the Big Yellow House
ON WEST CONGRESS STREET
SECOND EDITION | BY CARL J. POST
The Big Yellow House on West Congress Street

SECOND EDITION

Carl J. Post

With a new foreword
by Dr. Wallace Boston,
President and CEO,
American Public University System

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The second edition is dedicated to the Memory of Randy Nelson Jr. (1986-2011)

American Public University System staff member Randy Nelson Jr. passed away under tragic circumstance at far too young an age. Randy was a touchstone within the APUS community that emerged from the big yellow house in Charles Town in the early 21st century. He reflected the spirit of the region with youthful enthusiasm and endless zeal to learn something new. Randy never met a problem that he could not solve—likewise, he never met a person that he did not know. Let this book help continue to keep his legacy and memory.

The first edition was dedicated to the people of Charles Town, West Virginia, past and present.
Foreword

Since Dr. Carl Post completed *The Big Yellow House on West Congress Street*, much has changed in the community of Charles Town as well as for American Public University System (APUS). The population of Charles Town nearly doubled from fewer than 3,000 residents as of the 2000 census to more than 5,000 people as reported on the City of Charles Town’s website in 2012. In 2008, a second high school, Washington High School, was opened to alleviate overcrowding at Jefferson High School, which had been the county’s only secondary school since 1972. The Shenandoah Valley Jockey Club that opened in December 1933 has undergone substantial renovations. Now owned by Penn National Gaming and called Hollywood Casino at Charles Town Races, the venue continues to feature horse races as it did in the past and is complemented by a modern casino with slot machines and table games such as roulette, blackjack, poker, and craps.

Other signs of business growth can be seen in the downtown corridor, where several new shops and restaurants line Washington Street. Though small in comparison to nearby Frederick, Maryland, and Winchester, Virginia, Charles Town’s downtown business corridor is vibrant and busy. Rarely does one of our APUS employees stroll along the downtown sidewalks without bumping into a friend or colleague ready with a smile and time for a chat. Community organizations have reinforced the small-town atmosphere that is part of Charles Town’s charm. Religious groups and community programs continue the tradition of people helping people, a hallmark of life in Charles Town since its inception. Local businesses are well known for their support of the public schools.

At the time of the original publication of Dr. Post’s book, American Public University System had approximately 9,000 students and occupied only two buildings in Charles Town. Today, with more than 100,000 students studying online from all 50 states and more than 100 countries, APUS has expanded its presence in Charles Town. APUS now owns or rents 13 buildings. A number of them are historic, and each has been renovated for use as administrative offices with a focus on maintaining historical integrity and aesthetics. Now with a full “campus,” this 21st-century online university has integrated itself into this 18th-century town in a way that has been mutually beneficial.

In late 2004, APUS purchased the building located at the corner of Congress and George Streets that was constructed in 1940 by the Civilian Conservation Corps as part of the New Deal. After many years of the building sitting vacant, significant work was required before the APUS Academics department could occupy it. While updating various elements required by building codes andreassembling specific areas in disrepair, APUS preserved many of the historic features of the building. The exterior in particular appears much as it would have in 1940. The National Park Service and the West Virginia Division of Culture and History gave guidance throughout the renovation so that the building would remain historically accurate. By 2006, renovations had been completed, and APUS occupied the building. Three years later, the university purchased three additional properties, each with a longer history than the CCC building located at 120 South George Street.
At 203 South George Street is the former home of Thomas Green, an attorney, judge, and former mayor of Charles Town. When John Brown’s selected legal counsel did not appear in time for the start of his famous trial for treason in 1859, Green and his colleague, Lawson Botts, were appointed as Brown’s interim legal counsel. Green and his wife built the house and resided there until his death in December 1889. In 2009, APUS purchased the property and began renovations, during which construction crews discovered a live artillery shell dating to the Civil War. Realizing the historical significance of such an artifact, APUS donated the shell to the Jefferson County Museum, where it is currently on display. Around the same time, APUS purchased a former Washington-family home located at 216 South George Street. Known today as the Samuel Washington House, the brick structure dates to the late 1800s. Samuel Washington was President George Washington’s brother and spent time in the area visiting local family members. His descendants built the home in the late 1800s, and it remained a private home for nearly a century before it was repurposed as a bed-and-breakfast and eventually became part of the APUS campus.

Next door to the big yellow house is another building of particular historical significance. Located at 115 West Congress Street is the home that Dr. Richard Venning built for his family after realizing that residing at the same location as a hospital was not ideal. Dr. L. Mildred Williams, one of the medical heroes of Dr. Post’s work, purchased the home, where she continued the tradition of medical excellence established by her predecessors. Dr. Williams was well known for making house calls to patients who were unable to travel to her office in the house. Like the doctors who established the hospital next door, Dr. Williams had a policy of seeing any person who needed medical care, regardless of the patient’s ability to pay. Dr. Williams retired from her medical practice in 1986 and remained in the home until her death in 2008 at the age of 91. Shortly after Dr. Williams’ death, APUS purchased the home and undertook very minor renovations to use the facility for office space. With the permission of Dr. Williams’ family, several mementos of her career are still on display in the home as a tribute to her life and career.

Even though the majority of the APUS campus buildings represent a past era, the university’s latest additions to the Charles Town landscape are innovative and built to the U.S. Green Building Council’s (USGBC) Leadership in Energy and Environmental Design (LEED) guidelines. The first, completed in late 2010, is a 45,000-square-foot, state-of-the-art Academics Center located just three blocks from the downtown area and designed with a focus on environmental conservation. Mindful of the building’s close proximity to some of Charles Town’s most historic buildings, the facade is similar to those around it. Though the exterior recalls a previous time, the functionality of the building is quite innovative. Featuring 99 solar panels on the roof, a highly efficient HVAC system, and energy-efficient appliances and windows, the building is state-of-the-art from an energy-conservation perspective. The environmentally friendly features of the building that qualify for LEED certification coupled with the aesthetic appeal of the exterior are a testament to APUS’ commitment to the environment and the community. For years prior to APUS’ purchase of the property, a junkyard operated at the same location, leaving the site an EPA-designated Brownfields site. APUS took measures to clean up contamination in the soil and was diligent in ensuring that further contamination would not occur as a result of developing the site.
Adjacent to the Academics Center, APUS purchased and built two additional environmentally friendly structures. The first, which opened in December 2011, is a 1,660-panel solar array that doubles as a covered parking lot and features 14 universal car-charging stations. The array was constructed from all American-made components. It provides approximately 50 percent of the total power needed for the most recent addition to the APUS campus in Charles Town, a 105,000-square-foot, green building that houses the school’s finance and financial aid teams. Like the Academics Center, the newest building, which opened in October 2012, features a highly efficient HVAC system, state-of-the-art and energy-efficient windows, recycled materials throughout, and a variety of other elements that follow LEED guidelines for green buildings. Even though APUS has been diligent in its preservation of historic structures in Charles Town, the school has been equally as cognizant of the importance of energy efficiency and environmental conservation.

The house at 111 West Congress Street has been a place of beginnings for more than a century. Dr. Venning’s vision of a hospital in Charles Town began there. Many new lives began in this home, as the hospital situated there became well known for its expertise in maternity care. As Dr. Post points out in his book, many young doctors and nurses also began the path to successful medical careers in the building. For APUS, the building became the school’s first campus home. Just as the hospital originally located in the building contained heroes, so too does the building today. Whereas the first heroes were pioneers of the medical field, the heroes calling this building their academic home today are the men and women serving in our nation’s armed forces, the firefighters and police officers working to keep our communities safe, and other first responders, all of whom we are proud to call our students.

Many changes have occurred for Charles Town and APUS since Dr. Post completed The Big Yellow House on West Congress Street. At the same time, however, much has remained the same. The Charles Town community is still as tightly knit as it was in the time of Dr. Venning and his colleagues. The town’s welcoming atmosphere has not changed, and visitors can enjoy the same small-town sentiments that have been found here for more than two centuries. Though APUS’ student population has grown tremendously, the school’s commitment to academic excellence has remained consistent. Our commitment to serving the Charles Town community also is unwavering, and we are proud to call this unique and historic town our home.

Dr. Wallace E. Boston  
President and CEO, American Public University System  
Charles Town
Acknowledgements

Second edition:

Thanks to President Boston for his original foresight and re-commissioning this volume in recognition of the growing role of American Public University System in Charles Town and the Eastern Panhandle of West Virginia. APUS ePress and Instructional Developers earn additional gratitude for their detective and creative work in updating a print-based publication into an e-book.

