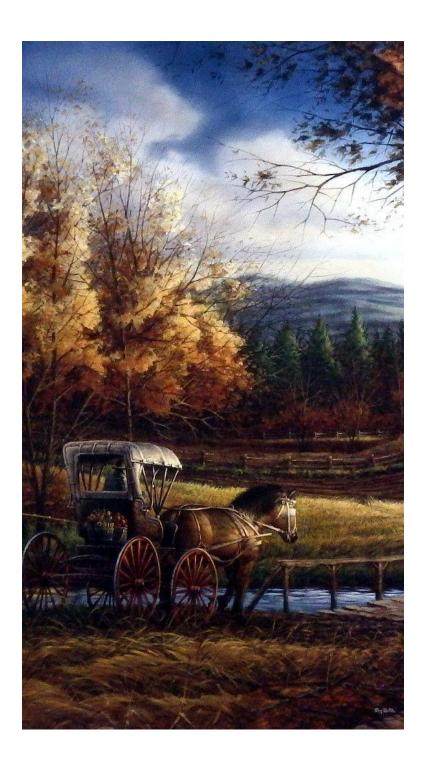
#### **History of Pine County Health Care**

Sources: Newspaper clips from the Pine County History Museum, historical reports.



#### Introduction

The North Pine Area Hospital District (Hospital District) proudly marks its 35th anniversary, commemorating its formation in 1989 when it was established to rescue our struggling hospital. Like many rural communities, we have faced considerable challenges in maintaining access to quality healthcare, but our community has consistently risen to meet those challenges. From the days of the early pioneers to the present, our leaders have continuously sought and implemented solutions to safeguard our healthcare system.

Understanding the history of healthcare in our region is essential to building a stronger, more resilient system that serves the needs of our community—now and in the future. Recognizing healthcare as a fundamental need, our leaders, despite hardships, have persevered from the early days of Pine County to today. This historical account begins with the health practices of the area's Native American inhabitants and continues through the mid-1800s with the arrival of white settlers, each group contributing its own unique health challenges and solutions.

#### **Early Health Care of Native Americans**

**Pre-Colonial Era:** Before European settlement, the area now known as Pine County was inhabited by various indigenous peoples, including the Ojibwe (Anishinaabe) and Dakota (Sioux) tribes. These communities had their own traditional healing practices, often involving herbal remedies, spiritual ceremonies, and communal care systems. While detailed written records of these practices are limited, oral traditions and archaeological evidence provide valuable

Throughout this period of development, indigenous healing traditions continued to influence healthcare practices in Pine County. Efforts to integrate traditional indigenous knowledge with Western medicine have grown in recent decades, with initiatives aimed at improving cultural competency among healthcare providers and incorporating indigenous healing practices into mainstream healthcare settings.

insights into their healthcare methods.

The American Indian tribe who lives in the Sandstone, Minnesota area is primarily the Anishinaabe, which means "the original people." Europeans named them Ojibwe, but nobody is exactly sure how this name developed. The Anishinaabe have a rich cultural heritage and have inhabited the region for centuries, relying on the land for sustenance and spiritual connection. Today, many Anishinaabe communities continue to thrive in the area, maintaining their traditions and contributing to the state's diverse cultural tapestry.



The Anishinaabe utilized a wide range of plants and herbs for medicinal purposes. They had extensive knowledge of local flora and their healing properties. Plants like white cedar, sage, sweetgrass, and cedar were commonly used for different ailments. Sweat lodge ceremonies were also an important part of Anishinaabe healing practices. These ceremonies involved participants entering a small, enclosed space heated by hot rocks, where they would sweat

out toxins and engage in spiritual purification.

The Chippewas learned that the pitch of the balsam fir would help a headache. The umbrella plant was applied as a poultice for a sprain, and wild sarsaparilla was good for the blood. [...] Wild ginger was good for a pain in the stomach and the fern helped to relieve insect bites, of which there were many."

Anishinaabe healers, often referred to as medicine men or women, conducted various rituals and ceremonies to promote healing. These rituals might involve chanting, drumming, smudging (burning sacred herbs), and other spiritual practices aimed at restoring balance and harmony. Massage and hands-on healing techniques were also part of Anishinaabe medical practices. Healers would use touch to manipulate muscles, joints, and energy fields to alleviate pain and promote healing.



The Anishinaabe believed that illness could be caused by spiritual imbalances or disharmony with the natural world. Therefore, spiritual

healing was an integral part of their medical system. This might involve seeking guidance from ancestors, performing ceremonies to restore spiritual balance, or receiving blessings from spiritual leaders.

#### **Pioneer Settlers**

The arrival of European settlers in the 19th century brought significant changes to the region's healthcare landscape. As settlers established towns and infrastructure, they introduced their own medical practices, often based on Western concepts of medicine. However, interactions between settlers and indigenous communities were not always harmonious, and diseases introduced by Europeans, such as smallpox, had devastating effects on indigenous populations. These diseases led to significant declines in their numbers and altered traditional healthcare systems.

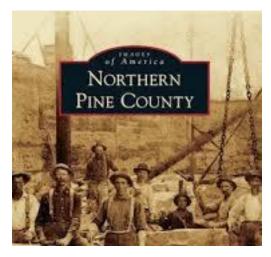
#### **Pine County Beginnings**

Pine County was organized on March 1, 1856, with territory partitioned from Chisago and Ramsey counties. The original county seat was Chengwatana. It was named for its abundant pine tree growth. In 1857, Buchanan County in full and the southern parts of Aitkin and Carlton Counties were formed from the original Pine County, with Kanabec County organized a year later. In 1861, Buchanan County was dissolved and folded into Pine

County. Pine County was reorganized in 1872, with Pine City named as the county seat for the remaining smaller area.

#### Health Dangers of Pine County Industries of the Late 1800s and early 1900s

Pine County had a population of 4,052 in 1890 and nearly tripled by 1900 to 11,546. In 2023 the population was 30,197. Lumbering and sandstone quarrying were the primary industries in the county in the late 1800 and early 1900s.



#### **Sandstone Quarrying**

Sometime around 1885 William H. Grant opened the first Quarry on the Kettle River near what is now Sandstone. In the late 1800s, sandstone quarrying posed significant dangers to workers primarily due to the lack of safety regulations, primitive tools, and the inherent risks of rockfall, dust inhalation (silicosis), heavy manual labor, and potential cave-ins, often resulting in serious injuries and fatalities, particularly when using rudimentary blasting techniques.

#### Logging

The logging industry in Pine County began around 1850 and continued until about 1910. It emerged after the trapping industry declined and the government sold prairie land to pioneers in need of timber for building homes. Logging white pine in Pine County was a dangerous occupation, plagued by epidemics like smallpox and typhoid, particularly since many logging camps did not maintain high standards of cleanliness. Cuts and minor wounds were often treated with balsam pitch or a pinch of chewed tobacco.



