

It was an extra special Mother's Day for Tracey Redlick second from left, as she gave birth to Dora-lynn of Sunday, May 8. In recognition of being the first mom of Mother's Day at Fort St. John General Hospital, the Kinette Club presented Tracey with a gift basket. Trace also received a Pamper Me Package, donated by Bren Ryder of A Cutting Edge School of Beauty. MAY 16, 1994

Letter

## Hospital disputes physiotherapy facts

To the editor,

MAY 27, 1994

I wish to respond to the recent letter entitled, "A Model For Outpatien Physiotherapy", which appeared in the May 16 edition of the Alaska Highway News.

Some statements made by the Peace Liard District Physiotherapy Association are inaccurate and require further clarification.

The decision to open a private physiotherapy clinic was not made by the hospital. Mr. Arie Kalkman, who is presently director of rehabilitation medicine at the hospital, advised the hospital board and medical staff some time ago that it was his intention to eventually set up a private physiotherapy clinic in Fort St. John. At that time, other communities who presently have private clinics operating were contacted and in all cases favorable reports were received.

The hospital was well aware that different injuries and diseases require different modes and lengths of treatment and — from past records — identified a small group of patients who would require longer periods of treatment and some specialized equipment. Therefore, in order to ensure that physiotherapy service for inpatients and those outpatients requiring extensive or special treatment remains available, the hospital will retain at least one physiotherapist on staff.

What the physiotherapy association fails to recognize, and the general public should be aware of, is that funding to acute care hospitals is becoming tighter.

The Government of B.C. has dictated job security and pay increases of 2.5 per cent to 6.2 per cent for unionized staff (which includes physiotherapists) while keeping funding the hospital at the same level as last year.

At the same time, "New Directions" concepts promote a shift from hospital to community based services.

The people served by Fort St. John General Hospital should know that the hospital board, administration, staff and medial staff continue to work toward providing quality health care services within the limited funds available. Although the development of a private physiotherapy service in Fort St. John was not a hospital decision, possible implications to the community were carefully reviewed. It was felt that area residents would gain in that additional service with extended hours will be the end result. Be assured also that any savings to the hospital will be used for provision of other services for our patients.

Yours truly,
Millie Asling
Administrator
Fort St. John General Hospital

#### ANNUAL GENERAL MEETING

of the

FORT ST. JOHN and DISTRICT HOSPITAL SOCIETY

will be held on

**MONDAY, JUNE 20, 1994** 

at

1930 HOURS (7:30 P.M.)

in the

**ASSEMBLY HALL** 

of the

JUN2,1994 FORT ST. JOHN GENERAL HOSPITAL 62-44

## Hospital must cut up to \$500,000

**Dave Williams** 

Staff Writer

Fort St. John

The Fort St. John General Hospital will be forced to cut costs by as much as \$500,000 this year in an attempt to accommodate rising staff wages and standpat provincial funding, administrator Millie Asling says.

Asling said the hospital learned recently it would be receiving the same amount of money this year as it did in 1993, despite overall staff wage increases of about three per cent.

"We got a zero per cent increase so (for) all the increased wage and supply costs for this year, we're going to have to pick up out of the same money we had last year," she said.

Asling estimated costs will increase three per cent to five per cent, amounting to between \$300,000 and \$500,000 within the hospital's annual budget of about \$10.5 million.

She said wages account for about 80 per cent of hospital costs.

Asling said the provincial government forced through hospital staff wage increases and granted health care workers job security but reused to grant

any more money to operate the facilities.

"We're down to bare bones staffing wise. We can't cut it, but even if we could, I don't know how we would reduce our staffing more," she said.

"We're in a catch-22 situation where they're saying you've got to get these (staff) people out of the system, but I don't know where they think they're supposed to go."

Asling said government plans — through its New Directions In Health Care program — are calling for major changes to be made before much of the groundwork has been established.

"There are supposed to be all these community jobs created that will give them (staff) employment, but that hasn't happened so far and neither have the community services been put in place that are supposed to take the pressure off the hospitals," she said.

Asling added the government has also called for a 10 per cent reduction in administration and support costs over two years while still expecting a completely new health care system to be put in place.

She said the government has unrealistic expectations of how easy or practical many of its plans are to implement.