— Dr. Fred Stielow,
APUS Dean of Libraries
and Executive Publisher

First edition:

To Dean James Flaggert of the American Public University System, who has been a stalwart supporter of the Big Yellow House book idea from its inception through to its final completion, and Mrs. Stephanie Diedericks of Jefferson Memorial Hospital, who has proven herself to be a genuine devotee of Jefferson County history and medical history as a whole. In addition, important assistance has come from the Jefferson County Historical Society, the staff at the Jefferson County Courthouse’s deed room, the people of Charles Town who have so freely shared their memories of Charles Town General Hospital, and the doctors and nurses who worked major and minor miracles there. A special magic is in the air in this part of West Virginia. People here labor to do the impossible.

—Carl J. Post, PhD, EMT-D
Preface

In the Eastern Panhandle of West Virginia lies a town that keeps one foot in the past and the other in the near-distant future. Much of the 19th century, and even a smattering of the 18th century, is plainly visible in the architecture and surviving historical sites of modern-day Charles Town. The graveyard at the Episcopal Church encapsulates the genealogy of the town’s leading families from previous centuries and, to a certain extent, the current one. Downtown streets still bear the names given to them by Charles Washington in the 18th century.

These main streets of Charles Town run west to east and traverse the length of what was once a large estate. Shorter streets run north to south, carving most plots of land in the town into half-acre square plots. The town maintains these roadways as well as older buildings and historical sites, including two Washington family homes, to reassert the already evident truth: the past lives on.

To the south and west of town, however, modern homes are springing up to accommodate the sprawl from the crowded District of Columbia. The benefits this type of sprawl brings to a region can be unexpected, rapid, and instantly popular; however, this inevitable change can also be difficult to accept in an area of such rich history.

This book is about the revolution of Charles Town, Jefferson County, and its mountainous regions. This book is about the zeal and professional élan of the educated men and women who displayed both determination and personal courage in making a better life here.

Could there be a better place to do research about a house and the history that surrounds it? How many houses have witnessed the decades of service filled with the loving care, life, and death that the big yellow house on West Congress Street has? After serving as the area’s first hospital until the turn of the century, it grew empty, but it’s once again back in service. In 2003, a major military university refurbished the house only as much as was necessary to become a corporate headquarters for a distance-learning school that reaches all over the world. Some of the doctors and nurses who were present during the house’s prosperous years from 1906 to 1948 are still alive, and they are pleased that the school has kept alive and productive the site of so much good.

The American Public University System took great care to retain and restore as much of the house’s decor as possible. When octogenarians who had once been a part of the hospital visit, they comment on how much of a feel for the past lives on in the building. They see the present and the past at the same time. And, even as they find the American Public University System a delightful surprise, they, in turn, inspire us and make the historical preservation and oral history of this house enjoyable. They teach us that the past lives on in a place that saw babies born and trauma cases attended to, long before most of America had caught on to the desirability of doing such things.

That was then, but this is now. This short book is an important first step in a larger process of unraveling and celebrating the history of this area, both orally and in full cooperation with local efforts to preserve local culture whenever feasible.
Take time to sit back and read this book about a home that became an integral part of the lives of the people in Charles Town and the hill country surrounding it. You may find it hard to forget such an ongoing drama—selfless heroism and frequent triumphs of the human spirit.

Carl J. Post, Ph.D., EMT-D
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One

A Sudden Beacon of Hope
A handful of doctors rallied around one pioneer to give the town what it had always needed: a modern, albeit small, hospital.
When a medical facility sprang up as if from nowhere in the midst of a small West Virginia town in the first half of the 20th century, it offered life and healing to the people living in and around Charles Town. These people weathered war, epidemics, and economic depression, but they did so with health care that worked and doctors who saved lives. Such practice created a widespread, deeply felt sense of trust, and from the 1920s to present day, people in Jefferson County have a sparkle in their eyes and the grins to go with it whenever they reflect on their hospital’s care and the people who provided it to them.

This bonding between town, hospital, and physician was not some fluke or chance happening. It emanated from the profound dedication and grim resolve of one doctor who made his home into what we might today call a clinic. Then, with the help of a handful of fellow doctors, he turned this clinic into a small hospital.

The Residence

It all began with a small house dating back to the early 19th century. This small domicile on what is today West Congress Street underwent expansion twice and emerged in the 1920s as a regional health care center. It was home to a roving ambulance and the site of a busy nursery—a nursery in which many of the region’s pregnancies successfully produced happy results.

These events came to pass in a town with fewer than two thousand citizens. It is a proud town, a caring town, and a town with a complex and much-storied history.
The Washington family had at least six houses in the area. Stonewall Jackson drew from the area to give strength to his brigade. Despite this clout, neither of the Virginias had much respect for the Eastern Panhandle in the 19th century, so maybe it was only fair that a building situated here would emerge as a spectacular medical success in just 10 years.

After its successful run as a hospital, the house on West Congress Street became a skilled nursing home from 1949 to 1996. Today it is beloved by natives of all generations. They brag that they were born in the hospital; they fairly exult in the fact that the famous Dr. L. Mildred Williams, who was said to have left some special sign or blessing on those she delivered, delivered them. Contemporary paramedic crews carry the popular reverence a step further, stating the putatively firm conviction that the place was an excellent nursing home, too.

A cynic might suggest that time-honored traditions feed this phenomenon. Seemingly miraculous transformations did not just happen like some throwback to popular lore, such as Elmer Gantry, the Music Man, or even the modern-day rock opera Tommy. Real heroes are few and far between, and cynics would do well to remember that medicine is the realm of life and death, birth and old age. For almost an entire century, this realm existed on West Congress Street in the form of a stately yellow house with a large sun porch.

A Place in Time: Jefferson County, 1756-1904

Hospitals did not spring to life in other parts of West Virginia as they did in Charles Town, by virtue of a single doctor’s earnest appreciation of his calling. In most areas, mining produced not only coal, but also crowded settlements in the valley. Mining towns grew up right next to the mines. Roads were scarce: the coal left by rail, supplies came in by rail. Travel to see a doctor was difficult, so doctors in coal company clinics treated miners.

As the towns grew larger, the clinics could no longer handle the influx of sick and injured. Physicians asked the coal companies for hospitals, but the miners and the company doctors had to make concessions on pay and other benefits to get these hospitals. One major giveback for the miners was to forego organization into union
locals. Doctors learned to look the other way with regard to the root causes of injuries from recurrent industrial accidents. Although coal mining wielded influence over most of the state’s health care systems, urban areas like Charleston were less susceptible to this influence—as was Jefferson County, but for a different reason: most people in and around Charles Town were farmers.

A ride through the area would make this fact quite clear. The fertile lands of the northern-most part of the Shenandoah Valley make Jefferson County a prime producer of barley, wheat, corn, and—for the longest time—apples. Government officials paid farmers in the area to cut back their production of fruit and grain, but even then the area produced a surplus. Jefferson County was considered a part of the breadbasket of the Confederacy during the War Between the States, and the Shenandoah Valley fed the Confederate army in Northern Virginia for almost the entire war. Under the command of Union Major General Philip Sheridan, Yankee horse soldiers burned crops and destroyed trees because Sheridan believed it was the only sure way to cut off the enemy’s food supply.

Warring Through the Years

War and the threat of war was an integral facet of daily life for people who lived in Jefferson County. Settlers lived under a close and uneasy truce with Indian tribes indigenous to what is now the Eastern Panhandle. In the 1750s, the French terrorized the settlers, relying on Indian ally raiding parties for the manpower to do so. The French and Indian War put the settlers at extreme risk, and never more so than when the French defeated British General Braddock on July 9, 1755, in a one-sided affair near present-day Pittsburgh. Indian raids on settlers became commonplace in the county for several years thereafter. Eventually the British, together with Virginia militiamen
and Iroquois Indian allies, secured the Pennsylvania, New York, and Virginia colonies from French and Algonquin attacks.

During this war, George Washington marched his Virginians through Jefferson County to the militia rallying point in nearby Winchester, Virginia, in an effort to support the British redcoats against the French. More than a century later, when the Blue fought the Gray, Winchester was a strategic objective of tremendous value to whichever side held it, resulting in the town changing hands 76 times during the war.

Though ravaged by the Civil War, Jefferson County played an influential role. The Eastern Panhandle saw skirmishes long before the battles at Antietam in Maryland or Gettysburg in Pennsylvania. Intending to bring about the end of the war, General Robert E. Lee attempted to pass through the Shenandoah Valley to surprise Union forces in their rear, thereby besieging Washington, D.C. At Bolivar, the infamous guerrilla leader Turner Ashby commanded Confederate forces and lost the battle. Such outcomes were of significant importance: control of Charles Town and other Jefferson County towns meant that the Confederate army would or wouldn’t eat.

