

Sister Therese Gottschalk

Born on a humble farm in Bavaria, she selflessly answered calls to serve both the Catholic church and a Tulsa hospital.

Chapter 1 - 1:00

Introduction

Announcer: St. John Medical Center's Sister Mary Therese Gottschalk was born in 1931 in a tiny village in Bavaria, Germany the second of 14 children. You are about to hear Sister Therese tell her story of being a young girl in Germany in World War II, her call to the ministry, her arrival in the United States and her life dedicated to healthcare and related ministries to the Tulsa community. She became more than a spiritual leader, becoming the assistant administrator of St. John's Hospital and School of Nursing in 1970 and named president in 1974, then becoming chief executive officer of St. John Health System in 1982. Under her leadership the St. John Health System has grown into a fully integrated healthcare system serving northeastern Oklahoma, southeastern Kansas and northwestern Arkansas. This remarkable story from Bavaria to Tulsa is made possible by the generous funding of our founding sponsors and heard on VoicesofOklahoma.com.

Chapter 2 - 4:45

Days in Germany

John Erling: My name is John Erling and today's date is July 29th, 2010.

Sister Mary Therese Gottschalk: I am Sister Mary Therese Gottschalk. At the present time, I am still the CEO of St. John Health System. I was born June 21st, 1931, so I am 79 years old going on 80.

JE: Where are we recording this interview?

STG: At St. John Medical Center, in my office.

JE: Joining us in this interview is Richard Boone. Richard maybe just to review could you please tell us how long have you been with the health system, when you started and you present position here?

Richard Boone: John, I joined St. John in April of 1984 as corporate VP of marketing for the Health System. I was appointed president of the Foundation in 1990, which I still am and I have been here 26 years.

JE: Sister, let's talk about when you were born and let's go way back then.

STG: I was born in Germany in a village because my parents had a farm and so I was born on the farm. In Germany you don't have so many single farms, but you have villages. You have maybe 50 families or 50 people living in a village. All of our properties that we farm are outside of the village, so we go out from the village every day to farm.

JE: So you didn't necessarily live in the farmland, you lived in the village and then went out to your farmland. Was that in Bavaria you were born?

STG: I was born in Bavaria, yes.

JE: It's located in the southeastern portion of the country I think.

STG: Right.

JE: Munich is the capital and it was the host of the Olympic games and football world cups and European track and field championships.

STG: Yes.

JE: Have you been back to visit many times?

STG: Yes, when I first came to the United States. I became a Sister in Germany because we have a convent. I am a Franciscan Sister of the Sorrowful Mother. That's my title. We have our main headquarters in Rome, but we have provinces in Germany, Austria, Italy, and in the United States we have three. So many Sisters were needed. Right after the war there were so many Sisters and we didn't need all of them in Germany, so some of us volunteered to come over to the United States.

JE: Okay, and I am going to bring that up again, but in Bavaria Pope Benedict was born also in Bavaria in 1927 not far from where you lived?

STG: Right, not too far from Bavaria. Well, you know, 40 miles or so.

JE: Yes. He served as a professor of theology at various universities, did you ever know of him?

STG: No, because I came over to the United States in 1953, so I would not have known that much of him.

JE: Right. Let's talk about your mother and father and some remembrances of them.

STG: My mother's maiden name was Sabina Dietz and my father's name was Johann Gottschalk.

JE: Did you come from a large family?

STG: I grew up in a family of 14 and I had two brothers die at a young age, in their infancy.

JE: Fourteen? Where do you come in this order?

STG: I am the second oldest. I have a sister that was five years older than I am. After me, there was one every year it seems like. (Laughter)

- JE:** Maybe then we know how you get along with everybody, you learned how to in your huge family.
- STG:** Right. (Laughter) In a family as huge as ours, the children disciplined each other you know.
- JE:** What did your father do to support that large of a family?
- STG:** We had a farm and we just worked the farm. My mother helped on the farm too, especially in the afternoons.
- JE:** And then he had plenty of help?
- STG:** Thank God I have a sister older than I, so she was the one that had to help on the farm, because I was never a farm person. I was never good at it.
- JE:** But you probably had some chores to do right?
- STG:** I was supposed to always help my mother in the house, babysitting and taking care of the children and other things, getting things ready. She taught me how to cook and so when she wasn't available, I could do some of that.
- JE:** Right.

Chapter 3 - 6:07

War / Hitler

- John Erling:** Was your family active in the Catholic Church?
- Sister Mary Therese Gottschalk:** Yes, because you see, the village where I was and the area where I was, was Catholic. We had other villages where everybody was Lutheran. The reason why it was organized this way was because the past 1,500 years, we didn't have cars. So we had our own school and our own church and everything centered around school, church and maybe a store where we could buy things we needed. That's the way we lived.
- JE:** And so the social activity and everything was centered really around church and your community?
- STG:** The social scene was something more like something like a bar, but it wasn't exactly a bar. Then men would go to play cards and drink beer and eat pretzels. The women had to stay home more than the men.
- JE:** You committed yourself to the Church and that was your profession. Did any of your other siblings do the same?
- STG:** No, I am the only one.
- JE:** Your education then, you attended elementary school right there in the village?
- STG:** What we had in Germany was vocational school that came after elementary school. So we had three years of vocational school for one or two days a week, and the rest of the time we worked in our profession, or whatever somebody wanted to do.

JE: Was it kind of like high school?

STG: It was the equivalent of high school. It prepared you for what you wanted to do. For instance, all my brothers worked to become either a carpenter or an electrician. I had many brothers and every one of them had a different trade.

JE: What vocation did you choose at that time?

STG: At that time it was just household (home economics)

JE: So that training was for how long?

STG: Three years and we had to go to school one day a week. In fact, they still have to do that. That's their system that they have vocational schools, because not everybody goes on to a higher education.

JE: By the way you're siblings, are most of them still living?

STG: In the last 10 years I've actually lost four siblings, three brothers who died of cancer and one sister.

JE: So, then you have five remaining?

STG: Counting me there are still five girls and five brothers remaining.

JE: Did any of them make it over here to the United States to visit you here?

STG: Yes they did come a few times to visit. But it's really the nephews and nieces that come now.

JE: Let me take you back to when you were a child in the house. Do you have any memories of what you did when you were a kid, what you might have done for fun or entertainment, or games you might have played?

STG: Well, we had to make up our own entertainment. We had no TV. We had radio we could listen to in the evenings, but otherwise we just played with whatever we had. We had swings, and skis and sleds and things like that. We didn't miss anything.

JE: And you didn't want for anything either, you always had enough as a family, as a large family like that?

STG: We had girlfriends and boyfriends as we got older.

JE: Right.

STG: But we did a lot of walking especially on weekends and on Sunday.

JE: When did you begin to learn English?

STG: After I came over here.

JE: Okay, so that was basically the 1930s. In 1939, 1940 and 1941, you were 8, 9 and 10 years old, were you aware of war in your country? In 1938 Germany mobilized its military and they took over Czechoslovakia, were you aware of any of this?

STG: I was aware of one day and that was the day that Germany declared war with Poland. It was a gloomy day. It seems like it must have been raining. Everybody in the house had a gloomy kind of attitude. That's all that I remember very keenly.

JE: How did you know that? Did it come on the radio?

STG: It was probably on the radio and of course we had newspapers. But I think it was on the radio because we had already heard about it early in the morning.