"They have no recognition of what administration and support services actually entails. They seem to come up with these great and wonderful ideas of all this money that can be saved, but the bottom line is somebody's got to do the work," Asling said.

Asling said the hospital has already implemented many of the government's plans to reduce health care costs under the New Direction program.

"We've done a lot of things to try and keep people out of the hospital, which is the New Directions concept of prevention versus cure," she said.

"The bottom line is people still get ill. Suddenly, everyone is not going to remain well forever."

Asling added the continuing growth of the oil patch has greatly increased the workload facing the hospital, but added this fact hasn't been reflected in government funding allocations.

Hospital board Chairman Wayne Gretzinger said the budget's impact could've been worse.

"It's not a surprise. They've been talking about zero per cent or less for a while," he said.

"We would've liked to have seen a bit of an increase to cover the wage increases. I guess we can't complain looking at the rest of them."

Many hospitals in the province faced budget reductions of one to four per cent.

"Hospitals that aren't efficient are getting cuts to make them efficient," Gretzinger said.

## Hospital may get boost from province

**Dave Williams** 

Staff Writer

Fort St. John

The Fort St. John General Hospital may, or may not, be able to tap into a new \$50 million provincial government fund to aid financially strapped health care facilities, the Minister of Health says.

Paul Ramsey announced the one-time fund Friday, but noted Fort St. John won't be eligible for help if there are any other possible ways of reducing its spending without service cuts.

"If we can get efficiencies, maintain service and if the assessment of the peer hospitals and the ministry is that services are maintained, then there may be no money in this for Fort St. John," he said in an interview from Victoria.

"Be careful. What we're looking at here are services. We must get away from talking about particular institutions or numbers of beds and look at the services to people."

The Greater Victoria Hospital Society will receive \$5 million, the Vancouver Hospital \$10 million, B.C.'s cancer clinics \$1.75 million with the allocation of the remainder to be determined over the next two to four weeks.

Hospital budgets announced earlier this year left the Fort St. John facility \$300,000 to \$500,000 short.

Despite the projected shortfall, Ramsey said the Fort St. John hospital's financial situation doesn't necessarily mean it needs more money.

"We expect hospitals to be working with the ministry staff to identify specific needs and if the needs are there, we are determined to preserve services. That's the goal of this announcement," he said.

"They are going to be reviewed by their peers in other hospitals and the ministry to assess their ability to meet the budget difficulties that many hospitals are facing."

Ramsey said when the initial hospital budget allocations for the coming year were announced, the government indicated facilities which felt unable to comply were asked to present their case at a later date.

# gives people time to understand what' Province won't abandon hospitals: Ramsey

Local health care officials and politicians have repeatedly warned the Dave Williams JUNE 94

Fort St. John

Staff Writer

Ramsey said "While we can still improve, it is clear

from our review that some hospitals require more

Ramsey said the government's goal is to shift hospital operations to a more economical model

ime before taking the next steps."

"We're saying we understand the need for a little

money to adjust to the government's Closer to nospitals reported they needed more time and

more time as we move through the transition,"

He said since that time, many of the province's

government's strategy for medical care in the future, the province's minister of up is in place to accommodate the based care won't proceed before the back-The move from hospital to more home-

"It does not mean that services will be delivered

without resulting in service cuts.

in the same way," he said. "My concern is that

The Fort St. John hospital board

risen dramatically.

has increased minimally, support for the

development of community-based care has

Ramsey said while funding for hospitals

with the job," he said.

going on but also says we have to get on

JUNG 1994

this year would leave it \$500,000 short as

recently announced it budget allocation for

will abruptly unload its responsibilities on Paul Ramsey said "challenging" hospital budget allotments announced recently and fast-approaching deadlines for the formation of local and regional health groups do not mean the government Fort St. John area communities. health says.

available for hospitals faced with what they believe

Ramsey said there are whole host of options

services are maintained."

"Hospitals must look at ways of reducing costs

are insufficient financial resources.

"We've said we are going to make sure you're getting small budget increases and we're not going to care about community services,"" he said in a Thursday that community based services are there. We're not going to simply say 'Hospitals,

costs while maintaining high quality patient care."