Jefferson County was, for the most part, Gray. Men, some who fought in the Mexican War 15 years earlier under General Stonewall Jackson, rallied to the “Bonnie Blue Flag” that bore a single star. For generations of people living in this area, the Civil War became a defining moment and remains a prevalent theme in the customs, politics, and culture of this part of America.

Secession and Strategy

During the first half of the 19th century, Virginia had disenfranchised the people living in the Eastern Panhandle. Western Virginia had 310,000 citizens in 1810 but was given only four senators. By comparison, Virginia had 340,000 citizens yet was accorded 20 senators. In West Virginia, landowners were the only people allowed to vote. Most residents were treated like second-class citizens, and, despite concerted efforts in 1829 to rectify the injustice, the entire process long remained unfair. No sooner did this problem abate in the 1850s than a larger one came along in the 1860s when Virginia seceded from the Union.

Just as Virginia had treated Western Virginia as an inferior yet valuable province, so did Western Virginia view Charles Town and its surrounding county. Much of Western Virginia wanted to form a loyalist province or new state. In 1861 and 1862, the loyalist assembly refused to accept delegates from Jefferson County among the voting delegates at their gatherings and even refused their admission to deliberations. The Unionist elements from many parts of what later became West Virginia were well aware of the Confederate sympathies of many of the people there.

On April 3, 1862, citizens of Jefferson County were faced with a fait accompli. When West Virginia was formed—or concocted, depending on one’s point of view—the Confederate sympathizers in Jefferson County were punished. The state authorities, in collusion with the Union government, ensured the right to vote for some of Jefferson County’s citizens, and these voters were to sanctify West
Virginia’s absorption of Jefferson County. Citizens had to vote publicly on marked paper ballots in front of bluecoat soldiers. Fewer than 250 people voted, although five or more times that number was registered. Had the process been different and more registered voters actually been able to vote, Jefferson County may have become part of seceded Virginia.

West Virginia voted Charles Town into the Union, without even hearing from the town’s representatives, for tactical reasons. The railroad was an important strategic link between East and West, and both the Union and the Confederacy knew it. During the war, troops, guns, and ammunition had to move freely.

The Confederate army occupied Harpers Ferry early in the war and did so again toward the end of it. During the middle of the war, the Union clung to the high ground in and around Harpers Ferry, using the area as a base camp from which to spring west or east. However, despite the battles during the war over this vantage, the most famous fight at Harpers Ferry took place before the war actually started. It was here that the American army unit commanded by then Colonel Robert E. Lee suppressed an attempted revolution.

John Brown and his cadre of abolitionist fanatics had come to the East from Kansas bent on inciting an uprising. Brown had intended to arm slaves and foment what might reasonably be considered a full-scale racial upheaval. His first step was to seize the armory at Harpers Ferry, but this did not pan out. The would-be liberators were soon surrounded without any hope of escape. Colonel Lee took Brown into custody, and Brown was tried and found guilty of treason in Charles Town, where he was hanged by the neck until dead. The residents of Charles Town have never forgotten their part in writing this part of American history.

Choosing Sides

Harpers Ferry saw its share of fighting; it also sent its share of men to fight—for both sides, although the slight majority sided with the North. This was not the case for the rest of Jefferson County. In 1865, many people in Jefferson County, and almost all in Charles Town, wanted to remain a part of Virginia, and Virginia was eager to welcome them back into the fold. West Virginia’s legislature punished the rebels by moving the county seat from Charles Town to Shepherdstown. In 1866, the
U.S. Senate and the U.S. House found a compromise: Jefferson County would remain part of West Virginia, in the interest of Union supporters, but the county seat would revert to Charles Town, in the interest of Confederate supporters.

Jefferson County occupied a strategic location during the fighting between North and South. The war was not something that happened only in Tennessee or Mississippi. Virginia was a principal theater, and both Jefferson County and Charles Town were key players close to the front lines from 1861 through 1865. With the support of their women, Charles Town’s men joined the ranks of an army commanded by the Bible-toting legend, Stonewall Jackson.

Major armies passed through Jefferson County en route to crucial battles, including Jackson’s army, which rode trains from its early-war headquarters in Harpers Ferry to the First Battle at Bull Run in Manassas. Troops traveled through the county toward the epic battles at Sharpsburg and Antietam Creek in Maryland and even Gettysburg in Pennsylvania. However, troops didn’t just pass through the river valley, and the battles fought here were every bit as bloody and brutal as Shiloh or Franklin, Tennessee.

Jefferson County’s graveyards, large and small, are the final resting places for native sons who were killed fighting for the Confederacy, as well as veterans of the war. In the cemetery next to the Zion Episcopal Church in Charles Town, just a quarter mile from the big yellow house on West Congress Street, the honored graves of 70 Confederate veterans can be found.

The Evolution of a County

As early as the 1730s, European settlers began leaving America’s coastal areas and piedmont for the less-civilized mountains. German, English, and Scot-Irish settlers found parts of Jefferson County attractive with its Blue Ridge Mountains on one side, its plush river valley, and a broad, often-fertile plain opening up for a day’s ride in the direction of higher mountains. Others soon followed. Some started on their way west and settled in the Shenandoah Valley. The natural bridge traversed by the great national highway in the 1990s was the first real gateway to the west for use by tourists and transport vehicles alike.
George Washington first came to what is now Jefferson County in 1748 as part of a surveying party for Lord Fairfax. He was impressed by the fertility of the soil and abundance of water. The beauty and richness of the area stayed with him, and Washington first bought land, using surveying fees, in 1750 in what is now Jefferson County. His family eventually acquired six houses in Jefferson County, two of which were full-scale retreats in the Charles Town area. When England recognized the establishment of Charles Town in 1765, it was one of a handful of reasonably substantial towns far from the coast. In 1786, the Virginia legislature sanctified the town’s status as a chartered town, and it was formally constituted on 80 acres of land donated by the Washington family in ceremonies that took place on January 4, 1787, in Jefferson County.

By the time the French, and the Indians loyal to them, were driven from the area, English-speaking settlers were practicing their faith in what is now Charles Town. Because the area was fertile and strategically located—close to the Potomac and Shenandoah Rivers on the western side of the Blue Ridge Mountains, it made sense for the official Church of England and her colonies to branch out in the areas that commerce and government had already clearly established. As early as 1753, Charles Town was a constituent element in a large parish of the Church of England.

After fighting against the British in the Revolutionary War, Washington returned to the Charles Town area on what would become the Baltimore and Ohio Canal. The canal was a portal into the West for those in quest of new land to farm. Later, when the Baltimore and Ohio Railroad was completed in the first part of the 19th century, it brought people, as well as dry and manufactured goods, to Jefferson County. It also gave the county the means to export goods for sale while using lower transportation costs. Until the 1930s, the major exports of the county were wheat, barley, and apples, as well as lime and limestone from mines established near Harpers Ferry.

People and goods weren’t the only things traveling to Jefferson County. Infected crews from English merchant ships brought cholera to American ports,
EXPLANATIONS:
Towns
Grist & Merchant Mills
Plantation or Farm
Churches
Taverns
Saw Mills
and a serious epidemic killed many people all over America. This disease along
with typhoid fever came suddenly to Jefferson County in 1831 and 1832. Slave
quarters were particularly susceptible to cholera because of crowded and dirty condi-
tions. Death from disease was a fact of life in Jefferson County. Overcrowding, dirty
conditions, and even the climate could be life threatening. Although the epidemics
subsided, the threat lingered, causing some to migrate west in search of land, wealth,
and health.

Those who remained in Charles Town set up the first fully free school system in
West Virginia. The existing practice of the academy system provided for one school
for boys and another for

in 81x681

11

Opposite page: Charles Varle’s
Topographical Description of
Jefferson County, originally
published in 1810, noted the
following: Jefferson County
Population: As the county is a
late division of Berkeley
County, and no census was
taken since that epoch, the
true population cannot be
well ascertained; but it is
commonly supposed that it
contains about one third of
the population of the whole
amounting to 6,000 souls for
Jefferson, and nearly the half
of the slave population of the
whole, 1,800.

This page: Present day
Wright Denny Elementary
School located on West
Congress Street.
Meet the Good Doctor

Richard E. Venning was born in Charleston, South Carolina, in 1868. He graduated from the medical college at the University of Pennsylvania in 1891. While doing a residency at a women’s hospital in Baltimore, he met his wife, Ethel.

Chronic suffering from frequent bouts with malarial fever caused Venning to move his family to Charles Town, West Virginia, where he practiced medicine for several years before he found his way to the future Charles Town General Hospital. During this time, he visited patients that were in dire need of care in their homes, and he learned from these experiences.