JE: That was in September 1939. Did you have fears then of what's going to happen to us now since Germany had invaded another country?

STG: Yes, we had fears of war because most of the people older than I am lived through World War I and we hadn't forgotten World War I. We still suffered from the consequences of that. So yes, everybody was scared of war.

JE: Because in that same month Britain, France, Australia and New Zealand declared war on Germany. Since you listened to the radio, do you remember Hitler speaking on the radio?

STG: Yes, I remember having heard him speak. He had this unique way of speaking.

JE: Well, he was an outstanding public speaker. You've got to give him credit for that, so you do remember hearing him?

STG: In the United States you see him on television and he was just very unique. I believe he had a unique way of convincing people that he is right and to do what he wanted them to do. He was just very forceful. I always resented him because he wasn't German. Not from birth, he was Austrian.

JE: He tried to hide that didn't he?

STG: Probably, because no one ever talked about it much. But he insisted for years that he came from Russia as a teenager and came over to Germany when he was still young. That's when he started convincing everyone about the war. He started out gradually and then got elected.

Chapter 4 - 3:27

Rationing

John Erling: So you were awfully young then, so then when Pearl Harbor happens in 1941, you were just 10 years old. Do you remember hearing about that?

Sister Mary Therese Gottschalk: No, I don't remember that much from the war. I remember people from the village being drafted to go to war. And then I remember hearing every few months about men being killed in the war, just like now how we have men being killed over in the Middle East. The news would come that so-and-so was killed and we would have funeral services for them. That is about all I remember until later on about the last year of the war. I remember that more distinctly. It was in 1945.

JE: Right. And then you would have been 14 or 15 years old and it's understandable your memory would have been better then. Here in the United States we had rationing, did that happen in Germany?

STG: Oh yes. There was a lot of rationing. Because the men, the soldiers, they needed to be fat and so you had to produce food. Being on a farm, you could only have so many hogs and so many chickens. You had to tell how many you had of each. And they would tell you how many you could keep and butcher for yourself and how many you have to sell.

JE: So what other animals did you have?

STG: We had mostly hogs and we had cattle. From the cattle we had milk, but then we had to give away some milk too. But we were in a large family so I should say that we always had enough to eat. Maybe it was not always what children would like to eat, there was no candy for instance during the war. Maybe for Christmas everybody got rations for a little candy, or something like that, maybe just once a year. It was the same way with fruit, especially oranges. We did not have oranges. We were too far north and you had to get them from the south. There were no citrus fruits available.

JE: In school did they talk about the war and the world as you got older do you remember any of that?

STG: We went to our village school and they actually taught all seven grades together. We were all in the same big room together. The teacher taught the little ones, the six year olds and then all the way up to age 14 or 15. He managed us you know. He insisted on actual silence. He started with the older ones and he gave them an assignment and then he would start working with the little ones because by then the older ones would be finishing up their lessons. We certainly knew that there was war and that there were shortages. It would be announced that they went into France or Poland and other countries. Especially Russia, I think we knew more about Russia because he (Hitler) and the Nazis were kind of clever. They would tell the reasoning for instance to go into Russia because (inaudible) was mostly German people who about 450 years earlier had migrated into Russia. So he was just delivering Germans from wherever they were at the time. This is the kind of thing that you heard from Hitler or from the Nazis.

Chapter 5 - 3:20

Heil Hitler

Sister Mary Therese Gottschalk: We had to greet "Heil Hitler" you know. This was our greeting because the Nazis insisted that our greeting should be "Heil Hitler" when you meet somebody, or your friends or relatives or people in the village. This is what we were taught, but we never did it you know. I mean, we had to do it sometimes. When we went to school, the first thing was we said, "Heil Hitler" but when we were out in the street meeting our neighbors or anyone else we wouldn't say that even though we were

supposed to. I remember the occasion we were all out on the bridge and a car came through with some Nazi in it and we didn't greet him. And he drove to our school and he was really rough on our teacher because when we came back to school we all got it too. It was stupid, you know. Why cry "Heil Hitler?" I mean after all we grew up saying, "Good Morning" or "Good Afternoon" or whatever you know but "Heil Hitler" just didn't make any sense. So we wouldn't do it because it made no sense.

John Erling: And you are talking about when you are 8 or 9, 10, 11 years old?

STG: Yes, we had to do it all during the war until the last day.

JE: Do you remember hearing, as you got older and living in Germany, about the concentration camps?

STG: No, I never heard anything about that.

JE: So you didn't know about that until you got over here?

STG: After the war you heard about it. But my parents with so many of us in the family-children talk. When they hear something they go out and talk (repeat it). So my parents never ever talked about it or Hitler or anything about politics. They never talked about it and I think it was partly because if they would say the wrong thing, the children would go and talk you know, (repeat what was said) and before you knew it somebody came to your house. That's where a lot of people got arrested, because they were not careful when they talked about politics. So because of that, it was quite different for those of use that lived on farms or villages with about 50 families. Some of them were bigger and some of them were smaller. Even though a lot of people were drafted and they were fighting in the war and they were killed in the war, there was never a whole lot of talking about it.

JE: Do you recall neighbors near you that were arrested and taken away?

STG: No, I must say nobody from our village was arrested. People that lived in cities that was a different story, because people that live in the city don't live as close-knit families. They would have to be very, very careful. Because when they were at a restaurant, they didn't know who was sitting at the next table. If you were to say the wrong thing, then you might get arrested. So, they had to be very careful and not talk about politics.

Chapter 6 - 5:20

The Call

John Erling: Let's talk about when you were committing your life to the Church and how that came about. There was a calling I think that you had difficulty rejecting. Can you tell us about that?

Sister Therese Gottschalk: I was in an accident and ended up a patient in the hospital. In the hospital there were Sisters, but they never asked me or anything like would you join or something like that. But, they gave me some literature to read and when I got home I had some extra time, I was still off of work for some weeks. I started reading this literature and that's when I opened the book there is a prayer in the very front of the book and I read it too. It talked about how the Church needed us to do some work for the Church. So that's when I felt this feeling of oh my God, I am not going to read this anymore. I might get this vocation and I don't really want one. (Laughter) So I never read another page of it. I just put it aside and never read it, and from then on, that was probably early October and from then on I just never really had peace. Something was always telling me that this was something that I ought to pursue. But again, this was not something that I wanted to do. Again, I was fighting with myself to the point where I—once Christmas came along I kind of didn't know. There was so much pressure for me to do it and I didn't want to do it. I was so restless at the time and I just had to make up my mind, one way, or the other, so that I could have some peace again you know. So finally, I will never forget it, January 6th will always be the day when I felt that I got my calling to the religious life. Because in the Catholic Church we celebrate The Feast of the Three Kings and they had got the calling and they went to Bethlehem and so this is known as the Feast of the Calling and that is when I decided. Today, I am going to make up my mind. And that's when I decided that I would do that. I would enter our community. The Sisters were in Germany. They were not that far away from where I lived. I knew some people, some Sisters that had entered there. I talked to one of the Sisters when she was home on vacation one time. Rather than go to the community of Sisters that operated the hospital there where I was, I preferred to go to the community of the Sisters of the Sorrowful Mother. Basically, I did that because there was another lady, she was actually somewhat older than I am, and she had already signed up to join our community. So I just went with her.

JE: So it was January 6, what year was that?

STG: 1952.

JE: 1952 and you were how old at that time?

STG: I was 20 years old.