"There's a huge range of opportunities to save

institutions or sharing services with other health

providers," he said.

perhaps by combining their services with other

say on purchasing, food services or laundry,

health planning for the regions of the to be on-line Oct. 1 of this year and that as of Oct. 1 or next April, these "We must very carefully phase-in actual boards to get up and running to start doing community health councils by April of "Be very careful here. We're not saying boards will instantly be responsible for all operations of these boards, but we need government's Closer to Home strategy Ramsey said regional health boards are aimed at reducing the amount of hospitalbased care is moving too fast. health delivery," he said. province." 1995.

community health councils in 1991, with the government announcing in 1993 it Ramsey said the Royal Commission on Care and Costs made its recommendations for regional boards and would follow through Health

government's term.

that cuts in funding have occurred. We "I would take issue with the perception

Ramsey said this year's \$6.4 billion

this year," Ramsey said.

services. That's why we provided \$42 million for the Closer to Home fund for

that we must increase community-based

budgets for hospitals. We recognize also

"We recognize that these are tigh

wages rise and funding remains the same.

\$1 billion increase in funding over levels during the former Socred

provincial health care budget represents

have consistently increased funding for

health and continue to do so," he said.

"A four-year phase-in is prudent. It implementation by 1995.

"We want to make sure the services are

interview from Victoria.

June 30/92 June 30/1994

We are pleased to announce that dates have now been set for the

#### MAMMOGRAPHY CLINIC in Fort St. John.

#### Appointments can be made by phoning 1-800-663-9203

We are working towards a fall clinic for the mobile mammography unit at which time the Minister of Health will be in Fort St. John to officially open the unit. Our sincere thanks to those who have contributed financially and to those whose dedication of time and effort enabled us to complete this project.

The hospital society held it's annual general meeting on Monday, June 20th and we would like to take this opportunity to welcome

#### MARILYN CAMPBELL to the board and

Congratulate VALERIE POWELL on her re-election.

Linda Gentles was elected as Chairperson, the first woman to hold this position, and Vice-chair is John Wetzel. The other boar members are Sheelagh Garson, Fred Jarvis, Ken Forrest and Twila Soule.

The board has had some concern that funds donated to the hospital would not be protected and as a result the Fort St. John and District Hospital Foundation has been set up and will be registered as a charitable society. The mandate of the Foundation will be fundraising and management of hospital assets. Their first official fundraising event will be the annual "Gala" held this year on September 24th at the Pioneer Inn.

Our year end is March 31st and we are pleased to announce that we ended the year with a small surplus and that we have received no increase in our funding from the provincial government. The following are stats for the previous one year period: Admissions 2,937. Number of Births, 471. Surgical Procedures 1,652. Emergency Visits 22,432. Laboratory Units 1,035,427. Exams (Radiology) 12,621 and Kilograms of Laundry 167,981.

We would like to take this opportunity to thank the Medical and Hospital Staff who continue to strive on a daily basis toward delivery of the best possible health care and to our many supporters throughout the Peace River Area. We wish everyone a safe and enjoyable summer season.

JUNE 30,1994

#### Breast screening now available locally June 30/92

Anna Milligan

Staff Writer

Fort St. John

Women no longer need leave Fort St. John to have breast screening mammography performed.

The screening program allows a women to refer herself, and because the program is approved by the Ministry of Health there is no charge involved. A

doctor is not required to make a referral for a screening.

Although the hospital has had diagnostic mammography available for about 18 months now, the screening mammography program was not available. Diagnostic mammography requires a doctor's referral and is ordered when it is suspected the patient may have a medical problem with her breast. Screening mammography is a less extensive exam, is done by the woman's choice and is for early detection.

Until now women have had to travel to Dawson Creek for a screen.

Women can make an appointment at the Fort St. John General Hospital by phoning 1-800-663-9203.

Soon screening will be available in more communities in the Peace River Region. By September the mobile unit will hit the road and take breast screening to Fort Nelson, Chetwynd and Hudson Hope, said hospital administrator Millie

"We hope to get there at least once this year and once we access the workload we may go a couple times a year," said Asling.

The mammography machine that will be used for the screening was paid for by the people of the region through fundraising and cost about \$90,000, added Asling.