One of the insights Venning gleaned from these visits was that people did not trust strangers, and they definitely did not like to be sick in front of strangers: some would rather die than make a trip in a strange horse-drawn ambulance to an equally strange doctor’s office in Charles Town. They felt that if the operating table was going to be a dining room table in someone’s home, theirs was just as good as some fancy, albeit sterile, one in town.

From left: Dr. Richard E. Venning as a medical school graduate; a young Richard Venning with his sister Maisie Ursula Venning; and wedding portraits of Ethel and Richard E. Venning.
The Building of a Hospital

Before it was a hospital—even before it was a house—it was one of two half-acre lots of land owned by Samuel Washington, a prominent member of the Washington family. In 1799, Washington sold for a fair price these two lots on West Congress Street—lots 39 and 40—to James Duke, a freed indentured servant. In March of 1826, Duke sold one of the lots to Henry L. Eby, who built a small, brick, two-story house on the property, but it was poorly made, and before long the interior of the house was barely discernible; however, some of the beams and doorways did survive, and their early 19th-century features can be found in the present house.

Eby sold his misadventure one year later to the Kennedy family, a major ice supplier in the area, and the owner of the second original lot followed suit. Contemporary accounts indicate that the powerful Kennedy family, which had family ties to the Confederacy, remained active in the region’s ice business through the early 1870s. When the family sold the property to family friends in 1873, the ice house that was erected during the Kennedys’ ownership, as well as the ice within it, was excluded from the sale.

As the area around this land developed, lots 39 and 40 became valuable. The acre these lots sat on faced the east-west main artery known as Congress Street, and people lived in houses on the adjoining street that fed into Congress a bit further west. It was close to most of the area’s churches, and the public school was fairly close by. Conveniently located a short block’s walk south of downtown Charles Town, West Congress Street was fast becoming a respectable neighborhood.
The house now sitting on this land—111 West Congress Street, to be exact—was acquired by Ann Forrest then passed on to Catherine Henderson in 1876. Henderson was a member of the Kennedy clan. The place was held in trust for the family until a respectable member surfaced to take hold of it—a physician named Charles Taylor Richardson. The house was ideal for the doctor and his family to use as both a home and an office, and thus began its history as a center of healing. It functioned in that capacity for the next two decades.
Two

Doctoring a Miracle
No one ever imagined that a physician would be rugged and inventive enough to create something out of almost nothing.
The Rise, Fall, and Resurrection of the Physician

Doctors were first seen as godlike figures. The Greeks loved physicians because they could cure many diseases and mend many injuries through the sheer force of their rational faculties: the doctor would lay on hands and apply ointments to cure ailments, such as neck fractures. In Roman times, physicians were considered the “hands of the gods.” Despite this reverence for the healer, internal medicine was considered evil. Surgeons were vile, little more than barbers suitable for patching gladiators in the arena. Getting one’s hands dirty inside another person’s body made those hands considerably less than godlike. Real medicine was \textit{iatrocentric}—doctor centered.

America also had its share of revered physicians, but few actual hospitals for them to operate in. War dictated the need for open-air field hospitals, but once the bloody battles ceased, such hospitals vanished. The sick relied on their family doctors for care, but clinics were in dire need, particularly for the men working in mines, such as the limestone mines located just outside of Harpers Ferry, in Bakerton. The limestone mines generated a fair number of work-related injuries. An on-site clinic staffed by a physician would have been a true luxury. It did not come to pass for a very long time.

It wasn’t until after World War II that small-town health problems received national attention from then-President Harry S. Truman. Under the Hill-Burton Act, several states, including West Virginia, received money from the federal...
government to build small-town hospitals. Although Charles Town already had its own, by the end of the 1940s, the old house on West Congress Street had outlived its usefulness, and this new health care initiative created a favorable climate for a new hospital in Charles Town in 1948. Later, in 1975, a newer hospital was built to keep up with the demands of the growing area, but it was the big yellow house that had set the stage for such progress 71 years earlier.

**Losing Patients**

In 1904, nobody in the nation’s capital ever imagined that a physician would be rugged and inventive enough to create something out of almost nothing. Doctors in West Virginia did not just go ahead and build their own hospitals … did they? They needed coal company backing, didn’t they?

German scientific medicine—or even that found closer to home at Johns Hopkins University in Baltimore, Maryland, with its new-fangled promises—was scarcely possible in a rural environment. How could such things be possible in a place like Charles Town? It was just a small town, after all. It was scarcely the place one would go looking for a medical miracle.

Such a view made perfect sense in 1904, particularly if the overall state of medicine in 1904 was taken into account. Physicians had not yet emerged as a group to be much admired, let alone cherished. Decades—if not centuries—of distrust lay between the healer and the healed. The relationship was acrimonious, and results were terrifying; people were never sure a doctor could cure them.
This unhappy, albeit convenient, assumption was based on existing practice. Although they had once been revered for their magical healings, doctors were not always able to cure 100 percent of the ailments 100 percent of the time. Until scientists discovered the vaccines needed to combat the major illnesses in the early decades of the 20th century, people did not trust doctors and often vilified them as proverbial snake-oil salesmen. Doctors had little in the way of standardized training until the period just after the turn of the century, and even this training varied from one to six years and featured conversance with such exotic techniques as the water cure, an ancient and medieval art of healing vapors and salts that became popular just after the Civil War. Water cures found expression in about three dozen full-fledged hospitals, some of which have survived the modern health care system.

Many serious future American physicians fled to Europe, where certification was more meaningful and could bolster their credibility when they returned home. A smaller number gravitated toward the few elite training centers at home. These centers emulated their older European counterparts and tried to make a case for more rigorous regimens of learning and patient care.

Well-founded and scientific training did little to erase doctors’ negative image at first. Even as late as the 1920s, medicine men at carnivals offered miracle cures for a price, and outright hucksters and polished charlatans were a common feature of rural life. Although popular literature of the Midwest and Deep South immortalized these indelible characters, they did little to alleviate the fear, distrust, loathing, and contempt most people held for most physicians from 1870 through to the early 1900s. A physician in 1900 could expect heavy scrutiny.

Some doctors were better than others, though some were viewed as no better than a traveling salesman. Regardless of a doctor’s skill, the antipathy toward the medical profession was evident and nearly ubiquitous. One reason for this: most doctors had an inappropriate, inadequate, or much-diffused clinical background. Another reason had to do with the collective credibility of the medical guild itself. The ingrained distrust was longstanding and originated from a doctors’ inability to wipe out all disease. At frequent intervals, a half-dozen hideous diseases could be running rampant. Organized medicine and its healers appeared virtually impotent in the face of such epidemics, causing the public’s health to suffer repeatedly as one rampage after another killed many and debilitated many more.
Cities were at high risk: rats, garbage, and overcrowded living conditions made populated areas ideal breeding grounds for deadly disease outbreaks. However, living in a rural area did not provide a guarantee of immunity for anyone. The scourges of previous centuries were present at the beginning of the 20th century. Charles Town still had to endure the ravages of typhoid fever, as well as polio that would visit three generations of Americans. New and intensely virulent strains of influenza left Asia for Europe and America, arriving just as American soldiers joined the fighting of World War I. These diseases would kill more than the wars.

A Resurgence of Respect

The turn of the century gave North America its fair share of raging contagious diseases. Some of these diseases swept swiftly through urban and rural areas with terrible results. Mortality rates ran 20 percent and higher of those affected.

In addition to taking human lives, such diseases could devastate a small town as well. During the War of 1812, Harpers Ferry had been so infested with disease it had to be completely quarantined. The town was small enough that it could be sealed off, but what could health officials do about such epidemics later on, like when typhoid fever swept through Charles Town in 1831, followed by cholera in 1832?

Prior to the advent of vaccines, victims of diseases such as tuberculosis were clinically and physically segregated. Special hospitals were built to house them, and the image of such people being consumed by their disease made its way into literature in the United States and Germany as well. Isolation in well-prepared medical retreats, however, had little effect on the victims of many other diseases such as pertussis, small pox, and yellow fever.

As the 20th century began to unfold, many medicines to prevent infection from these diseases were discovered, and the frankly hostile climate regarding doctors and their practices dissipated. Some doctors in places like Johns Hopkins began arguing that the *ars medicinae*, or art of healing, was scientific and rational once again. Many Americans began to trust their doctors.