JE: So on that day of January 6th, you told a certain person about it?

STG: I did talk with my future companion that was there with me. I did talk to her and she told me that she had signed up. So we went to visit a Sister from our Order who was living not too far away. They had a kindergarten there so we went over to talk to her. This companion, she had a certain date already, February 1st. She was going to join the Order on February 1st, so I said, "Well, I will also join at the same time." And she said, "Oh no,

you should wait.” She encouraged me to wait about six months to think about it some more. I said, “No, I couldn’t think about it some more because probably someone is going to talk me out of it.” I was sure. So, I was very insistent about that. I knew if I waited too long I might change my mind or something. (Laughter)

JE: And on top of that you were feeling a peace that you had not felt in a long time?

STG: That came after that. See, once I had made up my mind and finally said this is what I am going to do...people that found out afterwards, people that I knew in my village or in my life you know, would say, “Surely you’re not going to do that.” Or, “No, you wouldn’t do that.” I kept thinking why do they think I can’t do this? Why does anybody think that? They all were thinking of no, you would never join a community of Sisters.

JE: Because in your family, you are the only one who committed their lives to the Church and became a nun or a priest isn’t that true?

STG: I am the only one, yes.

JE: Right, and so that’s why it seemed so foreign to them I suppose.

STG: See, I was the second oldest. I must say that in our little town or village or whatever you want to call it, there was only a handful that had gone (to join an Order) in the past, and after me, there was just an occasional one.

Chapter 7 - 4:37

Joins the Order

John Erling: So then you joined the Sisters of The Sorrowful Mother?

Sister Mary Therese Gottschalk: Normally, you go through the steps and you become a candidate and then when you are there a few months you become a postulant. Then after six months you become a novice and that takes two years then before you can make a vow to become a Sister.

JE: The Sisters of the Sorrowful Mother, tell us what their mission was.

STG: In the United States their mission was mainly healthcare. Healthcare was a very strong mission here. Over in Germany it was mostly retirement centers and kindergartens and schools. They operated or managed a few hospitals, but didn’t own any hospitals at the time. So after I was there a few months, they asked me, besides being religious you know, we can’t pray all the time, we all have to do our work. So they asked me what type of work I wanted to do and I told them at the time I wanted to be a nurse. That was okay—we needed nurses.

JE: Their first community was Saint Francis Hospital in Wichita, Kansas in 1889?

STG: Yes, that was the first community here in the United States. I became a novice and then

I could not go immediately with a group of Sisters that left for the United States. I had to at least stay a year as a novice before they would allow me to come to the United States. So I stayed that one year and then I was still interested in coming to the United States, but actually I told them I would go wherever they needed me, and that's where they sent me.

JE: Then you came to the U.S. in 1953?

STG: Right.

JE: And you were 22?

STG: I was 22 by then because that was in September and I had turned 22 in June.

JE: Where did you enter the U.S.?

STG: I came into New York. I believe we landed at Kennedy Airport and then from there we flew directly to Milwaukee, Wisconsin where I stayed for the first three years. I was learning English but at the same time I was going through what the Sisters operated themselves, which was like a high school in Milwaukee. So I joined a group that was going through high school.

JE: And ultimately, the Order was in Wisconsin and Minnesota and New Mexico and had schools in Kansas, a health resort in Danville, New Jersey. That's quite an Order.

STG: It still is. The founder came over to the U.S. in the late 1800s. It always kind of fascinates me when I read our history. In the first 11 years, she started 10 hospitals with nothing, absolutely nothing. No building, no faculty hall or whatever. But every year she would start one. She started the one in Wichita, Kansas. It was a hospital before, because it was a doctor that owned the building and had donated it to this hospital. (Inaudible) So that's when he asked the Sisters if they would run this hospital, but there wasn't anything there. They still had to start with practically nothing. It was located in the Midwest, because there were at the time plenty of religious Orders in the East and in the West Coasts. But this was the Midwest and it was not really that densely populated. So that's where we started every one of our hospitals from here (Wichita) up to northern Wisconsin and Minnesota even. They all had farms along with it, because that's the only way they could get the food they needed for themselves and for the patients they treated. So they operated farms and I remember when I went to the first hospital in New Mexico after I got all of my education, we still had a farm there. The Sisters didn't have to farm it. They had lay people farming it, but it was really important that we had a farm so we had some food.

JE: All along the way here when you saw these Sisters who started something from nothing, they were great role models for you weren't they?

STG: Yes, we did with nothing and then what a contrast you know?

Chapter 8 - 4:00**English**

John Erling: Were you homesick when you came here?

Sister Therese Gottschalk: The first year I was really homesick and I thought to myself maybe if I hadn't done it yet (joined) maybe I wouldn't have been so quick to say yes to come to the United States. However, at the same time, I have always said I would do whatever they asked me to do, because that's when I would know what I was to do. If I did what I wanted to do, I felt it was my will doing it. That's the thing with the religion when you vow obedience you are supposed to do the will of God and not your own will, so that was an important thing. To this day, I can say well I always went wherever they sent me and I was always happy. I was never really disappointed.

JE: You became a naturalized citizen then in 1958?

STG: Yes.

JE: How was that for you? I mean, you still had feelings for your home country of Germany and you had dual citizenship then didn't you?

STG: It's like this, it's another thing that you have to do in the process. When you are young you make decisions without thinking a whole lot, do you know what I mean? To come to the U.S. was easy, that was a decision that was not hard to make. But, afterward after you get older, maybe you would not try this fast to make a decision without thinking a whole lot about it. I had not talked to my parents. I had not talked to my family. I had already committed myself to come to the United States. It was okay. It was only after that I was here that it was somewhat difficult. When you were learning a language and I couldn't converse in German anymore and you have to converse just in English and you were still learning, it takes some time you know. You can read it, because when you read it you have the words there, but when you listen and you hear somebody talk...and when you talk yourself you have to know the words and you can only say what you know. And many times, there were times when you wanted to really express your feelings, the way you really feel, and you don't always know the words for how to express it, so you could never really say how you really felt. That took a few years 'til I had that.

JE: So from the first time you came to Wisconsin you were immersed in English and you couldn't speak German?

STG: No.

JE: You had to start speaking English?

STG: There were German sisters there but not among the younger group. I was with a younger

group and they were English-speaking (American) and besides they wanted me to learn English, so they didn't really want me to speak German.

JE: Boy that had to be frustrating.

STG: You just had to be quiet. You can't say as much.

JE: Did you ever talk to God and say God why did you make me do this?

STG: Yes, the first few years until I really could master the language. Then I was asked to go to college at Creighton University. Even there, the first year, it wasn't quite easy. But all of a sudden it was just there. For instance, when I went to college and it was the same in high school, I could pass every true and false test and every multiple choice test because the words were already there. But when I had to write the answers myself you know, come up with the answers myself.

JE: Yes.

STG: That's when I had to know what I am saying and I could do it if I could take it home and do it as a homework assignment because then I could take my time. But when you have to take a written test or give an answer, you have to know it immediately and then you have to search for your words first.

JE: Yes.

Chapter 9 - 5:11

Education / Work

John Erling: You had done your high school work in Germany?

Sister Therese Gottschalk: I did. Well, Germany had a different system. We had seven years of school and then we had three years of vocational school. It was not really so much the equivalent of high school, because in vocational school you work four days and then go to school one day. And you did the work that you wanted to do. Whether it was a nurse, or a plumber or an electrician, so it is different than here. If they wanted me to go to college after that I had to go to high school here.