The Snake River served as a crucial route for transporting

logs to the mills on the St. Croix River. Logging in the late 1800s was particularly hazardous due to the reliance on manual labor and hand tools like axes and saws. Loggers faced harsh weather conditions, rugged terrain, and the constant risk of falling trees. They also contended with potential log jams in rivers during transport and limited safety measures, which often led to serious injuries or fatalities. The most significant dangers included being crushed by falling trees, getting caught in log jams, or sustaining injuries from flying debris while moving logs with horses or oxen.

#### **Epidemics**

#### 1882

Smallpox struck the North Country's logging camps. For instance, the Brainerd police blocked panicked lumberjacks from fleeing the sick zone for Duluth or the Twin Cities. Eventually, health officials vaccinated the laborers and burned the infected camps.



#### 1900

A diphtheria epidemic occurred, followed by outbreaks of typhoid fever, diphtheria, and cholera in 1906. Although diphtheria is documented as far back as ancient Egypt and Greece, severe recurring outbreaks began only after 1700. One in ten children infected died from the disease, which primarily affected those under the age of five. Until treatment became widely available in the 1920s, diphtheria was viewed as a near-certain death sentence.

#### Natural Disasters - The Great Hinckley Fire of 1894

On September 3, 1894, the lumber town of Hinckley was engulfed in fire that killed over 400 citizens. The summer had been hot and dry, and the citizens often fought fires that started from sparks from the passing trains. The lumbering 'slash' left over provided excellent fire fuel. The photo to the right shows main street after the fire.



#### The photo on

the left is the fire relief house built on Court Avenue in Sandstone for victims of the Hinckley. Many survivors had severe burns, and some died of their injuries. Others had their eyes swollen shut and were unable to see. Heavy wool clothing saved one young woman, since it did not burn as easily as cotton. Many survived by submerging themselves while enduring intense heat and fire.

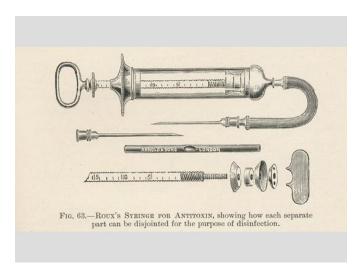
Another hundred died of suffocation in a swamp. Many suffocated while taking refuge in root cellars and wells or died when the fire overcame them. Eighty Sandstone citizens died in the fire, and many survivors took refuge in the cold Kettle River. At least twenty-three Ojibwe people died in their hunting camp on the eastern shore of Mille Lacs. The fire had melted their rifles and shotguns.

#### **Pioneer Health Challenges**

(source: Hennepin History Museum Blog)

"The Minnesota frontier could be a frightening place to have an illness by today's standards. Travel was slow, medical education was unregulated, and medicines were often limited to what you could make with the plants at hand. Many of these medicines that early white colonists in Minnesota used were remedies that had been learned from Native Americans."

The public health responsibilities of both local and state governments in Minnesota date back to the mid-1800s when towns and cities were authorized to enact regulations for controlling infectious disease. They formed township boards of health, and all early public health work was done at the local level. There was no central or organized public health body in the state.



In the late 19th and early 20th centuries, as Pine County developed, rudimentary medical facilities began to emerge. These included small clinics, often operated by individual physicians or community organizations, which provided basic healthcare services to local residents. However, access to medical care remained limited, especially in rural areas, and the quality of healthcare varied widely. The Hinckley Hospital was one of the earliest medical facilities in Pine County, serving the community in and around Hinckley. While

precise dates of operation may vary, records indicate that the hospital was established in the late 19th or early 20th century.

Sources: 'History of Pine County, Minnesota' by the MN Historical Company, and local historical archives and records maintained by the city of Hinckley and the Pine County Historical Company.

#### State Board of Health Established in 1872

Minnesota established a state board of health in 1872 just 14 years after becoming a state in 1858. It was the third such board in the United States. Previously, the state's public health services were coordinated locally, which made it difficult to control sanitation and disease across town lines.

On March 4, 1872, the Minnesota State Legislature passed Hewitt's legislation with no opposition, and the Minnesota State Board of Health was established. Hewitt was the first Secretary of the Board. At the turn of the twentieth century, the State Board of Health was also especially concerned with immigrants and lumberjacks. Under Hewitt's leadership, the Board advocated quarantine for Minnesota residents with diphtheria. The same quarantine system was used to segregate immigrants from other travelers, whether they were ill or not. This was particularly true at the height of the 1892 cholera epidemic.

#### 20th Century Health Care



Licensing doctors was not enough by itself to elevate the quality of medical practice in Minnesota. In 1888
Minnesota medical leaders sought to improve care by standardizing medical education under the umbrella of the University of Minnesota, the state's land-grant university. By 1909, all the state's small, proprietary medical colleges had merged into the University's College of Medicine. As Minnesota's only medical school, the College of Medicine offered medical students basic science and laboratory experience, and clinical education in its hospital, which also provided care for the

state's poor. Two years later, Minnesota became the first medical school in the nation to require a year of hospital experience (internship) for the MD degree.

In the early 1900s health care was virtually unregulated and health insurance, nonexistent. The few hospitals that existed provided minimal therapeutic care. Both physicians and hospitals were unregulated.

#### Aspirin – Early 20th Century Medicine

Aspirin was one of the earlier remedies made available for all. The first tablet form of aspirin appeared in 1900, creating an ease of use that quickly expanded the drug's recognition among professionals. Medical reports highlighted the benefits of aspirin, and its popularity reflected the already significant use of salicylic compounds, coupled with the fact that this new drug was considerably safer and comparably less toxic. In 1915 aspirin became available to the public without a prescription, making it arguably the first modern, synthetic, over the counter, mass-market medicine and a household name around the world.



Starting in the 1920s, health care became more expensive, putting medical advances beyond the reach of many Americans. Attempts to establish a national system of insurance repeatedly failed, but activist citizens and health professionals worked to expand access by creating public health services, developing new types of coverage, and fighting hospital discrimination. [Source: National Library of Medicine]

It is these activist citizens and pioneers of health care that helped Pine County to innovate and bring quality health care to the area.

#### **Health Care in the Early 1900s**



In the early 1900s, surgery was a much more invasive procedure. Surgeons often made large incisions to access the affected area, and recovery times were long. Today, many surgeries can be performed using minimally invasive techniques, such as laparoscopy and robotic surgery. However, the 20th century witnessed many truly revolutionary advances in health care. Research into the causes of infectious diseases and the development of vaccines and pharmaceuticals remedied the once-

devastating illnesses such as polio and smallpox.

The 20th century witnessed some notable public health advancements in America: improvements in the water supply, and control of several infectious diseases through vaccines and antimicrobial drugs. These advancements increased life expectancy with enormous improvements in survival rates of mothers and their infants.