Resiliency of the County Seat

At this time, doctors in the urban areas had the advantage of being able to do some of their surgeries in hospitals and clinics, but doctors in rural—or almost rural—areas had no such recourse. These doctors to the west and south of Charles Town were a different breed of doctor. Doctors were scarce just a half a day’s horse ride to the west or south of Charles Town, and many of these residents were forced
to put their lives in the well-meaning hands of a country doctor. Although his heart would be in the right place, he did not have a clinic or hospital to support him.

Doctors working for mining companies became fierce champions of the need for a company clinic then a mining company town hospital. With a central treatment center, mining company doctors could manage surgery, combat sepsis, and—because few roads existed—avoid nearly impossible house calls.

These doctors were joined by a miners’ union in their struggle to obtain coal company recognition and real benefits. This led to a full-scale war in the 1920s that pitted federal troops against miners west of Jefferson County in Logan and Mingo counties. Three strike leaders were tried as traitors in the same courthouse that saw John Brown condemned 63 years earlier.

Battles at every level and around every corner were always on the minds of the residents of Charles Town and its surrounding areas, including the battles against deadly diseases. Deaths from these diseases ran back to the 18th century, but still could come on quite suddenly. More than 40 people died in the span of four months during the 1918-1919 influenza epidemics. The town lost only slightly more than that in all the years of World War II put together.

Mortality was something the people in Charles Town knew all too well, but they also had a resiliency about them. Unlike many other towns to the west and southwest, Charles Town, as the county seat of Jefferson County, had a character all its own. It was by no means a coal camp: one company did not control the entire town, and despite disease, Union soldiers, and a one-time water shortage, the town established itself as a small population center.

Preserving the Town’s Lifestyle

One less-deadly threat to the town’s life came in the area of aesthetic sensibilities. Charles Town had been burned and fought over, but its people wanted to preserve the charm of its pristine architecture, right down to the stones embedded at the crossroads of each of the town’s streets. It was little more than rural in its appearance during the 1890s,
and although the town was a place to shop or visit with friends, it had tried to remain avowedly residential in character. The main street had only a small-scale business area.

The serenity of a small and well-preserved town mattered, and perhaps Charles Washington’s gift to future generations was ensuring that Charles Town had no

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### A Town on Fire

The 19th century presented Charles Town and its citizens with several major dangers. In addition to war and disease, fires were a problem that played havoc with the town and was something most of its residents had experienced at some point in their lifetime. During the Civil War, the Union army burned buildings downtown, but fires broke out in peace times, too. Five major fires plagued the town, including one that burned down the Zion Episcopal Church in 1848 and one that consumed the town’s newspaper in 1853. Fire engines were bought as early as 1830, and more were acquired later on. Town ordinances required each household to have on hand at all times two red leather buckets full of water.

Two fully constituted fire companies were organized in 1884 to conduct a more coherent response to the fire menace; however, with only one major well to draw from during a fire emergency, both fire engines might feasibly have to go to one end of town to load up water to fight a fire on the other end of town. The elapsed time away from the scene of the fire could result in tragedy and total loss of property. Shrewd managers brought in a drill that bore into the ground deeper than ever before and made more wells.

This civic-mindedness on the part of Charles Town residents would prove a godsend to doctors and other citizens in the near future. These dangers tested the mettle of the people, and the town’s ability to bring its citizens together to solve problems had, by 1917, become a well-established tradition. At this time, war and pestilence once again influenced the lives of people living in Jefferson County. The war escalated to involve Americans, the polio menace surfaced in dramatic fashion, and, worse still, a lethal strain of influenza raced through Asia and Europe, killing as many as 40 percent of the people living in parts of the United States. Jefferson County was not part and parcel of some desert island. Death from war and death at home were just over the horizon.

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Left: Postcard front and back, postmarked on January 27, 1917.
room for factories. If people wanted to work downtown or in a manufacturing environment rather than an orchard or a farm, an alternative, fringe area just a bit north of the town was created. It sanctioned what today might be called an industrial park or a free-trade zone. In 1890, the lure of the Baltimore and Ohio Railroad and a few good roads resulted in roughly a half-dozen manufacturing facilities being built in close proximity to one another. Twenty years later, the industrial area petitioned to become a town and emerged as the Corporation at Ranson.

The corporation still exists today. The factory zone never did take off. An icehouse and refrigeration company and two Episcopal schools for girls were its most enduring features. The border between the residential
Science Takes on Traditional Culture ... And Wins

The hospital in the big yellow house on West Congress Street had its inception and formative period during a time when science and folklore were battling for the hearts and minds of patients throughout West Virginia. Competition between mainstream curative medicine and such alternatives as the water cure was alive during the first two decades of the 20th century. Sick people could bathe their sorrows away; they could also take root medicines, herbs, or food-based remedies. Some chose to rely on religious ceremonies in the hope of getting better. Divine intervention was sought—and doctors were by no means gods: the scientific ones had yet to prove their point.

The mountain people of West Virginia preferred to leave scientific remedies to the big cities like New York. Their traditional family medicine was part of their cultural values. Not only did it offer generally effective antidotes, this traditional medicine used roots and herbs that were both affordable and ripe for the taking.

In the face of such traditions, the fledgling West Virginia Medical Society began lobbying for better and more comprehensive medical licensing standards as early as 1907. At the time, West Virginian physicians freely admitted that the society had never owned up to its responsibility for physician management of communicable diseases. They appealed to several governors in succession to pass laws mandating both scientific medicine and the deliberate management of communicable disease.

Early 20th-century West Virginia shared in the taut, sometimes twisted microcosm of American medicine. Progressive reforms were the rage nationally in the early 1900s. Capable, determined governors had reformed some of the governmental practices of West Virginia by 1910, and leadership passed in the next decade to a member of the Hatfield clan who had not only worked with coal companies, but also held two medical degrees and was a proficient surgeon.

Governor Henry Drury Hatfield created a public health department within West Virginia’s government and charged it with enforcing standards that had bearing on diseases. Standards for levels of health care personnel were not far behind. While the scientific physicians rejoiced, other affected parties were not so exuberant and filed a suit to block the state government’s intrusion into the private affairs of its citizens. Ultimately, the U.S. Supreme Court ruled in favor of West Virginia’s right to regulate health care within its own borders.

One Doctor’s Revolution

When Dr. Richard E. Venning and his wife, Ethel, purchased the house at 111 West Congress Street in October of 1901, they brought with them an unprecedented reformation of their own. The area surrounding Charles Town (including Ranson) was comprised of farms—lots of orchards and rustic, rock-bound, mountainous
Purchasing a Home . . . and More

Venning and his wife bought the two original lots, 39 and 40, in October of 1901 for $4,000 at 6-percent interest. They paid one-quarter of the purchase price upfront and finished the purchasing process with three equal payments over the next three years. In 1911, they sold the hospital to the newly formed board of directors of the Charles Town General Hospital for $6,000.

Below: A copy of the carbon of Dr. Venning’s letter dated October 29, 1908.
areas. The small town of Charles Town, with a population of close to 2,000, had 12,000 neighbors that could feasibly need a doctor’s care. In the Eastern Panhandle of West Virginia at that time, the doctor went to the patient. Often medical devices and medicines were placed on a wagon, and it rolled to the patient’s side. The patient was treated at the scene or, in rare cases, in the wagon en route to the semi-sterile doctor’s office. The doctor would sterilize instruments using a kitchen stove that had been mounted on the back of the wagon.

Venning did not relish such conditions. Although he was a skilled surgeon (due, in part, to his ambidextrous abilities), he’d spent most of his adult life shaking the effects of the malaria he’d contracted while living in South Carolina, and his eyesight was such that he dared not drive a wagon to see a patient at night. In fact, his young daughter Laura often served as his driver as Venning traveled shortcuts and bypasses to make house calls to the area’s hinterlands.1

1 From an interview with Laura Gilliam, Dr. Venning’s granddaughter, February 17, 2004.
Hospital and Home

Venning put patient care, in whatever manner he could provide, before personal wealth and even his own health. The hospital was his passion, and he put his family’s privacy on the back burner. Children growing up inside a home that had been transformed into a hospital, with its gore, sickness, and cries in the middle of the night, were clearly at risk, but there were lighter moments. The sight of doctors and nurses hustling about lent a certain excitement to the lives of the Venning children.

Sustaining a hospital like Venning’s was an enormous stress on the physician. When he and his family moved out of the hospital, he gained a bit of peace and quiet living in a house next door, but he was still haunted by the diseases running rampant though Charles Town and the surrounding region. For some of the victims of polio and influenza, all he could do was assist in the digging of graves used to bury them.
In addition, Venning’s surgical experiences in Jefferson County had left him dissatisfied with the clinical status quo, and he was determined to give something on a grand scale a try. He could visualize the inevitable success of a surgical practice, but he was at a loss to do figures, so his wife Ethel kept the books for the hospital for many years.