JE: Okay, so you did your high school work here, then you did your college work?

STG: Yes.

JE: And where was that?

STG: The high school work I had at our headquarters in our Mother House in Milwaukee—it was ours and so our Sisters operated the high school there. And then once that was completed, I went to Creighton University to get my college degree in pharmacy.

JE: So you received a Bachelor of Science degree in Pharmacy from Creighton University in Omaha in 1960?

STG: Right.

JE: That was kind of difficult in a way because as you've already said, answering the writing questions on a test and all.

STG: Yes, the first year. But I got to (the point) where I actually by the last few years in college, I did better with writing my answers, because I always knew the answers. It was a little more difficult with multiple choice tests because I got to the point where, with true and false tests—it's true here, in this instance, but it's not quite true here, so I began to debate it. Was it true or was it false?

JE: I was going to say, you knew too much. (Laughter)

STG: That's true.

JE: So you graduated from Creighton and then you went to Roswell, New Mexico?

STG: Right.

JE: And what did you do there?

STG: I operated a pharmacy. I did the purchasing for a hospital. It was about a 150-bed hospital at that time. I did a little bit of everything, but mostly I set up the pharmacy.

JE: You set it up from scratch. You started it from the very beginning?

STG: Yes. It was a new hospital that they had just built. It was a year old—they had a beautiful pharmacy, but they had never indexed their inventory. So every floor or every nursing station just had a few bottles of medicine. Then when I came they wanted to set up the pharmacy, we had to bring all of the medicine back from all of these nursing stations and index it and set it up.

JE: Working on that for eight years, this really became yours didn't it?

STG: It was definitely mine. I had it set up so well. I always did the purchasing, so at that time I had to deal with all of the pharmaceutical representatives. I always ordered and bought all the medical supplies, I bought all of those. So I liked it quite well. I could have stayed there all right. It was kind of just the way I had wanted it. But I was smart enough to know, well you know that I could stay there all of this time and things would not change at all and I would be doing the same thing and I would be happy doing that, but things don't stay the same you know.

JE: How did it come about that you moved on and you went to St. Louis?

STG: Well, our Superior that we had who was the leader of all of the Sisters in the U.S., she came down one time and she told me that she would like me to get a hospital administration degree. I thought about it. She gave me a little time to think about it for the night and then I told her I didn't know much about that either. The sisters that were in hospital administration at the time were all nurses. Some of them could be pharmacists but then they went right into being a nurse and then the next day you would be an administrator. They had no formal education as an administrator. So at least I could

go to school and get my education in hospital administration and that I received at Saint Louis University.

JE: Well, you had impressed them by being an administrator over that pharmacy, so they thought, well, we can take that talent and expand on it. You were in Saint Louis for two years and then you came here to Tulsa in 1970?

STG: Yes, right. I became an assistant hospital administrator. There were actually two other assistant administrators here, so there were three of us.

JE: So that was a good assignment, was that one that you say, yes, I want this—this is good for me...I want to go there?

STG: I liked it here. In New Mexico, if I missed anything...in New Mexico it was so dry and hot in the summer and in Tulsa at least there was a winter and a spring, it wasn't always summer all of the time. It was a little bit nicer up here in Tulsa, it reminded me a little bit more of Germany.

Chapter 10 - 6:00

St. John - '70s

John Erling: A little bit about St. John then, what were the facilities like in 1970 and 1972 when you came here as an assistant?

Sister Mary Therese Gottschalk: When I came here they were discussing putting the taxes and financing in place to build a new hospital.

JE: In 1972, when you were an assistant?

STG: Yes, we had a 600-bed hospital and it was always full. However, many of the facilities were 50 years old at that that time. Exactly 50 years old, we dedicated the first hospital in 1926.

JE: Maybe at this point we could say that this corner where we are right now at 21st and Utica here in Tulsa was purchased August 29th of 1916 for \$16,000. This was actually a truck farm where we are now?

STG: It was a strawberry patch. We have pictures of people picking strawberries. There was actually farmland here and the city had not grown to here yet.

JE: And had been purchased then by the Sisters of the Sorrowful Mother in 1916?

STG: Yes.

JE: Moving ourselves ahead then...

STG: So 45 years later then, they decided that we really needed a new hospital or to rebuild the one we had, because when the original hospital was built it had just small rooms. The rooms each had a sink and running water, but they had no other facilities, no bathrooms,

no showers, those were all common (shared). The patients at that time had to go out in the hall for everything except maybe to wash their face or wash their hands.

JE: Did the rooms have air conditioning?

STG: No, absolutely there was no air conditioning. During this 45-year period they added one little wing and it was almost (shaped) like a cross or like an X. So they added one wing and then from then on they kept adding on every five to 10 years another building here or there. The last building that was built in 1956 is the only wing over here (motioning)- that big building that still stands. Everything else was part of the old hospital or what we call the old hospital. Some of the buildings were built in 1938. But the intent was to demolish all of that and just build new. Rather than that, we have added on and added on, it wasn't efficient anymore and so the decision was to build new buildings. Then we hired an architect and we began to have meetings to talk about building a new hospital. The two years I was here, that was more or less our job, along with operating the old hospital, was to design the new hospital and get the taxes and financing in place. We had to have the money to build the new hospital because there wasn't any cash so to speak. We just kind of operated day-to-day the money came in, the money went out. There wasn't a lot of savings or anything. We had to borrow every penny that we needed. So the \$40 million was for the main hospital, which now if you look there, it's the main patient tower. We moved all the patients over to the new hospital and then we started demolishing what was left with the exception of this one wing that was built in 1956 which was not connected anymore. So, that's when we had to build another building that connected what was left of the old buildings with the new hospital and we had the cross at the entrance.

JE: All of that happened in 1974 when you came back as a CEO?

STG: When I came back as the CEO we had the sign at the new hospital. But took the architects two years practically to do the detail work so it could be given to a construction company. Because they can't build it unless all of the details have been decided. So actually, I left and that was when the work was done so I came back two years later in 1974 and at that time they were just breaking the ground for the tower.

JE: Okay, so you are in on the beginnings of that. Then you went to Roswell, New Mexico for two years of grooming to be a CEO. And in 1974, I suppose you were real comfortable and you thought you could stay there too for a while, right?

STG: Right, I would have stayed there right.

JE: But no, that was not happen. So then they brought you back, and that must've been a good thing for you to think, well, I get to go back to Tulsa and I know that area.

STG: First, when I was here in Tulsa, it was very hard for me to go back to New Mexico. But then, once I was there a few years, thinking after the fact now, that was the best thing

that could have happened to me because I was it. I was the administrator and I had to make the decision, there was nobody to ask and nobody around to ask. It's quite different if you're an assistant and there's an administrator, you're not responsible ultimately you know. So it was quite different. It was good because it did me a lot of good to have to do that. So when I was asked to come back two years later, I kind of liked it then in New Mexico, I started many things. We were growing and we were developing things. I had a lot of ideas and things I wanted to do and then had to come back here. That was hard too because I didn't want to leave there, but I was grateful afterward that I was taken back to Tulsa because I've learned a lot.

JE: The thought God's ways are not man's ways comes into play here doesn't it? We don't always know do we?

STG: I always say, even though I didn't like it at first, afterwards I always thought it was for the best.