It's important for woman to use this service as one in 10 women in British Columbia will get breast cancer, say statistics released by the Breast Screening Mammography Program of British Columbia.

## couple or \$75 an individual. Cocktails begin at 6:30 p.m. with dinner at 7:30 p.m.

Tickets to the gala dinner and dance are \$150 a

## Obituary June 30/94 Wayne Gretzinger



Wayne Richard Gretzinger of Fort St. John, B.C. passed away unexpectedly May 28, 1994 in Kelowna, B.C.

Wayne was born in Kindersley, Saskatchewan, August 3, 1944 and moved to Fort St. John with his family in 1953.

He played hockey on the original Ross H. McLean team and at the age of 12, had his first job with Ma Murray at the Alaska Highway News. She was the one who told Wayne he could accomplish anything he wanted in life, and that he did.

Throughout the years Wayne owned and operated many businesses. His first was Wayne Gretzinger Trucking Ltd., and be was involved in building the WAC Bennett Dam. He also had the Royalite Bulk Plant for a few years. Together with his brother Eric, they formed the FSJ Powercraft Sales in 1971 and operated it until selling in 1977. He bought Giebelhaus Building Supplies and changed the name to Totem Building Supplies which he operated until 1982 and managed until 1988. At the time of his death he was working for Surerus Construction as Operations Manager.

Wayne was very involved in the community. He belonged to the Lions Club some years ago, was a City Alderman for eight years, was involved in the first Winter Games, was Director of the Regional District Board, served on the Economic Development Board, and was twice chairman of the Fort St. John Hospital Board, a position he held at the time of his death.

Wayne fulfilled one of his dreams and bought his Harley Davidson touring motorcycle in 1990. When he was riding he was a very free spirit. He was on a trip with his bike at the time of his death.

Wayne was predeceased by his father Dick and mother Rose of Kelowna, BC. He is survived by his loving wife Karen, his daughters, Meredith of Vancouver and Jennifer of Fort St. John, stepdaughters Diane (Jason) of Kelowna and Paula of Fort St. John and two grandchildren Tyler and Brianne of Kelowna.

He is also survived by brother Eric (Pam) and sister Dona, both of Fort St. John, and sister Carol of Maple Ridge and nephews and nieces.

Donations may be made to the Wayne Gretzinger Memorial Fund at the Fort St. John General Hospital.

### Hospital fundraiser ready to roll

Anna Milligan

AVG30,1994

Staff Writer

Fort St. John

Emergency room doctors and nurses will have one less worry when dealing with trauma patients if the Fort St. John General Hospital gala dinner and dance is a success.

The annual fundraising affair is slated for Sept. 24 at the Pioneer Inn. The hospital hopes to raise at least \$8,000 at the event to be used to purchase an emergency trauma stretcher.

"This stretcher is much fancier than the average stretcher," said hospital administrator Millie Asling. "You can put a badly injured person on it and not need to move them off it to work."

The hospital currently has one emergency trauma stretcher but, as Asling points out, when you get one trauma patient you usually get at least one other.

Most trauma patients are the result of serious accidents, fires or shootings. The stretcher is designed to tilt up, down and sideways, is wider and has side rails and a place for an intravenous pole.

#### **Dual Purpose**

The gala has a dual purpose this year. It will not only serve as a major fundraiser but will also serve as a kick-off for the hospital's new foundation.

The new hospital foundation will eventually replace the Fort St. John and District Hospital Society which will be dissolved under the Ministry of Health's New Directions program, said Asling.

The foundation will be a separate non-profit society which will take over and pursue all fundraising for the hospital. Under its mandate it will also seek government and/or private grants for specific projects, encourage and receive donations, bequests, endowments or other acquisition of funds and property, as well as manage, invest and distribute funds for the purpose of enhancing patient care and/or providing grants for educational scholarships.

Once New Directions is in place the Community Health Council will manage the needs of the community, said Asling. There will also be a Regional Health Planning Board which will allocate the funds throughout the area to be managed by the individual health councils.

"It will put the decision making at the community level," said Asling.

Although the move to health councils is viewed by many as a positive direction it did not leave current health institutions with an organizational body to raise money. The creation of the foundation will allow the hospital to raise funds once the new Community Health Council is up and running, said Asling.