Venning’s professional agenda first required more space. In December of 1904, Venning converted the second story of his personal home into a suite of five bedrooms, one bath, an operating room, and a sterilizing room. These renovations provided his clinic with six beds instead of just one, but when his practice outgrew even these accommodations, the Venning family moved into the house Venning had built next door.

Venning’s success with the area’s first hospital was dramatic and quite impressive, but one doctor couldn’t run an entire hospital. Lack of personnel meant long days and longer weeks for the doctor. This was especially true during wartime and the onrush of serious epidemics.

Among the first doctors to join in Venning’s efforts in 1904 were Abner O. Albin, F. Murray Phillips, and C. C. Lucas. Albin became a close associate of Venning’s and served capably both administratively and medically. For Albin, money didn’t figure in to health care, and the hospital began operating under a guiding principle: nobody should ever be denied medical care because of an inability to pay a medical bill. Care was given, sometimes as a gift—a rare practice for acute care facilities, then or now.

In support of this belief, Albin allowed the overseer of the town’s poor to witness the beginning of an operation, which, if all went well, would prove the facility’s worth. The operation involved an African American girl named Mary who had no money but needed her appendix removed. Albin saw to it that the surgery was done. The invited overseer, who fled in horror when the operation began, began burial arrangements for the girl by finding a cheap wooden box of the right length and height.

But the patient lived. She went on to lead a healthy life, and her presence on the streets and in the stores of Charles Town was a walking testimonial to the tireless medical doctors, the support staff, and the building’s sterile operating procedures. The overseer’s purchase of a coffin clearly cast a vote against the viability of the new medicine and the new hospital, and its supporters couldn’t have designed a more effective marketing campaign. Mary’s survival established the presence of a new style of medical practice. From then on, the people of Charles Town and the surrounding areas could expect private and sterile care.

Financial Matters

Clinical success carried with it some burdens. Managing a doctor’s office was one thing. Administering what was clearly taking on aspects of a hospital was
increasingly more complex. Hallie Washington, a local nurse with training from John Hopkins took sabbaticals from her big city job and moonlighted frequently as a senior member of Venning's fledgling hospital staff. She organized the nursing component of care for the hospital and was soon joined by Edith McGarry, a student nurse. McGarry's experiences as a student in the Charles Town General Hospital proved invaluable. She emerged from the experience a first-class critical-care nurse.

Despite this help, Venning and Albin faced a real problem: credibility meant more business, and more business meant that five beds were not going to be sufficient for long. More supplies and equipment were in constant demand. Too much was happening, and so much still needed to be done to keep the hospital running. The doctors had to figure something out before administrative burdens affected both medical and surgical treatment and case management.

In 1912, no preferred provider organizations existed: the functional equivalent was the joint stock company, which operated like a modern limited trust corporation. In this joint stock company of Charles Town General Hospital, everyone belonged, everyone helped, and everybody shared in the governance. The profits rolled back into the operation. Venning's former house was capitalized at $25,000—over four hundred percent of the amount he paid for it 10 years earlier.
Decades after Venning traversed the countryside with his daughter as his driver, a female physician ventured into those same hills and mountains to deliver babies on site when a trip to the hospital was out of the question. Although her transportation was motorized, the journeys were still difficult, but Dr. L. Mildred Williams never admitted to frustration or fear under any circumstances.

This page: Original Articles of Incorporation dated 1912.
Four hundred shareholders, who purchased shares at $25 apiece, elected Venning and Albin to the board of directors. Twelve other directors were then elected, one of whom was a talented entrepreneur and the first president of the newly formed corporation, William W. Rouss.

Under Rouss, the board convinced Venning, as the principal preferred stockholder and owner of the business, to exercise his option to be bought out. The board quickly moved to pay him $10,000, and he kept honorary titles. Although these terms may seem anachronistic, they made good business sense: Venning may have been a hero, but, by his own admission, he was not much of a business leader. He willingly was ushered out of controlling a business and into a full-time commitment in the operating theater. This buyout freed Venning of any financial obligation to the hospital and its affiliate organizations. The hospital was no longer in his personal possession effective February 19, 1912.

To Venning, the joint stock company made perfect sense. People could buy a slice of life and term insurance against sickness or injury in the future. Why shouldn’t people invest in a place that would combat death and alleviate suffering? The system had worked some 300 years before for the Puritans in Massachusetts. It made perfect sense to him and to the other doctors by his side.

But the demand for services increased. The costs associated with obtaining enough medicine, bandages, dressings, and vaccines rose steadily. It was hard to battle against disease and injury with an ever-diminishing inventory of medical supplies. Praise, awe, respect, and gratitude were nice, and acclaim and kind words were equally fine. But money was absolutely necessary, and money was in short supply.

The struggling, yet popular, hospital treated the medically indigent without raising a question of any kind. Resources were often stretched to the hilt, and there was no way the attending staff could miss the omnipresent reality that they were living on faith. While the doctors saved lives with one hand, they were maneuvering fiscal assets to keep the shop open with the other.

Although the initial response from the community was more than satisfying, some individuals saw the need to do more: Rouss was extraordinary in this regard. He had commercial enterprises in New York, Pennsylvania, and Ohio and had established and managed a chain of movie outlets, but he was scarcely a stranger to Jefferson County. He even maintained a residence in a nice section of Kabletown, an area just a few miles south of Charles Town. Rouss began a local charity organization, the Rouss Fund, dedicated to
raising money so that the medically indigent would not have to pay for care at Charles Town’s hospital. People were approached for donations, and they donated compassionately and generously.

Rouss’s vision helped defray hospital costs for decades, but, at another level, the people had to wonder about the long-term future of the hospital. Those facing polio and typhoid and traumatic injuries had to go there if there was to be any hope at all for them. Venning and his associates were valiant, but at times the existence of the hospital and its staff seemed left to chance, whims, charity, luck, and an unbroken record of success and growth. A little bit of worry had begun to creep into the popular mind. As the prospect of war with Imperial Germany loomed, nightmares of men being away and the economy being strapped for laborers gave many pause for even more concern, and some wondered how they could guarantee the continued existence of the hospital.

Despite the area’s generosity, the joint stock company was not a success. Shares valued at $25 depreciated to $1 in the course of a few short years. Worthless stock that never rolled into a profit over the course of five years came as a surprise to Venning, and although he and the hospital he created never lost the support of the Rouss Fund, the hospital needed more. The process of looking for a feasible alternative was a slowly evolving one. Venning, Albin, Miller, and Knott were at the core of the group driving the transition to something they hoped would serve the hospital’s interests better.

A Saving Grace

The failure of the joint stock company seemed incomprehensible to Venning, and he viewed this turn of events as the beginning of the end. People could pay lip service for free care to the poor who were severely ill and badly injured, but the actual summoning of money from their bank books did not always follow suit. The doctors’ medical successes had not been matched by business skill or management prowess, and on March 19, 1917, when polio was rife and influenza was already arriving in America from overseas, the public assumed control of Charles Town General Hospital to ensure its ability to serve those who needed it.

Venning’s vision had endured, but it was now being abducted from him, piecemeal. All the stock shares were called in and duly eliminated. The surrender of the old stock was a finite matter. It meant a complete change in governance, and a new charter as a nonprofit was adopted.

On the surface, the nonprofit trust carried with it the promise of additional job security for Venning and the other doctors. Funding did not come from stock that could rapidly and easily depreciate. Instead, constituent members of the newly chartered entity comprised anyone who contributed a preset amount of money. Members were then given a say in the governance of the institution. Profits would revert directly into the hospital’s own funds, and it was believed that creating a nonprofit public trust would ensure a sort of immunity for the hospital from taxes.
We, the undersigned, and each of us, in consideration of $1.00 each, and other good considerations, do hereby give, transfer and assign all our stock in the Charles Town General Hospital, a corporation, and all our interest as stockholders or otherwise in the business and property of said Hospital, located at Charles Town, Jefferson County, West Virginia, unto W. G. Norris, W. A. Higgs, T. T. Perry, J. B. Brazier, R. E. Venning, C. L. Skinner and C. F. Wall, trustees, upon the following trust and conditions, to-wit:--

The said trustees shall hold in trust the property hereby vested in them, together with any increase in the value thereof, by donations or otherwise, and shall apply the income therefrom to the support, betterment and maintenance of said Charles Town General Hospital until the termination of this trust, as hereinafter provided:

Said trustees shall, at such time and in such manner as they may determine upon, in the exercise of their full discretion, give, transfer or assign the property held by them hereunder, either directly or indirectly, to any Board of Trustees corporation or other organization which may hereafter be organized or selected, to take over and operate said hospital upon an eleemosynary basis, or so that there shall be no private interest or financial private profit therein, all profits, donations or other acquisitions to be used for the support, improvement and maintenance of said hospital, and in the accomplishment of said purpose said trustees shall have full discretion and absolute power.

