

GOVERNOR EDWARDS' REMARKS AT DEDICATION OF ANDERSON MEMORIAL
HOSPITAL FAMILY PRACTICE CENTER AND CHILD CARE CENTER.

MONDAY, JULY 12, 1976

3:00 P.M.

I AM HAPPY TO JOIN YOU TODAY TO DEDICATE THESE TWO FINE FACILITIES. THEY REPRESENT MANY HOURS OF DREAMING AND PLANNING FOR MOST OF YOU.

THE FAMILY PRACTICE CENTER HAS TREMENDOUS POTENTIAL AS A TRAINING GROUND FOR OUR FAMILY PRACTITIONERS.

THE CHILD CARE CENTER REPRESENTS A NEW APPROACH -- AND A RESPONSIBLE ONE -- TO MEETING HEALTH MANPOWER NEEDS AND TO CUTTING ADMINISTRATIVE COSTS.

THESE TWO CENTERS ARE GOOD NEWS FOR ME AND FOR THE CONCERNED PEOPLE OF SOUTH CAROLINA. IT IS ONLY FAIR THAT WE RETURN THE FAVOR AND BRING YOU SOME GOOD NEWS OF OUR OWN.

I AM PLEASED TO ANNOUNCE THAT THE APPALACHIAN REGIONAL COMMISSION HAS APPROVED MY RECOMMENDATION OF TWO HUNDRED SEVENTY-TWO THOUSAND, ONE HUNDRED TWENTY-FIVE DOLLARS FOR THE THIRD YEAR'S OPERATION OF YOUR FAMILY PRACTICE PROGRAM.

THIS GRANT REPRESENTS A LITTLE MORE THAN ONE-THIRD OF THE COST OF THE PROGRAM. YOUR MATCHING CONTRIBUTION OF FOUR HUNDRED FORTY-SIX THOUSAND DOLLARS IS PROOF THAT YOU BELIEVE IN THE LONG-RANGE BENEFITS OF THIS PROJECT.

THERE ARE MANY OF YOU WHO DESERVE -- AND WILL RECEIVE -- SPECIAL THANKS FOR YOUR EFFORTS. BUT I DO WANT TO SINGLE OUT A FEW.

DR. JIM HALFORD GOT CURIOUS ABOUT THE FAMILY PRACTICE PROGRAM AND INDICATED HE WANTED TO LEARN A LITTLE MORE ABOUT IT. HIS "EDUCATION" IN THIS AREA WAS MORE THAN HE BARGAINED FOR. HE HAS GIVEN UP HIS MEDICAL PRACTICE TO RUN YOUR PROGRAM. I CAN'T THINK OF A FINER EXAMPLE OF COMMUNITY SERVICE THAN HIS.

OF COURSE, KIRK OGLESBY, THE CAPABLE ADMINISTRATOR HERE AT ANDERSON MEMORIAL, DID MORE THAN HIS SHARE. AND YOU WERE FORTUNATE THAT DR. TOM COLLINS AND DR. CARROLL BOWIE (BOO-EY) PERFORMED EXCELLENT LIAISON ROLES AS MEMBERS OF THE APPALACHIAN HEALTH COUNCIL.

A GREAT DEAL OF CREDIT FOR THE FAMILY PRACTICE RESIDENCY PROGRAM IN THIS STATE ALSO GOES TO DR. HIRAM CURRY OF THE MEDICAL UNIVERSITY, SOUTH CAROLINA NOW LEADS THE NATION IN THE NUMBER OF FAMILY PRACTICE RESIDENTS PER CAPITA.

IN FACT, THE FIRST RESIDENCY PROGRAMS APPROVED OUTSIDE OF A MEDICAL UNIVERSITY INCLUDED GREENVILLE AND SPARTANBURG. YOUR PROGRAM HERE IS A DIRECT RESULT OF THOSE SUCCESSES. THIS SYSTEM IS ALREADY A MODEL FOR OTHERS.

FAMILY PRACTICE IS ONE OF THE NEWEST RECOGNIZED SPECIALTIES. IT'S ONLY BEEN AROUND SINCE 1969, BUT IT IS THE ONLY SPECIALTY FIELD WHICH REQUIRES CONTINUING EDUCATION AND RECERTIFICATION.

