

Documenting the legacy and contribution of the Congregations of Religious Women in Canada, their mission in health care, and the founding and operation of Catholic hospitals.



Retracer l'héritage et la contribution des congrégations de religieuses au Canada, leur mission en matière de soins de santéainsi que la fondation et l'exploitation des hôpitaux catholiques.

## St. Joseph's Hospital and Home A short history 1861-1986 Guelph, Ont.

Source: Archives of the

Congregation of the Sisters

of St. Joseph in Canada

Copyright: Public Domain

Digitized: January 2019



125 years of Service



STJ

A SHORT HISTORY 1861 - 1986



This historical booklet is published on the occasion of the 125th anniversary of
St. Joseph's Hospital and Home Guelph, Ontario and commemorates the Sisters' ongoing service to the sick, the aging, and the community.



The 1862 structure (left) and the 1877 addition (right)

Upper Canada had only a handful of hospitals in 1861 when Father J. Holtzer decided that Guelph should have one. The pastor of St. Bartholomew's, the town's only Catholic church, travelled to Hamilton and put his request for a hospital before the Bishop of Hamilton. The Most Reverend Farrell agreed that Guelph needed a hospital and asked the Sisters of St. Joseph to consider opening a new mission in Guelph.

The decision to open a hospital was neither made hastily nor easily. The community of Sisters had been established in the Diocese of Hamilton for only ten years and was busy with other newly opened missions in Brantford and Paris. Moreover, the community was losing members to tuberculosis. However, the Superior General, Reverend M. Martha, agreed to visit Guelph to see the proposed building and further discuss the plan with Father Holtzer. She was evidently pleased with the building and assured of community support, she returned to Hamilton with plans to open the hospital in the fall of that year.

On November 22, 1861 three sisters travelled by train and arrived in Guelph in the late afternoon. A carriage took them to the western outskirts of Guelph in what was then Guelph Township. Sisters Alphonsus, Antoinette and Ignatius found a small two storey stone house awaiting them - the first building of St. Joseph's Hospital and House of Providence. This modest structure was near a toll booth and known locally as the Gate House. Its 25 acre lot had been donated by a Mr. Hussey. All furnishings and supplies were likewise donated.

The sixteen beds of the Gate House were quickly filled since the Gate House had several functions. It served as a home for the mentally retarded, a home for the aged, the Sisters' residence as well as a community hospital.

One of the many visitors to the hospital in its first year was a pedlar. The Sisters could not afford to buy any of the saplings he was selling, even at the price of seventy-five cents each. However, the pedlar was invited in for a meal and before leaving he planted a silver maple sapling in gratitude. The maple thrived in the wet ground and is strong and alive today. The tree, a positive emblem of physical wellness and spirital growth is an appropriate symbol for St. Joseph's and Home and is incorporated in its logo.

Although there are few records from this time, it is known that amputations were the most common operation. One account of a nursing sister who assisted with a leg amputation states that the doctor drew incision lines with an ordinary pen and ink! The patient recovered well with no infection.

The sisters had no formal medical training since there were no nursing schools in the area, (Florence Nightingale's training school had only opened in 1860). Patients were grateful for the care they received however many of the hospital's former patients became volunteers. Michael Millaley, the first patient, arrived with severely burned hands. Long after his recovery, he helped the Sisters by bringing the daily mail from town and running errands with the phaeton carriage.

After only one year, it was apparent more beds were needed and in 1862 a second larger building was erected increasing the number of beds to 40. The imposing two storey limestone structure was capped by a bell tower from which the Angelus rang three times daily. Permanent residents lived on the third floor while the sick and injured were accommodated on the first and second floors. The small Gate House became the Sisters' Residence and was renamed the Upper House.

The town's population was growing considerably and in 1875 Guelph General Hospital opened as a twelve bed facility. Then, in 1877, St. Joseph's Hospital built an addition at an approximate cost of \$4,400. The two buildings formed one structure about 30 m long and boasted a verandah on the north side. The beds at St. Joseph's now numbered 77.

By 1878 the town's population had reached 9,918, almost double the 1861 figure of 5,076. Though the number of beds had more than doubled during the same time, it was still not enough. The outbreak of contagious diseases worsened the situation. In 1888, a diptheria epidemic led the sisters to build an isolation cottage. There was no foundation beneath the cottage as it was only meant to be a temporary structure. The interior was simply one large room with a wooden divider reaching part way to the ceiling.

In four years, over one hundred patients were cared for by Sister M. DiPazzi and Sister M. Marcelline in the little cottage. In this era, hospitals were viewed as places of last resort where extremely ill people would go to die. The isolation

cottage, or Pest House, as it was called, was looked upon with particularly great fear. Yet only thirteen diphtheria patients died, a remarkably low number given that there was no antitoxin for much of the epidemic.

