

# House calls to make comeback as hospital meets new challenges

DAVE WILLIAMS

AHN Staff Fort St John

House calls are making a comeback as the Fort St. John General Hospital moves away from an 'ivory tower' concept of medical care, its board chairman says.

Wayne Gretzinger said patients who do not need to be hospitalized — such as seniors — but who still require basic medical aid, could see hospital staff coming to their home.

"I don't know about doctor house call, I guess that will be their decision, but certainly more types of treatment at home that nurses can handle," Gretzinger said.

He said the hospital is planning to eliminate about 21 beds in an unused paediatric care wing and radically rearranging departments about as part of a shift away from the traditional method of health care.

"We're not cutting beds that we need. We're reducing to where we think we will be or would need," Gretzinger said.

"Then we can expand our outpatient services, our physiotherapy, counselling and on and on."

He said extensive renovations — brought on partly due to a

mechanical system that's falling apart — will enable the hospital to more effectively and cheaply meet the modern health care needs of its patients.

Gretzinger said the changes will greatly increase the efficiency and amount of out-patient services, day surgery and other short-term care activities.

"It'll mean a better change. There'll be more day-care surgery and with outpatient services, they can come and get their treatment and go home rather than be captured in a hospital setting," he said.

"It's definitely the trend of modern medicine not to keep people in a bed if they don't have to."

Gretzinger said the board's plans follow in line with a royal commission report on health that emphasized home-based care and shorter hospital stays.

"It's much more patient convenient and significantly cheaper," he said.

Gretzinger said advances in medical care have eliminated the need for the long hospital stays of the past.

He said a considerable amount of health care can be provided at

people's homes or during relatively short stay at the hospital in which the patient spends most of the recovery time at home.

Gretzinger said the hospital hasn't been renovated in 15 years and has started to experience major mechanical problems.

"We realized that a significant part of our business is outpatient services and we weren't really geared that way because the last time we did it 15 years ago, it wasn't orientated that way," he said.

"The fact is, you don't have to be lying in a hospital bed. You can be resting at home and probably recovering quicker."

Gretzinger said he's optimistic the government will come through with funding to enable the hospital to become more "efficient" despite the province's financial woes.

The cost of renovations is not presently known.

Gretzinger said the changes will not affect staffing or save money on the hospital's operating costs, but will allow it to offer expanded services.

"We're not looking for a new castle," he added.

# FSJ Hospital support staff serve strike notice

## Alaska Highway News

Strike notice has been issued by the union representing 105 support staff at the Fort St. John General Hospital.

In a news release, the Hospital Employees' Union (HEU) stated it has authorized strike notice be served and final preparations for job action be completed.

HEU secretary-business manager Carmela Allevato said hospital employers are attempting to stall job action by seeking appointment of an Industrial Relations Council negotiator effective Feb. 21.

"We consider it provocative and unacceptable," she said. "We have no confidence that they intend to bargain seriously."

A strike by HEU members would eliminate all but essential services at the Fort St. John and other provincial hospitals.

Allevato said the union will meet with the negotiator, but described as insulting the latest contract offer made by the Health Labor Relations Association (HLRA) representing hospitals.

She said the union cannot legally strike until the mediator has made a report or in 20 days, whichever comes first.

In a news release, HLRA President Gordon Austin said the strike call is unwarranted.

The HLRA has offered \$22 million to implement a pay equity scheme and a \$49 million wage hike.

"HEU has made no attempt to respond to the monetary offer we put to them and we've hit a critical stage in collective bargaining," Austin said.

Austin said the HLRA requested a mediator to keep negotiations going.

FEB 24, 1992

# MAMMOGRAPHY



Horizontal: (left to right) Lexie Gordon, Director of Information Services, Noelle Jellison, board trustee, Darlene Giesbrecht, Director of Radiology, and Dr. Michael Wright, Chief of Staff, with the new mammography unit.

## HOUSE FIRE



It will be a sad Christmas for the family living at 9203 77 Street, as the interior of the house caught fire and burned on December 21. Deputy chief Gordon Bennett said that the fire started in the basement and caused a lot of damage. No one was injured, and the cause of the blaze is still under investigation. Fire fighter Larry Ziprick said that a water pipe that melted because of the heat helped put out the fire.

