held in her honor are, left, John Seckinger, Director of the Fiscal Service Division and Wayne Lauerman, Business Office Manager. Sr. Amarita is seated in the rocking chair which was presented to her as a gift from her fellow employees.

Her working days are not, however. Sr. Amarita continues her service to the Order through her employment at the Mother House at St. Joseph.

Completing his thirtieth year as an SCH employee this month is Henry Lutgen, Chief B. Engineer in engineering Services.

Other anniversaries include Lois Leeb, Surgical Technician, Alberta Clement, RN, Delivery Room and Donna Strack, Supervisor, Cafeteria and Dining Room, with 10 years, and the following with five years: Judy Brannan, RN, Floats, Judith Rothstein, RN, 4 No., Marlene Johannes, LPN 5 So., Betty Arndts, RN, Surgery, Clara Bauer, Processing Aide, Central Service, and Linda Eberhoff, Hsking Aide, Housekeeping.

COMING PROGRAMS

EVENT	DATE	REMARKS
Natural Family Planning Group Instruction	March 27, April 3, 10 & 17 7:00 - 9:00 p.m. March 28 9:00 - 9:00 p.m.	Garden Room. For interested parents. Detailed information may be obtained by calling Natural Family Planning Office in the Saint Cloud Hospital.
Zonta Meeting	March 28 7:00 - 10:00 p.m.	Ramsay Room. A dinner meeting will be held for Zonta Club in the St. Cloud Area.
Pre-Surgical Party	April 3 & 17 7:00 p.m.	Busch Room. Sponsored by Pediatric Dept. Open to parents and children schedules for surgery. Includes tour of Pediatric Dept. and introduction to personnel and policies. Guests report to Information Desk. Refreshments served—one hour.
Health Explorer Scouts	April 8 & 22 7:00 p.m.	Rehab Conference Room. Meeting for Health Explorer Scouts.
Candy Striper Meeting	April 8 7:00 p.m.	Pierz Room. Open to all Candy Stripers.
Medical Staff Meeting	April 9 7:00 p.m.	Hoppe Auditorium. Meeting for all members.
Calix Society	April 13 - 7:00 p.m.	Holy Hour for Calix Society Members in the Hospital Chapel.
	April 14	Breakfast meeting after mass in the Busch Room.
Birthright Meeting	April 15 7:30 p.m.	Pierz Room. Open to interested people.
Expectant Parents Class	April 15, 22, 29, May 6 and 13 6:30 - 9:00 p.m.	A series of five weekly classes are conducted by the personnel of Saint Cloud Hospital which include family nutrition and health habits with modification for the pregnant mother, etc. Registration \$3.00 per couple (For information call 251-2700, Ext. 256)

Beacon Light

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