Chapter 11 - 7:50

Building Program

John Erling: Why don't we continue on and talk about the building here, because as you came back, the hospital was in the midst of a \$44 million construction project with building the north tower. I am told that it was built without any interference or inconvenience to the function of the hospital. The building went on and patient care continued on, so good planning had gone into all that.

Sister Mary Therese Gottschalk: We started from scratch. The campus was very tight where the hospital was, so we had to build the new hospital by itself. It was close to it, but away from the present one, it was not connected at first. We connected it then when it was functioning as the new hospital.

JE: The north tower was dedicated February 22, 1976 and it had a 603-bed capacity. You probably thought then, well, we are done building. We don't need to do any more building.

STG: Well, we knew that we had to connect this wing. The remaining building was this one with the five floors and 125 beds. We had to build a connecting wing, to connect what was left (of the old hospital) with the new hospital. But we had no money left for that because we used everything up for the new tower, so that's when we had to do a fundraiser. We raised about \$8 million. By the time it was finished, two years later we had continued with our fundraisers and it was about a \$12 million project.

JE: By that time funding was easier and you had established a reputation in the hospital.

Some names here, Ray Siegfried was very involved with raising some money, millions of dollars, is that true?

STG: Well, actually, he did that already when the Sisters built the first hospital.

JE: But then there were other people, I suppose that goes back to then W.K. Warren Senior?

STG: Yes, he gave a lot of money to this one building here. (Motioning)

JE: This is the brick one you are pointing to?

STG: Yes.

JE: And W.G. Skelly?

STG: Yes. They did that in 1956 when we kept adding on one wing after the other.

JE: Why don't we continue on talking about building here. This would be a good point to do that. And Richard if you would join us here and let's pick up talking about what happened after the \$44 million north tower was built with 603 beds. Then what were the other buildings? Let's talk it out.

STG: To be absolutely accurate, it wasn't \$44 million so much. I think ultimately we had only \$40 million and maybe \$4 million was for the financing and the costs of it all.

JE: I see. Then what was the next big building program?

STG: The very first one after that was we had to start building physicians buildings. At that time, the hospital didn't have a physicians building. There was a physicians building on the corner of Utica and 18th Street. The doctors built that building at the same time the hospital was built. Actually, the doctors owned most of that building the hospital did not own it. But the physicians wanted to get out of that building by that time, so the hospital acquired that building. That was the first office building purchased by the hospital. Then, next to it, what we now call the Kaiser Building has about 50 offices in it. That was the first one that we really built was the Kaiser building. Both of these buildings were connected to the hospital with overhead bridges. Then, it is almost like every five years there comes another building project. So then somebody talked some people into building a health club. So that's where we built our Siegfried Health Club.

Richard Boone: That's inside the Mary Chapman Health Plaza, which is its own building connected to the Kaiser Building.

STG: The property that we owned was from Utica to Wheeling and from 21st Street to 19th Street. This was the St. John's plot. Most everything outside of that we didn't really own. We had to acquire one house after another, or one building after another. All of those located along 19th Street all became part of the hospital and then we started on Wheeling. We actually enlarged our campus across 19th Street and also across Wheeling Street, but the property had to be purchased each time. The most important problem was that we didn't really have much parking. And so every time we built a building, we also had to build a big parking garage along with it. Because all of a sudden, we needed

parking for patients and also for the people that came to visit their them. We also had doctors and they had their office staff that needed parking. So for every doctor we had, we had to have parking for the doctor—and also for all of the doctor’s staff and for their patients. You couldn’t just build a doctors building without building the parking for it and getting the approval to do it. So every one of our buildings has a parking garage attached to it. The Health Plaza started out as a little health club and then we really needed some meeting rooms. We had nothing like that to speak of, and we had lots of meetings, etc., so we added that. Before we were finished, what started out as a 5-story building—we kept adding more floors to it and it became a five-story building instead of a two-story building. (Laughter) Every building we built was always full with a year. We were always talking about we need this and we need that, so it continued. It was not that many years before 19th Street was completely filled up with buildings, so we had to go down to Wheeling. That’s when they got the Bernsen Building in the Bernsen parking garage, which practically took all of Wheeling. It was pretty big. This was actually a building twice as large as some of the others. But we wanted to build one building and have enough property there for the next building. Before we finished the building, well, we already needed more. It’s very interesting the way things change. Back then, the doctors wanted to be closer to the hospital. If you look at what we’re doing now, nowadays the physicians are moving out. There were a number of physician groups that were intended to move into our last physicians building. By the time we finished it, they decided they were not moving there any more and they wanted to go out South or out East.

JE: The specialty hospital is what you’re talking about today?

STG: Yes.

JE: Right.

STG: Health care keeps changing and it forces us to change along with it. It’s almost like, well, if you want to stay in it, you have to change along with it and whatever the trend is at the time.

JE: Yes.

Chapter 12 – 5:50

More Building

John Erling: So about the building then, between the two of you does that bring us to where we are today?

Richard Boone: Not quite.

JE: Okay, what else?

RB: We have the first building that was the doctors building at 19th and Utica, now called the Holliman building. The Kravis Building was called the physicians building and it's now the Kaiser Building. Then we have the Mary Chapman Health Plaza next to it. I might add that each one of these buildings was going to be Sister's last building to take care of our needs. (Laughter) But then all of a sudden that building would fill up and another building would be needed. Then came the Bernsen Building on Wheeling in the large parkade connected to it. Then we were out of space, both parking and medical space in the hospital, which led to a campus expansion probably in 1989 or 1990.

Sister Mary Therese Gottschalk: It was the last expansion and it took us 10 years. That was our last one and it went all the way down to 21st Street. We moved it from 19th Street all the way to 21st Street. We had this property and it was always intended to be part of an expansion.

RB: It's a very interesting project to build a hospital expansion down Utica Avenue, right next to the street. And then on the east side building a large parking garage connected to it. And then farther down, build another doctors tower called the Williams Medical Plaza. This was all built without interrupting a lot of traffic. That was our expansion that started about 10 years ago, back in the early 1990s.

STG: We just finished it not long ago.

RB: Yes.

STG: We needed parking. We couldn't really build a building here without having some parking somewhere. And so, it was my idea that we would connect it on the west side to the hospital. Then the parking garage would also be connected to this new building. And then on the east side where we put the physicians buildings on the corner of Wheeling and 21st Street, the parking garage would also connect to that building. We made a multistory garage so that we have seven floors of parking that connect to both buildings. If you drive up there (into the parkade) you can enter the hospital on most floors and you can also enter the physicians building on most floors. At first, some people didn't like it. It was a little bit confusing for people to get up there. But I haven't heard many complaints anymore in the last year or two.

RB: John, the whole campus is interconnected by either air-bridge or tunnel. If you had the energy, you could start over at the Williams Building and walk your way to the corner of 21st and Utica, up to 19th Street, and then back over to the health plaza, indoors either by air-bridge or tunnel. It's a very sophisticated connection of all of the properties here.

JE: Here we are sitting and talking about this in 2010. Are there plans or could you expand anymore or is this it with what you have here now?

STG: This class project that we did on 21st Street, we really did that for one purpose, not from more patients or more beds. The most important thing was that we needed to change our semi-private rooms to private rooms. In the meantime, we bought this building that is across Utica.

RB: The Robert Davis Tower, the bank tower.