In 1921 insulin production began when 10.5% of the US population (34.2 million) had diabetes. By mid-1922 mass production of insulin was underway. Soon after this, penicillin was discovered in 1928 and became a powerful lifesaver. Prior to penicillin, treatment of infections ranged from draining of the blood, to moldy bread, to mercury IVs. They were widely ineffective and lead to serious side effects that were not much better than the infection being treated.

#### **Pine County Health Care Develops**

In the late 19th and early 20th centuries, as Pine County developed, rudimentary medical facilities began to emerge. These included small clinics, often operated by individual physicians or community organizations, which provided basic healthcare services to local residents. However, access to medical care remained limited and the quality of healthcare varied widely. The Hinckley Hospital was one of the earliest medical facilities in Pine County, serving the community in and around Hinckley. While precise dates of operation vary, records indicate that the hospital was established in the late 19th or early 20th century.

Sources: 'History of Pine County, Minnesota' by the MN Historical Company, and local historical archives and records maintained by the city of Hinckley and the Pine County Historical Company.

#### **Private Sandstone Hospital Established in 1919**

Drs. H.P. Dredge and B. S. Bohling established the Sandstone Hospital in 1919. Dr. Bohling died at age 44 in 1930.

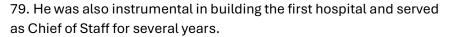
**Dr. Homer P. Dredge** (1870 -1958) arrived in Sandstone by boxcar in 1903. and with his horse and buggy and a few medical supplies he served the community for 49 years. In the early years he was a



true pioneer doctor traveling with his team of horses caring for the residents of Pine County. He retired in 1952 as the village health care officer. Dr. Dredge was instrumental in securing Sandstone

for the location of the county hospital, and he was the first person to be inducted in Sandstone's Hall of Fame.

**Dr. Edwin G. Hubin** (1894 – 1973) came to Sandstone in 1947 and practiced until his death at the age of





#### **Expansion and Modernization of Mid-1900s**

Over time, Pine County saw the expansion and modernization of its healthcare infrastructure. Hospitals, clinics, and public health services became more prevalent, offering a wider range of medical treatments and interventions. Improved transportation and communication networks facilitated better access to healthcare for residents across the county. In the mid-1900s the Minnesota Department of Health licensed the following Sandstone health care facilities:

- Neidegard Maternity Home, 1944-1948.
- State Hospital, 1951-1959.
- Pine County Memorial Hospital, 1946 -1977.
- Pine County Memorial Nursing Home, 1967-1977.
- Sandstone Nursing Home, 1961-1968.

#### Pine County Memorial Hospital Construction Begins - 1956

Construction of the Pine County Memorial Hospital in Sandstone began in 1956. The hospital



initially had 27 beds, later increasing to 30 to meet growing demand for acute care beds.

Nearly 5,000 people attended the open house on June 30, 1956. Dr. Robert N. Barr, the Secretary and Executive Officer of the

Minnesota Department of Health, was the principal speaker at the dedication ceremony. He discussed the changing demographics, technological advances, and the increasing numbers of young and elderly people compared to the working-age population. Dr. Barr emphasized that the hospital would need "the cooperation and support of all concerned."

The hospital operated in this capacity until 1977.

### Health Care of the 1960s (Source National Library of Medicine)



"The structure and financing of the health system made little intuitive sense. More than 70 percent of the population had some form of hospital insurance by 1965 (though less than one-half of the elderly population did), 67 percent had surgical insurance, and there was a growing market for major medical insurance (Health Insurance Institute, 1980). But few were insured for primary or out-of-hospital care. Of the members of the general population who reported they had "pains in the heart," 25 percent did not see a physician (Andersen and Anderson, 1967)."

#### Sandstone Nursing Home was opened in 1962.

The 46 bed Sandstone Nursing Home was built on one level with 'a pleasant way of life for the convalescent or long-term care patient.' The home-like facility was equipped with oxygen treatment, electrical call system for each bed and bathroom, physical therapy equipment such as walkers,



exercise bars. It was located across from the Pine County Memorial Hospital. In 1967 Pine County assumed ownership of the Sandstone Nursing Home.

#### **New Sandstone Clinic 1964**

A new Sandstone Clinic was built from a Sears Roebuck kit. In the 1920s the Sears Roebuck company augmented its catalog business with retail stores to cater to an increasingly mobile and urban population.



#### **Health Care Expansion and Challenges: 1977 - 1984**

#### 1977: Long-range Plans for Sandstone Hospital and Nursing Home by Pine County.

The plan emphasized that the health delivery system must meet the 'needs of the people, be cost effective, develop continuum of quality care and be 'realistic.' This combined the planning for the north and south Pine county areas – Sandstone Area Hospital with the Nursing Home (townships of Arna, Arlone, Barry, Bremen, Bruno, Clover, Danforth, Danforth, Dell Grove, Finlayson, Fleming, Hinckley, New Dosey, Ogema, Park, Partridge, Pine Lake ,Sandstone, Wilma and the cities of Askov, Bruno, Finlayson, Hinckley, and Sandstone) the Lakeside Nursing Home in Pine City (townships of Brook Park, Mission Creek, Munch, Crosby, Pokegama, Chengwatana, Royalton, Pine and cities of Brook Park, Henriette, Pine City and Rock Creek).

The Board of Directors of the Sandstone Area Hospital and Nursing Home was "responsible for the management of the facilities and must accept and assume this responsibility." They were organized in conformance with the by-laws submitted to the Pine County Board.

**1984:** The Sandstone Area Hospital and Nursing Home, Inc. was incorporated as a non-profit Hospital Corporation. The emergency room, intensive care unit, nursery and birthing rooms were remodeled in 1984. Another 40 nursing home beds were added in 1983, increasing the total nursing home beds to 86. Sandstone Area Hospital and Nursing Home open house was on May 19, 1984.



**1985:** The Hospital Corporation acquired the Sandstone Clinic, which was established in 1964 and operated by a private

physician from 1968 – 1977. Sandstone sells the clinic building to the Sandstone Area Hospital after 'months of involvement in the problems of the Sandstone Area Hospital.' The city wanted to 'get out of the business of hospital administration.' Nation Bank of Askov handled the transaction. The Clinic building was sold for \$1,000.00 upon the condition that the hospital assume the remaining mortgage of \$13,200.

**1987:** The Hospital Corporation transferred the Clinic to Sandstone Medical Group, Inc., a Minnesota non-profit corporation incorporated in 1987.

Rumors were circulating that the Sandstone Clinic was going to close. Their Board members were Curt Nelson, Chairman, Irene Sandell of Sandstone, John Bassett, Hinckley, Elaine Steeg of Finlayson, Harriet Bostrom of Hinckley, Greg McGough of Markville, and LeRoy Boster of Bruno. The 'severe cash flow problems at the Sandstone hospital, nursing home and clinic ...' prompted urgent action.