Said trustees herein named shall constitute a Board of Trustees who shall elect a President from one of their number, who shall have authority to act for said Board of Trustees, and in its name when authorized by a majority thereof.
including himself; and a majority of said board of Trustees shall prevail and be authorized to act in all matters.

In the event of the death, resignation or other disability of one or more of said trustees, their successors may be elected by a majority of the remaining trustees.

WITNESS our hands and seals this 20th day of December, 1915.

[Signatures and seals]
City, county, state, and federal levies would no longer be a problem for the doctors. People could still contribute to the hospital’s survival with money and opinions, and their opinions began to carry weight.

The new trust made it necessary for additions to be made to the hospital, including a finished third floor that increased the number of beds to 21. Over time, limited capacity would prove to be the Achilles’ heel of the house on West Congress Street. As the 1920s roared in, the hospital acquired its own motorized ambulance, and the townspeople looked to the future. They began to conceptualize a newer, larger hospital—one that would eventually prove more suitable to the needs of a burgeoning community.

**Race Mattered**

Race mattered in America, and it mattered in Charles Town, West Virginia. The hospital recognized that a separation of the races existed, but it did not mean that doctors and others would deliberately shun one race in order to treat another. From the outset, patients of all races received care in the hospital. In practice, care giving was segregated: the overall quality of the care was not.
His Final Days

The acuity associated with Venning’s dramatic, vital, yet oft-imperiled hospital work found expression in a severe and recurrent high blood pressure condition. By the age of 50, his ability to do hands-on management diminished as his health worsened, and in 1919, he retired to Charlottesville, Virginia, where he and his wife lived just a short walk from the University of Virginia Campus. The situation held some potential: his wife was free of her bookkeeping duties. She did not have to plan menus for the hospital ever again. And the area was pretty. But Venning’s high blood pressure persisted, and, unfortunately, high-blood pressure patients at that time had little recourse.

Venning died of a heart attack shortly after his retirement in Virginia. He is buried in Edge Hill Cemetery in Charles Town, West Virginia, where he is still a revered pioneer of modern medicine.
Destined to Survive

Three
People of all social, economic, and racial groups stood fast, determined to overcome.
The Roaring Twenties brought to Charles Town, West Virginia, and the rest of the country the end of a war, the beginning of Prohibition, and an illusion of perpetual peace. During this decade, the stock market spiraled in unbelievable growth. Stock was bought cheaply, and brokers and the affluent spent tomorrow’s profits on margin. Everywhere one looked in the business community, people were loaning themselves money against the collateral of money they hadn’t been earned yet, but nobody dared question it. From 1921 to 1929, desperate gamblers betting against their own illusions fueled American economic growth.

Prosperity in Charles Town

America’s runaway economy touched even the rural Charles Town community. Certain families exerted a great deal of influence over civic and cultural matters. People could see the latest movies—the town had an opera house and two rather
The area was tightly knit and carefully organized at its highest levels, and orchards were powerful and prominent. In fact, the area was home to the world’s longest unbroken apple orchard: the trees ran for miles. So important was the orchard industry that cedar trees were uprooted and destroyed to protect the area’s apple orchards from blight.

The banks kept $50,000 in capital fully available for business use—one reportedly had a $75,000 cache of
surplus funds. During this time, a modicum of industry chugged along in Ranson, and construction was on the rise. The Charles Town city government was building schools all over town, including a stylish, award-winning African American high school on Harewood Avenue, a few short blocks from West Congress Street. In 1929, an enterprising individual could take advantage of this community emphasis on education in short order, earning a three-year degree and high school teaching certification from Shepherd Normal School, which was less than 10 miles down the road.

The Hospital During Prosperous Times

Throughout this prosperity of the 1920s, residents counted on Charles Town General Hospital. The hospital had built up an enormous amount of good will over the course of a mere 15 years, and people put their trust in the home-grown acute care facility. It might have been the only hospital in town, but nobody could deny its excellent reputation.

Except for a brief stint as a doctor for the Baltimore and Ohio Railroad, Albin remained a steadying influence and creative force at the hospital on West Congress Street. After Venning’s retirement, he directed a disciplined nursing staff and a core of doctors who had stayed on staff since the early days and continued on into the new, if uncertain, era. Before long, the equivalents of modern-day residencies were offered by the hospital and the surrounding region to eager, talented physicians from West Virginia and elsewhere.

Under Albin’s guidance, the facility excelled in certain areas. Beginning with the hospital’s first appendectomy performed on the poor African American girl, Mary, the hospital built a solid record in that area. Charles Town General’s doctors also dealt with trauma, but they were particularly successful in the area of live births. Albin, himself, had trained as an obstetrician, and by 1929, the hospital had secured the role of a birthing center for the town and the nearby hills.
Success, however, was tempered by fiscal difficulties. Under the nonprofit trust, the health care system took on the attributes of a public utility. Practitioners held up their end by delivering high-quality care. In theory, the distinct management collected enough fees to offset the expenses incurred in delivering such care.

Charles Town General Hospital: March 1929 through March 1930

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<td>Deaths</td>
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*Rouss Fund Patients ............... 113
(more than 37 percent of admitted patients)
care and liberated the caregivers from fiscal concerns. However, in 1930, the annual donation sale was not as good as had been expected. Receipts were just $15.25—some eight dollars less than the year before. Three out of every eight patients in that fiscal year were paid for by charity, and nursing alone garnered $8,160.

Long, fatiguing shifts and substandard supplies surfaced as unavoidable byproducts of the newly constituted system. In a time when a reliable automobile with deluxe interior and chrome cost about $1,000, only $97 was allocated for the motorized ambulance that served the town and its surrounding area. Although popular perceptions were gratifying, heartwarming, and oft times inspiring, all this warmth and confidence held no guarantees.

Depression and War Add Insult to Injury

When the stock market crashed in 1929, banks collapsed. Businesses failed. Homes were repossessed. Millions of Americans became unemployed. As this Depression swept the country during the 1930s, the governors of West Virginia bitterly resisted President Franklin Delano Roosevelt’s New Deal, in which the federal government primed the country’s banking and credit system by pumping cash into it. The scale of this action was unprecedented, and the government was viewed by most Americans as a necessary evil if the country was to recover economically.
American democracy was at risk. As banks dispossessed more and more Americans, many began to idolize gangsters who robbed the banks. Some even went so far as to help the criminals escape from the cops and G-men. Violence broke out in Iowa; in Washington, D.C.; and in the Hoovervilles where the homeless set up temporary residence. Oklahoma turned to dust and blew away, taking with it the once-arable surface soil of the former Indian territory. Communists and fascists came out in the open looking to make political gains from other people’s miseries. Democrats fought among themselves, and Republicans took the blame for a runaway economy that crashed and fell into a million pieces.

By 1940, the nation was straining to shake free of its economic doldrums. When America entered World War II, it revived the economy. Steel and related industries thrived. Assembly-line manufacturing soared to new heights. The country built so many ships that the Nazi submarine fleet ran out of torpedoes. American tanks were small but many, and American bombers flew out of the factories. American manufacturing was such that the country was able to lease trucks and supplies to the Russians.

Economic upturn wasn’t the only effect from the war. Women took on a higher level of visibility in the workplace and in professional athletics. But others weren’t affected so positively. German and Italian fascist sympathizers in America were imprisoned, and Japanese Americans were placed in internment camps. Although treason was rare, something decidedly unpatriotic was more common. Real coffee, nylon or silk stockings, and some extra gasoline for automobiles were for sale in the sinews of the black market. These traders felt that they had suffered enough during the Depression and were out to make their profit.

Returning to normalcy after the war
sounded easier than it actually was. The grim ugliness of the 1930s was gone: democracy was resilient. However, soldiers returning home meant a massive influx of capable workingmen into a suddenly less-robust job market. To delay such saturation, a massive educational benefits program for returning military personnel began. The Korean War, as well as the Cold War with Russia, both which required the continuation of a large military program, helped divert even more human resources away from the domestic economy.

The View from West Congress Street

Charles Town and the rest of Jefferson County had no real immunity from the horrors of economic failure. The area could not hope to be untouched by a global war. The sheriff’s sales that resulted when bad debts turned into bankruptcy became commonplace in 1930 and 1931. The amount of money the bank had on hand for loans was no longer trumpeted in the newspaper. Instead, people of all social, economic, and racial groups stood fast, determined to overcome one more crisis.