STG: Because what happened in the hospital, it's not only patient rooms that began to acquire, as medical technology developed, all the sophisticated technology necessary and they all need big space in which to operate. So all of our clinical services are growing because of technology—not because of patients, it was the technology that made it grow. So in order to have room for all the equipment, all we could do is move all of the administrative services out of that building. So, we have no administration left practically over in the tower, except nursing and some of the clinical services and whatever administration they need. I don't know what we would have done if we wouldn't have been able to acquire this building here, where we are right now. For a long time we called this building Utica Tower and now we call it Davis Tower, because as you may remember the Utica Building and the Utica Bank went into receivership. Mr. Davis who owned the F&M Bank acquired the Utica Bank accounts. The government handled it quietly but it did not want the building because their headquarters was out on Harvard somewhere. So Mr. Davis asked us, he asked me one time, "Do you need a building?" I said, "I surely do for the right price." We had talked about it because the building was for sale and it had changed ownership—it was last owned by somebody out in Denver. So we said let's just wait and in another few years...rather than the \$14 million that they wanted then, we acquired it for \$8 million.

JE: Really?

RB: This is the former Utica National Bank Tower.

STG: This office where I am sitting was the former bank president's office and all of the furniture was his too. (Laughter)

RB: Sister showed her negotiating skills on the purchase of the tower.

JE: You were a negotiator on the price.

STG: Yeah, right, so we have a tertiary hospital here.

Chapter 13 - 4:45

Feeder Hospitals

Sister Mary Therese Gottschalk: You know the city of Tulsa keeps growing out south over these last 50 years. And now it's going east, it's growing in all directions. It's also growing

north. All of a sudden, we became an inner-city hospital and the patients are all moving out to the outlying areas. So then we decided that we had to have some f as soon as it was built we would acquire. Sapulpa Hospital was the first one. It was owned by a group of physicians and Dr. Bartlett called one time and said, "We would like to have St. John's operate our hospital."

Richard Boone: That was Bartlett Memorial Hospital in Sapulpa.

STG: And he (Dr. Bartlett) was really getting old. There were five brothers and they had all passed away and he was the last one left. He died within two years after we finally took it over. So we took that over and then we went over and took over the Jane Phillips Hospital in Bartlesville. Smaller hospitals were the trend—we needed them and they needed us. Jane Phillips is a not-for-profit hospital. We put some money in—I would say about \$30 or \$35 million.

RB: Sponsorship mainly.

John Erling: In Bartlesville?

STG: Yes. In other words, in the not-for-profit system, you can't say ownership so much as sponsorship. Because we sponsor the hospital and we are stewards of the hospital, but the assets are not at our disposal to just sell it and take the money you know. Everything always has to stay within the corporation. It has to be brought back into the corporation. We have Bartlett hospital and now we have Jane Phillips Hospital. Then, there was a group of private investors who decided they were going to build the hospital in Owasso. Then they came to us and asked if we would manage it. They asked if we were to build the building, would you manage it. We said yes. If anyone built a hospital in Owasso we would manage it because this is our referral source. We can't let somebody else have this hospital out here. We felt that the south (Tulsa) was growing and we were locked out of the south. To this day, there are so many hospitals out south now with Saint Francis and all of these other for-profit hospitals. We cannot depend on patients coming to us from South Tulsa or farther out there. So we needed to find a way to capture the north and the east and so we said yes we would and we agreed to sponsor it. Before it was all finished, we decided that as soon as it was built we would acquire it. It was a for-profit hospital. It was built as a for-profit hospital under a Corporation. We had a lot of input into it. And then, after we occupied it, we took out our taxes and financing and acquired the hospital in Owasso. It had barely been finished. It was just opened one year when we started in Broken Arrow. See, Broken Arrow was another one that as long as there was no hospital was in Broken Arrow, all of the Tulsa hospitals got a number of referrals. Wherever the patients wanted to go, they came. But once you built a new hospital in Broken Arrow, then you pretty much lock out a lot of the other hospitals. And so we thought, well, we always intended to grow east, so we can't really allow everybody else

have Broken Arrow because we do depend on Broken Arrow as a feeder. It was in our goals that we would acquire the west, the north and the east and stay out of the south because we were locked out of the south. We cannot move south. Thank God because the city is growing east now.

RB: John, each of the four communities had expressed a very strong interest in an affiliation with St. John. I'm talking about Sapulpa, Bartlesville...in Owasso-we had been talking to city manager Rodney Ray for 20 years about having a St. John presence in Owasso, so that was part of our motivation up there. Then the same thing has happened in Broken Arrow. The city fathers asked us to come in there five or six years ago and we will open a brand new hospital there in September 2010.

STG: There is actually a private for-profit group that is building the hospital. It is our intent, probably shortly after the first of the year (Jan. 1, 2011) that we begin to do another (deal) to get the taxes and financing funds where we can acquire the Broken Arrow Hospital. But that is the last. (Laughter)

JE: Did we hear her say the last?

RB: That's her final building, right.

Chapter 14 - 5:20

Specialty Hospitals

Richard Boone: Let me add John, that during all of this development, we have built our own primary care physician group called The Omni Medical Group. We have developed a presence in most of the outlying communities with clinics. We have clinics in Sand Springs, Sapulpa, Broken Arrow, 81st and Memorial- we have a large property there with a lab and x-ray and an Omni Medical Clinic. So we have a doctor presence in and surrounding Tulsa in all of these smaller suburban communities.

John Erling: Broken Arrow is one of the fastest-growing communities we have in Oklahoma, so it's possible there could be more building going on in Broken Arrow?

Sister Mary Therese Gottschalk: Well actually, there is Saint Francis South. It's right on the border of Broken Arrow and Tulsa and Saint Francis intended it to be their Broken Arrow hospital, but the citizens of Broken Arrow said we want our own hospital. They consider Saint Francis South a Tulsa hospital and not their own. They wanted their own hospital, it didn't matter who built it. And so this private group built it, the same group that had built the Owasso hospital and we already had a relationship with them. So it was already understood that someday we would acquire it after it is finished.

RB: The hospital is located adjacent to the Broken Arrow Expressway a little bit west of

some major development there with Bass Pro and all of that. There is some acreage on the hospital grounds where some hotels will go up and probably some retail operations. So it's going to be a large consumer property there when it's all completed.

STG: What has happened in the meantime is that, just the brick and mortar we are talking about—but in the meantime—like Richard had already alluded to the fact that we have a large primary care physician group. But now, because all of these for-profit hospitals have been built out South. The one where the City of Faith was, they took over that building, that's the surgical hospital now. First they were a specialty hospital just for spinal and orthopedic care. The government frowned on that just being a specialty hospital. So as soon as they got wind of that, they opened up their medical staff to all specialists. So now they have become a surgical hospital. A lot of our surgeons have part ownership in that hospital now. So we are losing a lot of patients from here to these hospitals in south Tulsa. In other words, I do not believe that we need more brick and mortar because many of our physicians own part of the hospitals somewhere else. What we need now is to start employing our own specialists. We had the primary care doctors covered, but we didn't have neurosurgeons, they left and went out there. Our neurosurgeons went out and joined the surgical hospital located out at 81st and Lewis. One group after the other is leaving and they are using these other hospitals. So, every time another group leaves, which is just happening right as we are talking, there is an oncology group that is groundbreaking for their own hospital. So we think, what can we do to help oncology? We need oncology here. And so the next group will be orthopedic. The general surgeons are still with us. But it was the intent of our orthopedic group that they would invest in our Broken Arrow hospital, but the government had just passed a regulation, or law, or whatever it is in March 2010 that prohibits that. So we are dealing with that right now, because of course the orthopedic group is very disappointed. We checked it out with a number of different firms, and legal counsel and attorney groups and we analyzed the law and we had to say no, it's just prohibited. No matter how you do it, you just can't do it right now. We have to work really hard and come up with some other ideas to keep them satisfied so that they don't leave us too, because they have a big presence here. We have about 24 orthopedic surgeons in that one group. We depend on them in other words. There's never a day when we can just do something and sit back and just enjoy it. Because there is so much going on around you, and with competition, you always have to be on your toes to see who was going to try to take something away from you next.