# Sandstone Area Hospital, Nursing Home, Medical Group struggle for health care services

By Jay Pottenger, Administrator

Sandstone Area Hospital, Nursing Home and Medical Group is struggling to keep health care services in the area. Without a hospital in Pine County, portions of the county would not have access to emergency services within 30 minutes.

We feel it is the recognitility of th

contact their local county commissioners and encourage them to support our request which needs action on Sept. 5th, 1989. The commissioners for the north and central portion of Pine County are:

Glen Danelski, Rt. 2, Sturgeon Lake MN 55783, (218) 372-3325; Everette Koecher, Kerrick, MN 55756, (218)

#### **Solution Found for Health Care Challenges**

#### North Pine Area Hospital District Established to Save the Hospital - 1989

The Minnesota legislature created Hospital Districts recognizing that many rural areas struggle to



provide quality healthcare. Thus, they gave Hospital Districts taxing authority to fund either the building of hospital facilities and then leasing it to a third-party provider or provide and manage the services themselves. The North Pine Area Hospital District chose to lease the facility to an experienced hospital provider, Essentia Health and its predecessor.

Leaders in the community took advantage of this

public policy to save the Sandstone Hospital. The Minnesota Legislature, however, had to meet in Special Session to pass an amendment that would allow the formation of the Hospital District. 5 cities, and 9 townships passed resolutions to form and join the North Pine Area Hospital District.

The cities were Askov, Hinckley, Sandstone and Willow River. Townships were Arlone, Clover, Danforth, Dell Grove, Finlayson, Hinckley, Ogema, Partridge, and

# Area meetings held on becoming a hospital district

By Dorothy Jamison

Meetings are being held in the area on becoming a hospital district. Many of you have heard of the problems of hospitals, in general, and rural care unit on an average of twice a day and Finlayson people, for example needed and used the emergency care unit on an average of once a day. People with an Askov address used the Sandstone. The cities of Bruno and Finlayson and townships of Park and Pine Lake came later.

A newspaper editorial by Dorothy Jameson, stated that 'In these special times when Medicare does not adequately reimburse rural hospitals, when we need the interest and support of all who use this facility, and when health care in our area is threatened, it has been decided to seek to become a hospital district."

#### Final Action in 1989 Establishes the North Pine Area Hospital District

On May 3<sup>rd</sup>, 1989, Sandstone passed the hospital district resolution approving the creation of a North Pine Area Hospital District (Hospital District). Dell Grove and Hinckley Townships had already passed their resolution and others soon followed. On Sept. 28, 1989, there was an election for the Board representative for each community. The Hospital District formation became effective October 1, 1989.

The North Pine Area Hospital District was established with the assets and liabilities of the Hospital Corporation being transferred to the Hospital District. The Hospital District then hired Health One Corporation of Minneapolis in February of 1990 to 'see if there was any hope for the ailing hospital and home. Deeply in the red, the hospital could have been on the verge of closing" stated Patrick Renner, the administrator of the Hospital District. Health One had the expertise to handle all



aspects of the hospital. Therefore, the Hospital District contracted with Health One to manage

the hospital but retained control over Health One.

**1990 Board members included**: Chris Thorvig (Sandstone), Elwyn Nelson (Arlone), Curtis Nelson (Clover), Pastor David Tyree (Danforth), Peggy Cahoon (Dell Gove), Ruth Myrvold (Finlayson Township), Chuck Schneider (Hinckley Township), Elan Doll (Ogema), Raymond Rath (Park), Carl Pearson (Partridge), Mervyn Becker (Sandstone Township), Gerhardt Pfeifer (District at Large), Dennis Ecklund (Askov) and Marge Zaudtke (City of Hinckley).

The community rallied to support the hospital, with the Hospital Auxiliary raising funds for new medical equipment. The Auxiliary's efforts, along with other local fundraising activities, contributed to the hospital's improved performance. Clinic visits increased by 33%, daily occupancy rates rose,

and the nursing home achieved a 97.5% occupancy rate. The addition of new physicians and medical technology enabled the hospital to operate in the black. Life Link III selected the hospital as one of four satellite locations for its helicopter outreach operation, further enhancing emergency care.

#### **Hospital District Property Tax Levy Background**

When the Minnesota legislature created Hospital Districts, they gave these districts taxing authority to fund the construction of healthcare facilities and/or manage services directly. The North Pine Area Hospital District has maintained a tax levy of \$225,000 since 1997.

**Impact of the Tax Levy:** The tax levy has been crucial in keeping the hospital open for many years, funding hospital facility improvements and adding new medical technologies.

**How the Tax Levy Works:** Pine County assesses and collects taxes based on the total property values of residents within the Hospital District. As property values change, the levy amount for each resident varies. The tax levy ranges between 2-3%.

#### **Grants and Rural Health Recognition**

## Sandstone community recognized for outstanding achievement in rural health

The Hospital District received a \$50,000 federal Rural Health Transition Grant and was recognized for its rural health achievements in the summer of 1991. Significant changes followed, including physician recruitment, the designation of the hospital as a rural health clinic (improving reimbursement rates), and the development of additional services for seniors, supported by a \$150,000 federal grant. The number of specialists increased, and local fundraising efforts contributed another \$70,000.

Plenty of local news was generated in this early phase of the Hospital District. The following are a few stories in the early to mid 1990s.

TIME NE CONTROL OF THE CONTROL OF TH

New doctor visits Sandstone

ivian Swanson, left, representing the NPAH, assisted Dr. Susan Corkran at
er family in their house hunting last week. Dr. Corchran, Ryan, age 4, at
ennifer, age 13, are hoping to purchase a home and some arcrage in the
effore completing their move this spring. Corkran has signed a contract with ti
PAH and is a welcome addition to the companity.

1991: A new doctor, Dr. Susan Corchran, was welcomed to the

community. [Photo on the left]

1992: Even though the obstetric services were discontinued several years earlier, Kyle James Koski decided it was time to make his



appearance ASAP and was delivered at the hospital. The parents were Bill and Valerie Koski. [Photo on the right]

#### 1992-1995: Continuing Development and Challenges

In 1995, the Hospital District explored plans for a new facility, conducting a study with LHB Engineers and Architects of Duluth. The study presented three options, ranging from \$3.7 million to \$8.6 million, to renovate the existing hospital facility. The district also purchased land south of the hospital and nursing home in Sandstone. A health survey projected a 4% population growth from 1995 to 2005, with a 17.4% increase in residents over 65 years of age. The influence of Grand Casino Hinckley was expected to boost I-35 traffic by 20-30%, further increasing the demand for quality health care.



However, conflicts arose between the Hospital District Board and the administration, leading to resignations and concerns about staff morale. The Hospital District decided to change the facility's name to Pine Medical Center and adopted a mission to "improve, promote, and educate toward the complete physical, mental, and social well-being of our community." Affiliations with North Memorial or Fairview were considered, but tensions with Gateway led to concerns about the future of Pine

Medical Center.