FAMILY PRACTITIONERS DIFFER FROM OTHER SPECIALISTS IN THAT THEIR TRAINING IS BROAD, RATHER THAN NARROW. THIS SPECIALTY EMPHASIZES PREVENTIVE MEDICINE, WHERE MOST OF THE OTHERS ARE CRISIS-ORIENTED.

THE SETTING OF THE TRAINING PROGRAM MUST ALSO BE

DIFFERENT, FOR THE FAMILY PRACTICE RESIDENT MUST TREAT PATIENTS AS WHOLE PERSONS AND CONSIDER FAMILY RELATIONSHIPS. HE MUST BE PREPARED TO DIAGNOSE AND TREAT A VARIETY OF COMMON PROBLEMS. FOR THIS REASON, THE RESIDENT SPENDS MORE AND MORE OF HIS TIME IN AN AMBULATORY CARE SETTING. HE LEARNS TO WORK IN HARMONY WITH THE OTHER COMMUNITY HEALTH FACILITIES, AND HE GAINS APPRECIATION FOR THE RESEARCH CAPABILITY OF THE STATEWIDE COMPUTER RECORDS PROJECT.

THERE ARE MANY ADVANTAGES TO BE DERIVED FROM THIS FAMILY PRACTICE PROGRAM. YOU NOW HAVE FOURTEEN RESIDENTS IN YOUR PROGRAM, AND YOU'LL EVENTUALLY HAVE TWENTY-FOUR, WITH EIGHT GRADUATING EACH YEAR. THIS CENTER NOW PROVIDES PRIMARY MEDICAL CARE TO FIVE HUNDRED SEVENTY-FIVE FAMILIES UNDER THE SUPERVISION OF FOUR FULL-TIME FACULTY MEMBERS AND MANY OTHER EXPERIENCED PHYSICIANS WHO VOLUNTEER THEIR TIME. EACH OF THESE FAMILIES GETS TOTAL TREATMENT, BUT A HEALTHIER POPULATION IS ONLY ONE OF THE BENEFITS.

WE HEAR A GREAT DEAL THESE DAYS ABOUT THE SHORTAGE OF PHYSICIANS. STUDIES SHOW THAT MOST DOCTORS GO INTO PRACTICE NEAR THE PLACE THEY TOOK THEIR RESIDENCY PHASE OF TRAINING. FORTY-ONE FAMILY PRACTITIONERS HAVE GRADUATED FROM THE MEDICAL UNIVERSITY SINCE THE PROGRAM BEGAN IN 1970. OF THOSE, TWENTY-ONE ARE STILL IN SOUTH CAROLINA AND NINE PLAN TO RETURN AFTER THEY FINISH TOURS IN THE ARMED FORCES OR THE NATIONAL HEALTH SERVICE CORPS. THE APPALACHIAN AREA IS THE FASTEST-GROWING IN THE STATE, AND I DON'T HAVE TO TELL YOU WHAT MORE FAMILY PRACTITIONERS A YEAR CAN MEAN TO THIS COMMUNITY.

AS A MEDICAL PROFESSIONAL FROM AN AREA NEAR A TEACHING HOSPITAL, I CAN ATTEST TO THE BENEFITS THAT THE ENTIRE HEALTH CARE SYSTEM DERIVES FROM THE INFLUENCE OF A TEACHING PROGRAM. STANDARDS OF MEDICAL PRACTICE IMPROVE WITH EACH PASSING DAY, BUT THEY MUST BE USED BEFORE THE PUBLIC CAN REAP THE REWARDS. THIS COMMUNITY TEACHING PROGRAM WILL ENABLE THE PRACTICE OF MEDICINE TO KEEP PACE.

NOW, LET ME DIRECT YOUR ATTENTION TO THE CONCEPT OF YOUR CHILD CARE CENTER. THIS CENTER SERVES A TRAINING PURPOSE FOR TRI-COUNTY TEC'S CHILD DEVELOPMENT ASSISTANTS PROGRAM.

MORE IMPORTANTLY, IT IS DESIGNED FOR CHILDREN OF HOSPITAL EMPLOYEES. YOUR HOSPITAL HAS, VERY WISELY I THINK, MOVED TO STRENGTHEN THE FAMILY UNIT BY PROVIDING CHILD CARE AS PART OF ITS EFFORT TO ATTRACT HIGHLY QUALIFIED STAFF.