Chapter 15 - 3:26**Cash Goes Fast**

John Erling: Can you put a number on the building here at 21st and Utica because in 1916 they bought the land for \$16,000, so today, what do we have here in terms of dollars invested in this corner?

Sister Mary Therese Gottschalk: When you just talk about all of this and you look at all of our assets, I would say with all of the assets that we own it's probably over \$1 billion.

JE: We said billion didn't we?

STG: Billion, yes.

JE: You probably will not accept a lot of accolades, but all this happened while you were CEO here and you gave a real steady hand to this facility.

STG: I had learned in my earliest few years when I had to go back to Roswell, New Mexico... when you needed to do things there was no money. I came here and there was no money. You start borrowing. You have an older hospital that had to be replaced but there was no cash to replace it. You had to just borrow the money. We got the hospital, but then we always, at the same time, had to pay back the big loan that we had. So, while we were building a new building every 5 to 10 years, we also had financing to deal with every 5 to 10 years, or sometimes refinancing. We were very conservative because I have always had this as my goal...the only way I can have peace and can operate this place...I have to have at least enough money in the bank so I don't have to worry about where the next paycheck comes from for these employees we all of a sudden had. It's over 7,000 employees now. It takes a lot of money to pay 7,000 employees every two weeks. But when, for instance, I was in Roswell, we waited for a check every Friday. And if it was late, you were sitting on pins and needles wondering where we were going to get the money. And so, by the time I left Roswell, we had extra money. So that's always my first goal. We've got to have enough money so we don't spend all of our energy on worrying. Part of it now is that we have all of these buildings and we have a lot of debt too that we have to pay back. But at the same time, we have to watch very carefully that we don't use up all of our cash. We have a certain amount of cash, because it takes a lot. So how are we going to do it in the future? We've done it this far. And now, when I turn it over on January 1, 2011 to somebody else, I can only say that I leave it and turn it over in much better condition than it was when I had to take it over. Cash goes fast as you know. It goes even faster nowadays when you have to acquire physician practices. We have about 250 employed physicians now. Their compensation is a lot higher than the rest of the hospital's compensation is, and all of

their employees along with it. With every physician, you have to count the fact that they have three or four employees. So we have 250 physicians, so we have at least 1,000 other employees.

Chapter 16 - 4:50

Leadership

John Erling: I wanted to address just briefly—we've talked about how all this is happened under your leadership, but when you first came here there was a point I think had to establish yourself as the person in charge. Because, at least back then, it was a man's world and CEOs were mostly men I believe. You came in with an administration degree and the person who you succeeded did not have that training.

Sister Mary Therese Gottschalk: As I have said earlier, all of the administrators we called them or the CEOs of all our hospitals (meaning hospitals run by the Sisters of the Sorrowful Mother) would probably have been nurses. Because when I went to get my degree in pharmacy, there had been only four pharmacists in previous years that had a degree. All of the Sisters had nursing degrees and then gradually they learned something else along with it. But not all nurses are administrators. So the Sister that was here—she was an excellent nurse. They had a nursing school where she came from, but it wasn't the same as being a hospital administrator. So as the hospital became more complex and grew, she depended totally on lay people to help her. So when I came in, the physicians—and probably the rest of the hospital—they were dependent on our assistant lay person administrators. Comparing us with Hillcrest because it was the hospital closest to us and they only had lay administration. An interesting thing was that I had two associate administrators when I was here as an assistant administrator. The two associate administrators are supposed to be a step higher than an assistant administrator because they had been here a little longer, two years ahead of me. We had them so that when the physicians needed something they would just go to the associate administrators. They (the doctors) didn't really look at the Sister as being the business administrator. So then when I came, I replaced Sister Edith, so all of a sudden they started comparing not me, but they started comparing Mr. Harvey with Mr. Blanchet and Mr. Rodgers, these were the so-called associate administrators. And they somehow didn't meet their expectations. So, that's when I said to our Chief of Staff because he came to see me one time and told me that's the way to look at it, and I said, "Well, you can tell them that if they want to compare anybody here to Mr. Jim Harvey, they have to compare me with them and not Mr. Rodgers and Mr. Blanchet."

He said. "Yes, but they consider you to be just a figurehead." He meant they viewed me as a spiritual leader or something.

JE: Yes.

STG: And I said, "No, I will either be the administrator or I won't be here. You have to decide one or the other, but I am not here as a figurehead. You can tell them that they have their choice. If they want somebody like Mr. Blanchet here than I will just find something else to do." And so that's when they decided that if this is the way it is, then they would rather keep me.

JE: So how long of a period of time do you think it took you to really establish yourself as the CEO of this hospital?

STG: I always felt when I came here that I could have stayed in Roswell, which had a smaller hospital with about 150 beds. In two years I felt very comfortable there and I was moving the hospital forward. Moving in a direction where I could see that I had an influence on the way it was operating, but it was smaller. It was always my feeling that when you come to a place like St. John's, big like it is, I felt that when I was here five years I could move this place. Before that, we did many things. We finished this hospital, I straightened out things that needed to be changed, things that everybody was upset about. It was more like putting out fires so to speak. But then, as long as you are just putting out fires you never move the hospital. But after five years, I felt I could move the people that were following me, that I could really be a leader and not just be here putting out fires and getting things straightened out.

JE: Well you did an outstanding job of leading because look where we are today in the building that we've just talked about.

Chapter 17 - 3:50

Stepping Back

John Erling: Why did they change the name from St. John's to St. John?

Sister Mary Therese Gottschalk: This was really our Sisters, our leadership in our community who asked why are we calling it St. John's? It seems like it belongs to St. John the Apostle. It doesn't really belong to him. It has the name St. John. But when you say "St. John's" it means that it belongs to him and it doesn't and so we call it St. John.

JE: So, you plan to step aside as of January 1, 2011, is it going to be difficult for you to do that?

STG: No.

JE: Then what will you be doing? You will remain president of the Marian Health System?

STG: I will remain as president of the Marian Health System. I devote some time to that now. Maybe I will have a little more time to devote to that because I don't just work 8 hours a day for 40 hours a week. I work many, many jobs. I just needed to give up some of the work so that I have a little bit more time for my spiritual life. I have always felt and still feel strongly that my prayer life and spiritual life always have to come first and everything else has to come second. After all, that was the main thing. I wanted to be religious first and then I got all of these other jobs. (Laughter) So I always have to keep in mind that no matter how busy you are and how much pressure there is to get everything done, that you spend the first so many hours of the day with God, that gives you the strength to go the rest of the day. So, hopefully I will have more time to do that.

JE: You are going to perhaps visit more with staff and patients and that type of thing?