#### 1997: A Turning Point

In 1997, Pine Medical Center entered a 30-year lease agreement with St. Mary's Duluth Clinic Health Systems, transferring assets and liabilities to the Hospital District. Hinckley representative Darrel Nemetz emphasized the importance of keeping the facility public to ensure healthcare access for low-income individuals. Over 600 people attended an open house to tour the hospital and celebrate its continued operation. The year also saw the recruitment of new physicians, the renovation of Pine Medical Center, and the establishment of partnerships that improved medical services in the region. A feasibility study began to assess the need for a new facility, expected to take 1-3 years to complete.

Many came to see the LifeFlight helicopter, tour the hospital and win prizes. Michael Hedrix was brought on as the new Administrator. Vivian Swanson ended her acting administrator position and resumed her role as director of nurses at the hospital

In 2000 the Pine Medical Center was renovated with a new addition. Gateway entered a partnership with the Pine Medical Center. The



combination improved access to health care services, enhanced scope of medical services and continued availability of hospital, emergency, and urgent care services in Sandstone. This also brought more physicians available for Pine Medical Center and together they recruited more physicians. A feasibility study was begun to study the possible need for a new facility. It was expected to take 1 – 3 years to complete.

#### Volunteerism and Organizational Support Helped the Hospital Over The Years



In 1991 the Sandstone Lions pledged a total of \$10,000 for each the coming 2 years. This was used for the purchase of a new ambulance. Additionally, the Finlayson-Geise and Sandstone Lions Clubs, the North Pine Riders, Sandstone Fire Department and Pine County contributed to the purchase of the ambulance. In 1992 the new ambulance was deliverd in Sandstone.

They also donated another \$3,623 to the nursing home for the purchase of battery powered bath lift chair. It would help assist a disabled person in and out of the bathtub.

**Hospital Auxiliary**: An active Hospital Auxiliary was formed in 1993 and had 80 members. They organized many fundraising events to raise funds for the hospital. Their contribution to improving the health care of the North Pine County area was significant.

Beverly Hendricks, an Askov resident and nurse's aide at the hospital, Sylvia Anderson, a Sandstone resident, and Patt Makela of Finlayson launched the Auxiliary in October of 1988. By December of that year, they sponsored the annual bean mix sale. Membership soon grew to over 70 active women and men. Bev was the President, Sylvia the Treasurer and Patt the Corresponding and Recording Secretary those first years.







Bev Hendricks Patt Makela. Sylvia Anderson

All three are longtime residents of the area and they knew how important the hospital was to their community and keeping it open was paramount. "The Auxiliary was really important in keeping the hospital," said Beverly Hendricks. "It uplifted the spirit of the community." Patt Makela added that, "I have stayed involved all these years because the hospital meant a lot to me and my family, and it is very important to have a hospital nearby."

Since it began in 1988 through 2018, the Auxiliary raised nearly \$180,000, which went to buy medical equipment, office equipment, refurbishing of facilities, supplying emergency room clothing and much more. The biggest purchase for the hospital was 15 new beds in 1999 for \$6,000. Bev personally painted nearly every wall in the hospital.

One of their longest lasting fundraising programs is Love
Lights. As Patt said at the 2016 Love Lights ceremony, "Our
Auxiliary at one time had 70 some members but what we
lack in numbers today, we make up for in determination and dedication."



#### **Need for New Modern Health Care Facility**

A study for a new hospital facility considered locating a new hospital and nursing home in Sandstone or Hinckley. Also, under consideration was building a new nursing home next to the Gateway Clinic or build a new hospital and renovate the nursing home. They recognized it was important to maintain the Critical Access Hospital status whether the hospital was in Hinckley or Sandstone.

It was becoming clear that the old hospital was not meeting healthcare standards our citizens deserve. It needed to be replaced with a modern facility that can fully use the emerging technologies and health care practices. The Hospital District, therefore, decided to make a major investment by financing and building the Pine Healthcare Campus.

As the Hospital District planning began to consider building a new health care facility in 2012, some communities doubted the need for this new facility.

#### **Controversies Arise:**

**Essentia Health – Hospital District Conflict:** In 2012 a disagreement between the Hospital District and Essentia Health erupted in what the Hospital District viewed as a 'hostile takeover' by attempt. Fearing that they would close the hospital, the Hospital District served notice that



Essentia Health would be evicted, and a new hospital provider would be found. After a period of conflict, Essentia Health removed the existing management of the hospital. The new management team was brought in to change the culture and the relationship improved substantially.

**Detachment Attempt:** In 2013 the City of Hinckley filed a lawsuit to detach from the Hospital District, which the Hospital District viewed as an abandonment

of Hinckley's responsibility to provide essential health care services to its citizens. The Minnesota Court of Appeals decision in *City of Hinckley vs. North Pine Area Hospital District* (A14-2155) denied the City of Hinckley's appeal challenging the North Pine Area Hospital District's petition to detach from the hospital district.

Overall, the Court sided with the Hospital District, emphasizing the significant benefits that the city continued to receive from the district's services and the negative potential impact of detachment on the Hospital District's operations.

#### **New Dosey Township Joined the Hospital District**



On February 9, 2015, the Hospital District Board of Directors welcomed New Dosey Township as

the 18<sup>th</sup> member of the Hospital District. In the November 2014 election, the township of New Dosey voted to join the Hospital District.

Fran Levings was appointed on January 15, 2015, as the interim Board member and later appointed to full Board member status for New Dosey Township. She had over 30 years' experience teaching high school History and English and was the former Executive Director of the Old School Arts Center, President of the Seven County Senior Federation and has been Township Clerk for the past 8 years.

"We are a remote, largely senior population and it is important that we have access to excellent Pine County health care services," states Fran Levings. "I look forward to being an active board member as we build a new health care campus that will benefit so many with lifesaving and health enhancing services."

#### Changes to the Essentia Health Lease in 2013 and 2017

When the first levy was established in 1989, it was agreed that the funds would be provided to the hospital operator for capital investment. This lease agreement remained in place until 2011. At that time, the bond was expiring, and there were concerns that Essentia Health might attempt to take over the hospital and potentially close it. As Terry Hill, Executive Director of the National Rural Health Resource Center in Duluth, noted, "When local communities consider an affiliation, the onus is on them. We can't assume the big systems will take care of us. We have to do some of the work ourselves. They are looking for folks who can stand up and provide the leadership themselves within their communities."

#### **Medical Market Demand Study**

A market demand study indicated growing outpatient services and a need for senior care. It was recommended that the new campus include:

- A Critical Access Hospital with 6-8 inpatient beds and expanded surgical services.
- Increased outpatient care in specialties such as orthopedics, podiatry, urology, ophthalmology, cardiology, and oncology.
- A primary care clinic and pharmacy for improved patient convenience.