IT IS A FACT OF LIFE THAT CHILDREN MUST HAVE OPPORTUNITIES FOR SOCIAL AND EMOTIONAL GROWTH. BEING A PARENT IS A RESPONSIBILITY THAT CANNOT EASILY BE COMBINED WITH A CAREER. YOUR CHILD CARE CENTER IS COMMITTED TO FOSTERING FAMILY UNITY BY ENCOURAGING CLOSE INTERACTION BETWEEN WORKING PARENTS, CHILDREN AND THOSE WHO CARE FOR THEM.

THIS CENTER ALSO MAKES SENSE FROM AN ADMINISTRATIVE POINT OF VIEW. EMPLOYEE ABSENTEEISM AND TURN-OVER COST MONEY. ADMINISTRATIVE COSTS CAN BE LOWERED BY PROVIDING ON-SITE CHILD CARE. IN ADDITION, WE BELIEVE THAT HOSPITAL

EMPLOYEES CAN BE MORE EFFECTIVE WHEN THEY KNOW THAT THEIR CHILDREN ARE RECEIVING QUALITY CARE.

YOUR HOSPITAL PROVIDES MUCH MORE THAN CUSTODIAL CARE. THIS CENTER PROVIDES MORE THAN BABY-SITTING. AS A LABORATORY FOR CHILD DEVELOPMENT TRAINEES, THIS CENTER OFFERS A VARIETY OF EDUCATIONAL PROGRAMS IN A COMPREHENSIVE SETTING.

BOTH OF THESE NEW PROGRAMS RECEIVED ASSISTANCE FROM THE APPALACHIAN HEALTH COUNCIL. THE HEALTH COUNCIL HAS BEEN A LEADER FOR THE STATE AND THE NATION SINCE ITS BEGINNING. ITS PROGRAMS IN PREVENTIVE HEALTH CARE, RURAL HEALTH CARE, HEALTH MANPOWER DEVELOPMENT AND EMERGENCY MEDICAL SERVICES HAVE DEVELOPED INTO A SOLID SYSTEM FOR THIS AREA.

EARLIER THIS YEAR, THE COUNCIL WAS DESIGNATED THE HEALTH SYSTEMS AGENCY FOR THESE SEVEN COUNTIES. THIS IMPORTANT DESIGNATION REFLECTS THE CONFIDENCE THAT ALL OF US HAVE PLACED IN THE COUNCIL AND ITS STAFF. FOR MUCH OF THE NATION, THE NEW HEALTH PLANNING AND DEVELOPMENT STRUCTURE

IS DIFFERENT... BUT I DON'T EXPECT YOU WILL NOTICE MUCH OF A DIFFERENCE. HEW HAS, IN EFFECT, RECOGNIZED THE VALUE OF THE SYSTEM YOU ALREADY HAD.

THE HEALTH COUNCIL'S LEADERSHIP HAS PROVIDED ANDERSON AND ITS SISTER COUNTIES WITH DIRECT AND INDIRECT SERVICES FAR TOO NUMEROUS TO LIST. SINCE 1968, ALMOST FOUR-POINT-SIX MILLION DOLLARS IN ARC FUNDS HAS BEEN SPENT IN ANDERSON COUNTY ALONE FOR HEALTH AND CHILD DEVELOPMENT.

THE BEST EXAMPLE I CAN GIVE YOU OF YOUR COUNCIL'S LEADERSHIP IS THE HABIT THE STATE HAS FALLEN INTO IN BORROWING PEOPLE FROM YOU. BOTH JIM KEASLER AND BILL WORKMAN CAME TO MY STAFF BY THAT ROUTE, AND OTHER FAMILIAR FACES WILL BE SERVING THE STATE IN APPOINTED ADVISORY POSITIONS.

YOU COMPLIMENT ME WITH YOUR INVITATION TO BE HERE, BUT I APPLAUD YOU FOR WHAT YOU HAVE ACCOMPLISHED AND FOR WHAT I'M SURE YOU WILL ACHIEVE IN THE FUTURE.