STG: We have established a pastoral care department, which none of the hospitals had when I first came here. Because the Sisters were administrators of their floors, so while the Sister was doing the work of administering the nursing portion or at least supervising it, she also did the spiritual care work. But we separated that out because we did not have enough Sisters anymore. We took them out and made them only in the pastoral ministry and allowed them to spend their time with the patients and have others do the administrative portion. So, I want to spend time with the employees and the staff because all of a sudden we have 7,000 employees. They come and go, the turnover is tremendous. You have to do an awful lot of imparting values of our mission. We call it mission integration. To work with the employees and let them know that they don't just need to do their work but that we expect more from them. We always say we want every employee to be the best professional, but also always provide compassionate care, care that is most compassionate besides doing an excellent job.

Chapter 18 - 3:45

Volunteers

John Erling: Maybe a word here about the volunteers because I have always been impressed with the great volunteer program that you have here at St. John. Maybe you can share a comment on that and how important this has been to the facility.

Sister Mary Therese Gottschalk: Today happens to be a day that I spent at least two hours on that. They had a volunteer meeting upstairs. They have a monthly board meeting that I attend and then we have a luncheon afterward. So I joined them for lunch, then they have their planning committee meeting for the new fiscal year. It's very important that I attend these meetings. If I am not there I feel like it's not the same. I want to make sure

that I understand and know how hard they work and how dedicated they are. Everybody needs to be not just wanted, but also appreciated. I let them know that I realize how much they do for us. They actually had to get the commitment from them today because we are working on a da Vinci robot, which costs about \$2 million and they will fund it, so this will be their project.

JE: Tell us about the da Vinci robot, what will it perform?

STG: Well, you know what a robot is...

JE: Yes.

STG: It is a surgical robot that the Army developed when they had Operation Desert Storm when soldiers got wounded and needed medical care or surgery. They can actually perform the surgery right there, but have the experts that are guiding the movements of the robot be in Germany or wherever they are at the time or even in the United States. We have surgery nowadays where the doctors don't have to cut so much, they call it laparoscopic surgery. But the da Vinci robot surgery is still different because the physician doesn't have to be in the same room. He can be in a different building or for that matter a different country and oversee the procedure. I don't even know—it's kind of a mystery how that works because the surgeon's hands are in there (motioning) but the patient isn't really there. It is more precise and less invasive than traditional surgery.

JE: So the volunteers, that's a project for them?

They will be raising money for that?

STG: Yes.

JE: Two million dollars?

STG: Yes. They just finished a \$2 million pledge that was for mammography equipment.

Richard Boone: There's a very, very successful gift shop in the hospital. They pledged \$2 million dollars for different projects and most recently paid off \$2 million for digital mammography. And then here they are renewing their pledge toward a new da Vinci robot.

STG: And they are very proud of that.

RB: They sure are.

STG: So they have been after me for the last six months saying they need a project. I would tell them that we are doing the budgeting right now, just give me a little time to see what we need most. But it has to be something that they can identify with.

JE: Yes. Down through the years there have been many hundreds or thousands I suppose of volunteers.

STG: Oh yes.

JE: Their fundraising projects are mostly the gift shop or sometimes they have Christmas gifts of books or jewelry or some clothing, but most of their contribution is work. They

work all throughout the hospital. They just basically work two or three half-days a week or three or four half-days a week, sometimes just one half-day a week. But they do a lot of jobs that we don't have to hire employees to do, so every one of our departments always wants an auxiliary.

Chapter 19 - 5:55**Advice / Reputation**

John Erling: Well, as you look back over your life and you think about how you struggled with the call as a 20 or 21-year-old and here today you are 79 years old, there was a master plan for you that really worked out. So maybe, based on that theme there's a little message or advice to students who will listen to this interview. What would you like to say to them?

Sister Mary Therese Gottschalk: When I grew up, I would never have visualized that it was possible that I would get to this. When I go home (Bavaria) and I see my brothers and sisters now, and my classmates and people that I knew, I think to myself, wow. Just think if I did not do what I did, I would just be doing what they are doing at home. I would not have had the opportunity. I only can say that every one of my sisters at home could have done the same thing had they had the opportunity. I wasn't any smarter than they were. (Laughter) It's just that I was given the opportunity. My biggest joy, it's the not the buildings and all, it's the people I work with and the employees and the volunteers, even the physicians—the influence you have on other people. I like to be with people and I enjoy being with people. If I regret anything at all these last few years, it's that I have been too busy and I just haven't had time for the things that I really enjoy doing. But maybe after January 1, 2011, I can do more of that. I am grateful for the opportunity that our community has given me. I always say that I am grateful not only for God who has given me first the opportunity, but also for my community that had at least given me the education and experience before they put me in the job. For instance, before I went into pharmacy, there was a yearlong internship I had to complete. Before I started hospital administration, before I could even graduate there was a year of training I had to go through at a hospital. My job was just being there and learning and not having any responsibility other than that.

JE: That's something to say about a person such as you, that for all of these years you've been here as a CEO, it's not easy to make all of these tough decisions, and not everybody, I suppose, was happy because that's the way life is. To come out of all of that with as much respect and love for you as there is, is to be commendable. I'm sure there

will be many words said about you between now and August, and the end of the year, but let me be the first to say that that's the way you are held in our community, is in high esteem and I congratulate you for that.

STG: I think the one reputation that I leave, is our physicians always said, "Sister is tough, she does not always give us everything we ask for, but she is fair." And I think the employees also think the same thing. You can't always say yes to things, but you have to always be able to explain. You cannot give one employee one thing and not give it to another one who works just as long and just as hard. As long as they know that you have done the best you can and that you have been fair with them, they will understand. I have never really had any problems where I upset a lot of physicians. I can't say that, nor were they ever cross with me. I have always gotten along with them, but I have always tried to be fair with them. It's the same way with the employees. As many times as I have had to say, "Well, I am sorry, I can't give you that. If I do it for you, I have to do it for everybody else. I cannot make an exception just for you." I often say I probably observe the policies here more than anybody else does, because people forget what the policies say and they think I should make an exception for what they want. When I first came here, the policies were written somewhere and I read them and I tried to make decisions according to the policies and I constantly upset people. And I would say, "This is what the policy says, I didn't do anything else." And I finally realized that I am the only one who really looks at the policies and operates according to the policies, while everybody else just likes to do what they want to do. So all of our directors and our administrators, they called a meeting each week for about two hours and said we are going to take the policies and we are going to go through them one by one until we have gone through the entire policy book. If you tell us a policy isn't working any more, or it isn't fair, or that we need to change it, we will change it as a group, but once we change it, we will all have to observe it. So we went through all of that and after that we had no more trouble. (Laughter) You can't be liked by everybody, but hopefully, at least people don't curse me." (Laughter)

JE: Well, you have given advice to youngsters who will listen to this for many, many years to come and I just thank you for donating so much of your time to this. This was very, very impressive and I thank you very much.

STG: Well it's also very nice of you to sit here and listen to all of this. (Laughter)

JE: It's terribly fascinating, believe me there is no problem on my part. Thank you Sister, it was nice of you.

STG: You're welcome.

Chapter 20 - 0:30**Conclusion**

Announcer: You have just heard Sister Therese of the St. John Health System talk about her journey. Who knew a little girl in Bavaria, Germany would one day make such an enormous healthcare impact in Tulsa, Oklahoma and beyond? Please consult our For Further Reading Section for the link to the St. John Health System website. Sister Therese's remarkable story was brought to you by our Founding Sponsors and heard on VoicesofOklahoma.com.