#### Planning the new Pine Healthcare Campus Begins in 2014

The North Pine Area Hospital District Board took several key actions at its September 25, 2014, meeting to advance the planning for a new medical campus. Chairman Ron Osladil praised the Board's efforts, noting that the work is funded by existing revenues without increasing the tax levy.

The Board approved a predevelopment agreement with the City of Sandstone and its Economic Development Authority, which owns the 40-acre site under consideration for the campus. The Board also authorized a purchase agreement for the property.

A resolution was passed to hold a public hearing on October 28, 2014, regarding the issuance of \$21 million in tax-exempt revenue obligations to fund the new medical campus, including a critical

access hospital, primary care clinic, and ambulance maintenance garage. These obligations will be paid through lease revenues from Essentia, not tax dollars.

The Board also approved hiring several professional services, including an architect for conceptual planning, an environmental engineer for site assessments, and a geotechnical firm for soil borings. Additionally, the Board approved a three-year lease with Essentia (2015-2018) and contracts with a communications consulting firm, a project management firm, and National Healthcare Capital, LLC, as its financial placement agent.

The Hospital District signed a Memorandum of Understanding with Pine Medical Center, St. Mary's Duluth Clinic Health System, and Gateway Family Health Clinic to develop a new medical campus. The Hospital District has also signed a purchase agreement with the City of Sandstone to acquire land near Interstate 35 for the project.

This nearly one-foot-high stack of loan documents was required to build the Pine Healthcare Campus. The Hospital District must maintain compliance with all of these provisions. The new medical campus was funded by revenue bonds, repaid through lease payments from Essentia and Gateway, not by new taxes. A small tax levy (2-3% of property owners' taxes) covers operating expenses for the Hospital District.



#### **City of Sandstone Involvement**

The City of Sandstone began infrastructure planning, which started plans for the Sandstone Business and Medical Park. The city applied for and received \$2.3 million Federal Economic Development Administration (EDA) grant. The North Pine Area Hospital District was the anchor development. Though it is very difficult to get these grants, the EDA approved the grant after extensive review.

Steering Committee Established: The Board of North Pine Area Hospital District (Hospital District) appointed a six-member steering committee to act on behalf of the Hospital District Board in managing through the complex details necessary to build the new medical campus. A feasibility study, which solicited the input from a wide range of community members, affirmed the critical need for an updated medical campus in the area. The new building would replace the aging and inefficient existing facility with a next generation critical access hospital and ambulance service. The campus will include a new primary care clinic and pharmacy; and discussions were underway with Gateway Family Health Clinic, Ltd. Renovation of the old hospital into the senior living and health care facility was the second phase of planning.



The Board members of the steering committee include from left to right:

Jane Brown, Member-At-Large of
Partridge Township
[Former executive for large non-profits
and state organizations, as well as a three
term Board member of Health Partners]

**Gary Klein**, Hinckley Township [Residential building contractor, former Hinckley Ambulance Squad member, and life-long area resident.

Bill Olson, Pine Lake Township

[Career State of Minnesota construction manager for several state agencies and colleges and current secretary/treasurer of the Minnesota Chief Engineers Guild member since 1998]

#### Scott Hendricks, Danforth Township

[Management professional for construction and educational organizations, and volunteer work with a number of community programs]

**Ron Osladil,** Finlayson Township and Hospital District Board Chair [Retired Power Line Superintendent with North Pine Electric]

Not Pictured: **Chuck Sprado**, Dell Grove Township and Steering Committee Chair [Engineer and former product development executive with 3M and manager of one of their operational units]

Key Hospital District partners in the medical campus planning included Essentia Health and City of Sandstone. Additionally, the Hospital District Board hired accounting, legal, architectural, financial placement, project management and other professionals to work with the Steering Committee and the Hospital District Board in an advisory capacity.

#### Medical Campus Designs Offer Modern Upgrades

The Hospital District hired the design firm of BWBR Architects who is a leading architectural firm in the state. They have designed medical facilities such as Mayo Clinic Health System in Austin, HealthPartners RiverWay Clinics-Anoka and many more. BWBR lead the design work and got input from Essentia, Gateway and others. The completed schematic designs were a model of efficiency and effectiveness. The Board of Directors enthusiastically approved these schematic designs.

Many of the external and internal features reflect the beauty of Pine County using natural materials, interesting stonework and warm colors. The medical campus harmonizes with the natural surroundings and captures our history.

The highly respected construction management firm of McGough was contracted for the project. They are a sixth generation, family-owned Minnesota business, which focuses on using local subcontractors, bringing more jobs to our area. They also specialize on rural construction projects and have built a long list of healthcare facilities such as the Mayo Foundation, CentraCare St. Cloud Hospital, Gillette Children's Specialty Healthcare and many more.

#### **Gateway and Thrifty White Join Pine Healthcare Campus**

Essentia Health and Gateway Family Health Center both signed Memorandums of Understanding and worked with the design team to make sure all the details are well planned. Thrifty White Pharmacy moved to the Pine Healthcare Campus by signing a sublease with Essentia Health – Sandstone. This offers a convenient location for hospital, pharmacy and clinic services. With all three commitments the construction of the Pine Healthcare Campus was ready to begin.



New Pine Healthcare Campus Brings Vitality to Health Care and Community: The Pine Healthcare Campus was designed with future growth in mind, by allowing easy expansion to accommodate new healthcare service providers and additional space for existing tenants.



Members of the Hospital District Board of Directors signed the first beam to be installed in the Pine Healthcare Campus. From left to right are Ron Osladil, Bill Olson, Myrna Nelson, Ray Thieling, Mary Deming, Linda Kvasnicka, Chuck Sprado, Wayne Oak and Scott Hendricks.

#### 2017 Grand Opening



The new medical facility, which opened on May 17, 2017. Essentia Health moved into the new facility on this date, and Gateway Family Health Clinic and Thrifty White Pharmacy joined the campus in early October 2017. The hospital features larger, mostly private inpatient rooms with private bathrooms, expanded

outpatient care space, a high-tech CT scanner, a mobile MRI unit, larger trauma and emergency operating rooms, and increased patient observation areas.

Beyond providing excellent healthcare, the Pine Healthcare Campus offers convenient access from the I-35 freeway, a large helipad for emergency transport, a picturesque setting among white pines, a pharmacy drive-thru, a comfortable waiting area complete with a fireplace, striking nature-themed artwork throughout the campus, close parking, and a bistro for visitors and patients.

#### **Over 700 Attend Grand Opening**

The Grand Opening of the Pine Healthcare Campus on May 9, 2017, was a resounding success, with over 700 attendees of all ages enjoying self-guided tours, refreshments, and music provided by Essentia Health.



The Hospital District Board of Directors participated in a ribbon-cutting ceremony, presented ceremonial keys, and proudly showcased the new campus.