# Hospital elects new board of trustees at annual general meeting

JUN 16, 1992

## ALASKA HIGHWAY NEWS

### Fort St John

After a marathon voting session, Fort St. John Hospital has elected a new board of trustees.

Most of the board members who ran were re-elected except for the addition of Sheila Garson who beat out school board chairman John Wetzel for a seat on the board.

Garson is a nurse who was on the

hospital board in Chetwynd for four years.

Re-elected were Wayne Gretzinger, Linda Gentilles to three year terms and Fred Von Ilberg and Valarie Powell to two year term.

# FSJ hospital budget avoids bed closures and layoffs

JOHN GRAY

AHN Staff

Fort St John

The Fort St. John hospital board has submitted their budget and managed to avoid the layoffs and bed closures that plague other hospitals in the province.

Fort St. John hospital received a zero per cent funding increase to it's \$10.5 million budget this year.

Since they laid off five employees last year, including several nurses and the director of human resources, they could absorb the cap in their funds, said hospital board chairman Wayne Gretzinger.

The board was able to see that they would not be getting any more money from the provincial government and they began cutting last year, he said.

"This year will be the real test to see if we can stay on budget," said Gretzinger.

Other hospitals have not been so lucky.

The Prince George hospital board announced over the weekend they will have to lay off as many as 25 employees and close 25 of their 77 acute care beds.

Fort St. John hospital will not have to close any additional beds but they will have to be very careful about their expenditures this year, said Fred Von Ilberg, head of the board's finance committee.

"Any surprises, like an increase in payments to the Unemployment Insurance or the Canada Pension Plan will sink us," he said.

Wages make-up nearly 80 per cent of the hospital's budget.

Current contract negotiations between the provincial government and the Hospital Employees Union could yield some of those unexpected expenditures, said Gretzinger.

The government has already announced it will give the employees no more than a 5.5 per cent

increase.

JUN 4, 1992

The government has promised to compensate the hospitals for that increase, but the hospital may have to make up any difference if the union manages to win a larger settlement, said Gretzinger.

However, even compensating the hospital for wage settlements may leave them short, he said.

"This year the nurses won a three per cent increase, but many of the nurses in Fort St. John have a lot of seniority so it cost us seven per cent," said Gretzinger.

The hospital will lose some income from the loss of a full time internist at the hospital. It costs thousands of dollars for the hospital to replace a doctor because they must pay relocation costs and pay them extra to come to the north, said Von Ilberg.

"In the Lower Mainland specialists are already there, but here in Fort St. John we have to wine and dine the doctors to come up here," he said.

# Hospital Board wrestles with deficit to achieve balanced budget

(From Pg. A1)

balanced budget this year," Asling said.

The hospital will not be able to draw on any surplus funds from the previous year and the income the hospital makes from its investments has dropped because of the drop in interest rates, said Fred von Ilberg.

The hospital is already required by the Ministry of Health to submit a balanced budget. They must submit their next budget by May 29.

"Even if we can't meet it every year, it is a good objective to have written down," said Wayne Gretzinger, the board's chairman.

If a hospital submits a deficit

budget it must make up the shortfall on its own, said hospital administrator Millie Asling. Despite this many provincial hospitals routinely submit budgets that exceed their funding and run up deficits in the millions of dollars

Changes to the Fort St. John General Hospital Mission statement will compel the Board of Trustees to strive to submit a balanced budget. The board also changed the description of the objectives of their health care goals to delete the word "excellence".

The changes were made last night at the Hospital Board of Trustees annual review of the hospital's mission statement. The statement is

reviewed and updated every year.

In another change to the mission statement, board trustees decided to drop the word "excellence" from the objectives of the hospital.

"Excellence was dropped in two statements to protect the hospital in the case of a lawsuit, but the changes do not signify a drop in the quality of health care at the hospital said Dr. Wright.

One passage that was changed read: "The Fort St. John General Hospital will strive to be a centre of excellence for the practice of regional diagnostic services and Outreach programs.

In the changed passage, the words "of excellence" are dropped.

"This is only a change on paper, it is not a change in health care, we will still be providing the best health care we possibly can," said Dr. Mike Wright, Hospital chief of staff.