Throughout the depression and the war that followed, Charles Town General Hospital operated as it always had. Many people, both rich and poor, needed care. Those who couldn’t pay cash paid in other ways—maybe a duck or a near-thoroughbred horse (or two, if a patient relapsed). Since that first appendectomy, the generosity of the doctors—and later, of the Rouss Fund contributors, as well—was an enduring testament to the beauty of charitable care.

For News and Entertainment

The radio made the nation one land during wartime, growing ever-more popular with audiences listening for vital news from overseas as well as something lighter to take their minds off the reality they lived in. Edward R. Murrow reported about German bombs as they fell around him. A once-stellar German actress and singer, Lili Marlene (Marlene Dietrich), was transmogrified by war into an American icon and inspired the frontline troops as well as the folks at home with her stirring support of the Allied war effort. Artie Shaw, Harry James, Tommy and Jimmy Dorsey, Benny Goodman, and Glenn Miller kept folks jitter-bugging until life was fun and downright enjoyable again.

This page: An unidentified shoveler clears a path for potential patients and visitors, circa 1927.
New Blood Not Enough to Save Hospital

Dr. John L. VanMetre joined the hospital staff during the 1930s. Raised in nearby Shepherdstown by his aunt after both his parents died in the great influenza epidemic of 1917-1918, VanMetre first attempted a scholarly path toward chemical engineering. Eventually, he became a physician and found his way to the hospital on West Congress Street.

In November of 1939, Dr. Marshall Glenn left behind his experiences with big city medicine at a large medical school in Chicago and, with his family, bought a farm near Martinsburg. Farms like Glenn’s, which kept functioning and earning revenue even in hard times, held an additional advantage: they

Sports, Medicine, and Much More

Dr. Glenn had been a star athlete in high school and a first-class football and basketball star at the college level. His talents got him inducted into the West Virginia University Sports Hall of Fame, and he went on to be a first-class football coach, as well.

Growing the Community

Glenn established a drug store in the area, and, like the hospital, barter was accepted as payment there, too. He also enlisted the help of his friends and business associates to set up a community golf course, which high school golf teams still use today.

2, 3 From a telephone interview with Mary Ann Hammann, Dr. Glenn’s daughter, February 24, 2004.
could provide food to the farming families throughout depression and war. Although Glenn left to serve in the war, he returned to Jefferson County after his service in the Medical Corps to the 1st Marine Division ended.

Despite this new technology and the additional support, still more was needed. Staff members joining the team in the 1930s could not help but feel the demand for hospital-based care in the area would soon surpass the Old House Hospital’s capabilities. It was too small to keep providing first-rate, quality acute care to the people of Charles Town and the region surrounding it. As it was, any type of complication could mar its otherwise excellent record.

VanMetre had been contemplating how to transition the hospital to a larger facility before the second World War even began. Migration to the bigger facility was a medical necessity, and planning for an orderly transition accelerated while the war was still raging in Europe and the Pacific.4

Mr. R. J. Funkhouser, a familiar face around Charles Town and Ranson, became involved with the direction of Charles Town General Hospital in the 1940’s after he was approached by Dr. John L. Van Metre to help fund the construction of a the new more modern health care facility. Funkhouser used his intellect, charm, and guile to help raise funds for a new hospital and to insure the hospitals construction he personally pledged to match all funds raised by the community dollar for dollar.

A Children’s Hospital

In the 1940s, children played in the yard behind the hospital, near a fish pond, next to the alley. They even helped with hospital work. Glenn’s young daughter donned her mother’s blue regulation Navy cape as she followed her dad around on rounds in the hospital. One special attraction kept her coming back: Charles Town General Hospital had the town’s only elevator. Small, intimate, and homey, it was a mechanical marvel in the midst of medical miracles.

4 From a telephone interview with Lee VanMetre, Dr. Van Metre’s son, March 25, 2004.
CHARLES TOWN KIWANIS CLUB OBJECTIVE

Our Charles Town General Hospital has served Charles Town and Jefferson County for years. This hospital has a very fine record and everyone is proud of this record. Today our hospital is too small to adequately serve the community. Increasing numbers of people are going to Winchester, Martinsburg and Brunswick because there are not sufficient beds locally. Twenty-one adult beds are available whereas fifty beds should be the minimum. While our hospital is doing an admirable work, the health of the county is jeopardized because of insufficient space.

Therefore we feel that a new hospital and nurse's home should be built in Charles Town. The new hospital should be of sufficient capacity and so equipped as to serve all of Jefferson County under accepted medical standards.

A three year building plan should be started during 1943. People of our community have more money now and are willing to give during these times. Now is the time to do our post war planning for the betterment of our community.

Our suggestions are:

1. A Committee be named by Kiwanis President to meet and draw up an organization plan.
2. The Committee should meet and discuss their aims with the present Hospital Board.

The above objective was adopted unanimously by the Kiwanis Club at their weekly meeting February 22, 1943.

CHARLES TOWN KIWANIS CLUB

[Signatures]

[Handwritten notes on the page]
Charles Town’s citizens bought ration coupons, and the money raised helped pave the way for a new Charles Town General Hospital that would be moved out of Charles Town to a larger land area in nearby Ranson. These fundraising efforts managed to garner $225,000—a considerable amount, especially during wartime. People in the area knew they needed a hospital, and the whole town took an active role in the campaign to ensure that a new hospital would be built to serve its citizens.

The new hospital that opened in Ranson in 1948 served the people of Charles Town, Ranson, and nearby towns for the next 27 years, until a third hospital was built in 1975 to once again address the expanding need for health care in Charles Town and the surrounding areas. Charles Town’s first
general hospital, the big yellow house on West Congress Street would remain a local treasure. When resources were dear and revenues scant, selfless health care personnel drove themselves relentlessly to provide quality care to others. Doctors Venning and Albin and their colleagues made a significant mark on the history of American medicine with sterile techniques, unprecedented skill, and the dedication to make the profession better.

The community’s goodwill toward the hospital and the doctors who served there had grown enormous. Staff members were aided and abetted by financiers who believed that charity care was the correct thing to do. Without Rouss and his fund, in particular, the hospital would never have transcended the 1920s. With so much support, the hospital on West Congress Street was an unqualified success from 1904 through 1948, offering the best care contemporary medicine could provide. Because of the hospital, a different type of medical care would be given to a different class of patients in the decades that followed.
For many people living in Jefferson County, the house at 111 West Congress Street was birth, life, and death. The 44-year run of the first Charles Town General Hospital proved to be something both fragile and magnificent. From 1949 through the 1990s, the original Charles Town General Hospital became a well-run nursing home noted for its style, its good food, and its fine china. In 2003, the American Public University System, a private school with a heartfelt commitment to offering low-cost, high-quality education to the military personnel of this nation, established its headquarters in Charles Town, West Virginia. The old house received a new wash of yellow paint and became the partially modernized big yellow house, and the current tenant has contributed much to the poignancy of the past hospital’s imagery.

The university renovated the building with an eye toward preserving and restoring as much of the original wood and metal fittings as possible. Today, as its students enter the headquarters reception area, they see a beautiful reception desk sitting just across the hall from the stairway leading to a large basement that used to be a morgue. To the far right of the reception area is another, broader stairwell. Inside the foot of the banister is a white button, which in the past was used to ring the upstairs.

At the head of the first flight of stairs is a rectangular window recessed into the wall. A wooden slide opens the hole in the wall so that someone on the other side
can see who or what is coming up the stairs. Nearly a century ago, nurses peaked through this window to assess the type of treatment that would be necessary for the patient ascending those stairs. Later, an elevator was installed to lift patients from one floor to the next, and nurses used a dumbwaiter to pulley meals between floors.

Just as it had in the past, the house at 111 West Congress Street offers the hope of something better for the people who depend on it. For military personnel being deployed to or coming back from Iraq, Korea, and other posts around the world, and for all those whose lives it has touched, the big yellow house remains a beacon of hope.
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A Special Thank You…

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Mrs. Michelle Finney
Mrs. Laura E. Gilliam
(granddaughter of Dr. Richard E. Venning)
Mrs. Laura E. Gilliam
(daughter of Dr. Richard E. Venning)
Mr. and Mrs. Conrad C. Hamman
Mrs. Mary Charlotte “Buddy” Walker Jenkins
Ms. Susan McMahan
Mrs. Minnie Mentzer
Mrs. Lacie MuMaw
Mr. L. A. “Chad” Patrizi
Mr. David Van Metre
Mr. Lee Van Metre