#### Modern Design Improves Recovery

The Hospital District worked with leading healthcare designers, architects, and builders in the region, who have also worked with esteemed institutions such as the Mayo Clinic, Regions Hospital, Park Nicollet, and the University of Minnesota's health facilities. These experts applied cuttingedge design concepts to the new project, with

research showing that modern design significantly enhances patient recovery. For instance, the October 5, 2015, Harvard Business Review report titled "Better Healing from Better Hospital Design" highlights that designs like those of the Pine Healthcare Campus "have saved lives, reduced pain, improved clinical outcomes, and even provided moments of delight during some of the most challenging times in people's lives."

The choice of this location was deliberate, as research emphasizes that views of and access to nature play a crucial role in improving patient recovery. The surrounding wooded area offers a tranquil setting conducive to healing.

#### **Healing Power of Art**

The Pine Healthcare Campus incorporates the healing power of professional art throughout its facility. Studies show that calming art, especially nature-themed pieces, can reduce pain, stress, and anxiety. Recognizing the importance of nature art in the healing process, the Hospital District has made it a priority. Five of the featured artists are local, and the sixth hails from Wisconsin. Works by Carole Bersin of Sandstone, Patrick Ring of Sturgeon Lake, Dave Baker of Cloverton, and internationally recognized nature photographer Craig Blacklock of Moose Lake are showcased throughout the campus. Another former Sandstone resident, Paul Van Der Werf, displays his striking photograph of the railroad trestle bridge near the Gateway Family Health Clinic. This bridge was built to replace the one destroyed in the great Hinckley Fire. A train carrying survivors of the fire crossed over the original wooden bridge just before it collapsed from fire damage.

Additionally, Madison, Wisconsin, artist Aaron Laux was commissioned to create the striking entry wall sculpture depicting two white pines set against a dramatic sunset.







**Carole Bersin & Pat Ring** 

**Craig Blacklock** 

**Dave Baker** 

#### **Hospital District Benefits**

Hospital Districts in Minnesota were established over 50 years ago by the state legislature to address the lack of adequate healthcare in rural areas. These areas often lack the population density to sustain private healthcare providers in a cost-effective manner. To overcome this, Hospital Districts were created with the authority to levy taxes, providing a stable funding resource, much like local governments do for other essential services such as police, fire, and schools. Currently, there are 38 hospital taxing authorities in Minnesota, with the local district playing a key role in maintaining healthcare services.

The Hospital District was pivotal in saving the local hospital in 1989 by providing essential funding. The Hospital District constructed the Pine Healthcare Campus, which was leased to Essentia Health - Sandstone. This arrangement allows them to focus on patient care while the Hospital District built the Campus and manages the leasing.

Hospital Districts also ensure community oversight, giving residents a voice in the local healthcare system. Additionally, they have unique access to federal and state grants, which help reduce the cost of healthcare services, a benefit not available to private entities like Essentia. Our local Hospital District was one of 38 other hospital taxing authorities in Minnesota at that time.

#### **Pine Healthcare Campus Offers Additional Benefits**

- The only hospital in Pine County that is Acute Stroke Ready facility.
- Retains the Critical Access Hospital designation, ensuring Medicare reimbursement.
- A prime location near Interstate 35.
- Economic development opportunities and job creation.
- Continued high-demand ambulance services.
- Unique access to federal and state grants and other funding sources that help lower the
  cost of providing healthcare. Non-governmental entities such as Essentia do not have
  access to these special funds.

#### **Jobs and Economic Benefits**

Improving health care is the highest priority but our community also benefits from the jobs and economic development provided. Essentia Health Sandstone, for example, employs over 300 people with an annual payroll of over \$10 million. Additionally, they spend over \$4 million for other services and supplies.

#### **Further Economic Development**

Having the Pine Healthcare Campus helped attract Golden Horizons assisted living facility next door to the Campus. Additionally, the Hospital District worked to attract a quality health care provider to the previous hospital and nursing home location. These new long-term care providers kept and grew a number of existing and new jobs and prevented the possible demolition of the old hospital facility.

#### **Golden Horizon of Sandstone**

Golden Horizons specializes in providing Assisted Living, Memory Care, and Specialty Care at the

Sandstone residence, located next to the Pine Healthcare Campus. While they serve multiple specialties, memory care is core to their purpose of caring for the whole person throughout the later stages of life.

Alzheimer's disease, according to the Alzheimer's Association, is a growing public health crisis in Minnesota. Over the next 7 years, they project that the number of individuals diagnosed with Alzheimer's will increase in the state by 27.7%. Recognizing this



projected increase in Alzheimer's, Golden Horizons found it critical to provide support and care to individuals that will benefit from dementia-centered care. Their staff members receive specialized dementia training throughout the year in order to provide quality care. Their services include the following: Assisted Living Apartments, Memory Care Apartments and Independent Living Apartments.

#### Sandstone Health Care Center Takes Over Old Hospital and Nursing Home Facility

The Hospital District found a new health care provider to buy the old hospital and nursing home facility. In 2017 the old hospital facility on Court Avenue in Sandstone was bought and the Sandstone Health Care Center was opened in May of that year. They made approximately \$700,000 in renovations of the



building over the first year and half. They installed a new roof, heating and cooling system, windows and a fire protection system.



They invested an additional \$6.5 – 7 million to build a new addition for Serenity Court Assisted Living which opened in 2021. They offer independent living and assisted living apartments with underground parking, and a new therapy center, chapel

and administrative offices. Currently there are approximately 80 full and part-time staff.

Their services include Long Term Nursing Care; Short Term Rehab Care; Physical, Occupational, and Speech Therapy; Hospice Care; Respite Care; and Wound Care.

#### Selah Wellness Clinic LLC

Naomi Koenig was the first person to get an education loan from the Hospital District as a psychiatric nurse. She worked at Gateway Family Health Care until she opened Selah Wellness Clinic in Sandstone in 2022. Selah Wellness Clinic offers diagnostic assessment, psychological evaluations, psychiatric evaluation including medication management, ARMHS certification as well as EMDR and therapy. They also offer in person and virtual options for psychiatric and mental health services for adults, adolescents, and young children. Many new services are being added.

They are also one of the only MAT (Medication Assisted Treatment) clinics in the area. Their providers are trained and credentialed to provide suboxone, methadone and additional services. Selah Wellness Clinic also addresses acute and chronic health issues through an integrative health care approach, to treat the entire person. They also have several providers that are credentialed in family practice, psychiatry, pediatric psychiatry and Functional Medicine.

In 2024 Selah Wellness Clinic began offering Transcranial Magnetic Stimulation (TMS) therapy at their Pine City and Sandstone locations. TMS is an FDA approved, **non-medication** way to put depression, anxiety and OCD in remission. TMS is FDA approved for ages 15 years old and up. Most insurances cover TMS treatment, including Tricare and Veteran's Community Care. TMS is also FDA approved for smoking cessation.