The medical community has used superlative to describe what they do and they could never be applied all the time, said Dr. Write.

"We are human beings and we are limited by our abilities and by the resources we have at hand. All we can do is try to do the best we can," said Dr. Wright.

The board made the changes because of the ambiguity of the word "excellence" said Gretzinger.

# Hospital plans renovations

**JOHN GRAY**

AHN Staff

Fort St. John

Fort St. John General Hospital has begun the first step of a massive renovation plan.

The hospital board has retained an architectural firm specialising in health care facilities to draw up a "master plan" that will redesign the hospital to better suit the health needs of the community.

A consultant from Lambur, Scott, and Morris will be meeting with hospital staff, management as well as community groups to determine what direction the hospital should be taking and how renovations to the hospital can facilitate that new direction.

Also included in his report are cost estimations of the plan. It is too early to speculate on how much the renovations will run but they are expected to be well in the millions said hospital administrator Millie Asling.

The report will cost \$85,000 and is being jointly funded by the Ministry of Health and the Regional Board of Health. The report is expected to be submitted to the Hospital sometime at the end of November.

"Once the report is done, then we go hat in hand to the government and try to get the funding to make those renovations," said Wayne Gretzinger, hospital board chairman.

The last hospital renovations took place more than 15 years ago and many of the building's mechanical systems such as the boiler and pipes needs to be upgraded or replaced, he said.

The master plan hopes to integrate those upgrades with renovations that will make the hospital better able to cope with the changes in health care.

"There is a strong trend toward more community care, and more out-patient care and those are two areas that this hospital just doesn't have adequate space for right now," said Asling.



# Staff cuts feared at hospital

HOSP

MAY 7, 1992

**JOHN GRAY**

AHN Staff

**Fort St. John**

Attempts to balance the hospital budget may result in cuts to staff and programs, the hospital's director of nursing fears.

The board included the objective of a balanced budget in their mission statement at last night's board meeting, but the hospital is already facing a \$100,000 deficit for last year.

Director of nursing, Andrea Houghton fears the inclusion of a balanced budget objective may make trustees more aggressive in the cuts they make to staff and programs.

"I'm worried that some very

serious steps may have to be taken if we were to avoid a deficit and stay within that balanced budget objective," she said.

But any concerns about budget cuts coming from the amendment to the mission statement are premature said Chief of Staff, Dr. Mike Wright.

"We are only putting in writing something that we already strive to do," he said.

Fort St. John has generally had a history of balanced budgets, but last year they wound up with a deficit of approximately \$100,000.

"Our deficit this year is going to make it very difficult to submit a

**See Hospital pg. A3**

# LETTERS TO THE EDITOR

## *Headline, story on hospital sleazy, says reader*

FEB 25, 1992

**Dear Editor:**

I want to complain about the front page story in the Feb. 19 paper, about hospital financing. It was alarmist, negative and badly written, and the headline was in poor taste, not to say sleazy. The story by Dave Williams purported to quote a Dr. Singh, who was not positively identified, nor was it clear whether this was an actual interview, or a rehash from a press release. The story was quite unprofessionally handled. Problems in hospital financing are fairly well known, but the story came through as almost a death threat. Also the poor dear lady in the picture was not identified. In fact, the picture was taken at the intensive care home, while the story appeared to be talking about the hospital, which is a kind of misrepresentation.

At the same time, the very positive note in Pastor Olesen's announcement was only given a mention in the final paragraph of another story. It should have been the headline, because the story of the award given to our care home is a real boost for Fort St. John. We read of homes

which are dumping grounds for unwanted old people, and here in this town we have an outstanding care home of which we should be proud. Dave Williams probably does not have the experience to realize what a tremendous place this is in its care for people, so he (or the editor) made the mistake of overwriting on a provincial problem, while suppressing the local good news.

This is a local paper, after all. When you put out an issue which actually has some local news in it, couldn't you accentuate the positive a bit more?

**Mary Humphries**

**EDITOR'S NOTE:** Mrs. Humphries, while you are correct that the photo was placed with the wrong story, to question the legitimacy of Dave William's sources is uncalled for. The Alaska Highway News does not make up interviews or stories, we do not quote anonymous sources and we don't create the news. We report on what is news in this community. And not all news is good news.