#### **Recognition of Health Care Leaders**



In 2019 the Hospital District's first Health Care Leaders award went to Eric Neilson of Gateway Family Health and Cheryl Smetana McHugh, owner of Therapeutic Services Agency, Inc. Both partnered with the Hospital District to improve health care for the Hospital District community members.

In January 2023 the Hospital District awarded its annual Health Care Leadership Award to Dawn Sandberg,





formerly of Essentia Health.

Dawn the firm

Dawn enthusiastically partnered with the Hospital District to offer the first EMR training class May 2023. There were 11 graduates from the Hospital District territory. Supporting Dawn and attending the event were Joe Mulford (President) and Di Anna Abrahamsen (Administrative Assistant).

In 2023, Dr. Thomas Witt of Essentia

Health was awarded the Health Care Leadership recognition. He is a family physician and was the administrator for the Essentia Health – Sandstone and Essentia Health – Moose Lake until his retirement. He actively collaborated with the Hospital District to continue improving care for our residents.



#### **Smart Investing for the Future**

The mission of the Hospital District is to ensure access to quality health care and wellness services that improve the mental and physical health of the residents of the Hospital District. To accomplish this goal, the Hospital District has launched several initiatives and grant programs to further leverage the tax levy to grow and improve local health care. These include, in part, the following:

**Health Care Advocate:** The Hospital District is focused on continuing and improving access to quality health care for our community members.

- Keeping the levy unchanged for nearly 25 years is a high priority.

- Investing in the new Pine Healthcare Campus has significantly improved quality of care, compared to the old hospital.

**Improving the Facility**: The Hospital District has provided grants for improving and expanding the facilities, such as:

- Construction of the new administrative and ambulance building for Essentia Health, which allowed the new infusion center.
- Continuing upkeep of the Pine Healthcare Campus.

#### **Essentia Health - Sandstone Grants**

After the Campus was completed Essentia soon realized they needed more space. The Hospital District helped finance the construction of an adjacent facility to house the ambulance service and Essentia Health's administrative staff.



Additionally, grants were provided to purchase many lifesaving pieces of medical equipment such as the following.

- EKG machine 2024 \$19,412.94
- EMS Ventilator replacement
- Defibrillator \$13,886.72
- Therapy mattress to prevent pressure sores -2021 \$9,506.33
- Surgery Stretcher 2021- \$17,123.33
- Tele-sitter monitoring 2022 \$10,000
- 3D Mammography Imaging

**Forgivable Education Loans:** In 2020 the Hospital District established the Education Loan Program to help attract and keep health care workers in our area. This is a forgivable loan if they agree to work for 2 years (recently changed to 4 years) at a health care provider on the Pine Healthcare Campus. If they do not fulfill these requirements, the loan must be repaid.

These loans have improved health care services by helping individuals get advanced degrees in areas that include a Doctor of Psychiatric Mental Health Practitioner, RN, Medical Imaging, hospital management, 3 EMTs, and many EMR trained citizens to help their neighbors.

**Community Grants:** Help is given to organizations to provide needed health care services such as:

- Everyone's Table: Everyone's Table is organized as a non-profit organization whose mission is to provide community meals to people and to provide activities and educational opportunities that promote the health and well-being of the community.
- Finlayson Fire Department 2022 Pulse Oximeter

- 2024 Lions Family Health Expo Sandstone Quarry Lions \$2,000
- Bruno Food Shelf purchase of food
- Family Pathways purchase of food
- Sandstone Fire Department 2023 10 new pagers to enable fast response \$3,950
- Community Connection Allies 2022 food distribution
- Duxbury Fire Department First responder equipment

**Health Care Information:** Providing health care information and resources for residents through:

- Newsletters and website that have local, state and medical information.
- Sponsoring community health events such as the Lions Family Health Expo held in the fall.
- Researched and Produced a Directory of Pine County Area Health Care Providers updated September 2023.

The Hospital District partnered with Pine Technical and Community College to sponsor

Certified Nurse Assistant (CNA) and Emergency Medical Responder (EMR) certification courses. Our area Fire Departments are in urgent need of more trained EMR professionals and long-term care providers, and the hospital are in serious need of CNAs.

EMR professionals provide initial emergency care, usually first on the scene and support Emergency Medical Technicians and paramedics. The training was held at the Sandstone Government Center in the evenings, except for one Saturday.





This was a \$1,450 value. The \$700 tuition was waived and the Hospital District payed the cost for \$160 books, \$20 certificate, \$80 EMR response bag and a \$500 stipend. To qualify they had to be a resident of the Hospital District and commit to working as a volunteer for one of the Hospital District Fire Departments.

#### **Health Care Provider Directory**

The Hospital District created the Health Care Provider Directory in 2021 and has updated it in 2023. This directory offers residents of the Hospital District a copy of our newly created Directory of Pine County Area Health Care Providers. The directory includes providers for: Addiction, Ambulance, Chiropractors, Clinics, Dental, Domestic Violence/Abuse, Financial Health Care Resources, Food Assistance & Fresh Food, Government Health Agencies, Hearing, Home Visits, Hospice and Home Care, Hospitals, Long-Term Care - Assisted Living, Memory Care, Long-Term Care - Skilled Nursing, Mental Health Crisis and Health Care Hotlines, Mental Health Clinics, Senior Services, Transportation, Veteran Services, Vision, and Women & Children's services.

#### **Essentia Health - Sandstone Also Making Significant Investments**

The Essentia Health-Hinckley clinic opened in February 2024. This provides expert, compassionate care closer to home for patients in Hinckley and the surrounding communities that they

serve. Essentia's nearby facilities include hospitals in Sandstone and Moose Lake, seamlessly connecting their patients to a higher level of care when needed.



In the 8,000-square-foot clinic, they have 12 exam rooms, one consult room and one procedure room. They will provide rehabilitation, family medicine and imaging lab services, and urgent care.

Additional specialty services are

planned for the future. Initially, two family medicine physicians will be caring for patients at this location. As they expand the services and specialties, more providers will be added.

This brief history highlights the ongoing evolution of health care in the North Pine County area. As challenges persist and new opportunities arise, the North Pine Area Hospital District remains steadfast in its commitment to expanding local access to high-quality care. With a focus on continuous improvement and adapting to the changing needs of the community, the Hospital District is committed to shape a healthier future for all residents.

#### **Information Sources:**

- "History of Pine County, Minnesota" by Minnesota Historical Company
- "Native American Health in Minnesota" by Minnesota Department of Health
- "Indigenous Healing Practices and Western Medicine: Mending the Gap" by Mary E. Koithan et al.
- "Health Care in Rural America" by Alan Morgan et al. (Journal of Rural Health)
- Oral histories and accounts from local indigenous communities, collected by organizations such as the Minnesota Historical Society and tribal cultural centers.