Infection control methods were slim by modern standards. Instruments were sterilized in an oven. Laundry was disinfected with carbolic acid, hung outside and then ironed. Neither gloves nor masks were worn at this time.

Other frightening diseases such as typhoid and cholera are noted in later hospital records. The insufficient and contaminated town water supply was blamed for the spread of numerous diseases at the turn of the century. Dr. Henry O. Howitt, Guelph's Medical Officer of Health, estimated that every fall, half the city's hospital beds were taken up by typhoid cases. In 1909, when the city's water source was changed from local rivers and wells to the Arkell springs, typhoid was virtually eliminated.

Very few people were able to pay for their upkeep, especially long-term patients and elderly residents. Funding came from various sources including government grants, bequests and anonymous donations. The sale of surplus produce and livestock provided a small amount of capital as did grain and hay grown on the hospital's 25 acre site. An 1886 ledger entry shows that wool was sold for \$77.75. Another entry from 1888 shows that total expenses for the Hospital and House of Providence totalled almost \$7,500.

In the winter months, the sisters went door to door in the county seeking donations. The January 1887 canvass of Pilkington and Nichol townships yielded \$52.35. The county council also allowed for an annual grant of \$800. Although three fourths of the hospital patients were residents of Guelph, St. Joseph's was eligible for a grant of only \$200. because it lay outside the city limits.

The annual Ladies' Day activities raised considerable amounts of money. On one summer day each year, women volunteers rode the trolley collecting fares. It is not known whether they received all the rider's fare or simply donations.

Local papers reported in vivid detail on the Ladies' Day events happening around town. A 1916 article notes "the selling of flowers on the street by young ladies with gaily coloured automobiles as centres." For many years, field days with races and baseball games, were held at the Ontario Agricultural College. Teams from surrounding areas competed but the most popular matches were those between the School Trustees and City Council members. A fish pond and candy booth were popular with field day crowds as was a high tea tent boasting "white napery and the sheen of fine china". Ice cream, however, was the more favoured item, it seems, and the awarding of the ice cream order was dutifully printed in the paper each year. The four to five hundred dollars raised on the annual Ladies' Days of the 1880's and 1890's accounted for an impressive portion of the hospital's yearly revenue.

Fundraising efforts at the turn of the century were crucial to the simple day-today functioning of the hospital. These resources could not be stretched to begin construction of a new building badly needed by the 1890's. The limited space and outdated facilities of the limestone building meant an increased workload for the Sisters. Higher admission rates worsened the situtation. Doctor T. H. Orton, who joined the hospital in 1892, suggested the demand of hospital beds had increased because the public had begun to lose its fear of hospitals. A fire caused by the faulty wiring was the decisive factor demonstrating that construction of a new hospital could not be postponed. Bishop Dowling of Hamilton agreed to oversee the financing of this latest project.



The new hospital completed in 1895

Completed for the princely sum of \$38,027.74, it opened in October of 1895. The new yellow brick structure was described by a local paper as a "palatial home that opens its wide and attractive portals to everyone - the sick, the poor, the infirm - in the sweet name of charity". Both older limestone buildings were now given over to the House of Providence.

The most noteworthy modern features of the new hospital included a hot water boiler, a complete cooking range and a porcelain sink. Each ward had a slate mantel fireplace with a tile hearth and metal grate.

The operating and chloroform rooms were a great improvement over the facilities of the older limestone building. With no woodwork the walls were completely washable. Shelves and tabletops were of plate glass. In the operating room, there was hot and cold running water as well as a thermostat which was

carefully described as a device that allowed the room to be "regulated to any degree of heat in summer or winter as the case requires".

The new operating room was put to use on the first day it opened. An employee of George Williams' bakery, crossing the Grand Trunk Railway tracks on Gordon Street, stepped in front of a freight train, badly crushing his foot and an amputation had to be performed!

Another turning point in the history of St. Joseph's occurred in 1899 when the hospital opened its own training school for nurses. The two founders, Sister Martina and Sister Leo had been trained as graduate nurses in Kalamazoo, Michigan. Under their instruction, nine Sisters graduated from the first program in 1902. In 1904, the school began accepting lay nurses for training. The first of these was Mrs. Hanlon of Guelph. Nursing students at this time did not begin training on the same day and it was not until 1918 when nurses enrolled and graduated as classes.

Nursing students worked solidly through the three year program. A twelve hour day was standard and any studying was done at the end of it. Laundry, window-washing, and general cleaning were part of the training. Only one half-day each month was allotted for free time! The lot of nursing students improved considerably in 1936, with the introduction of the eight hour day. Ward aids and graduate nurses employed at this time also lightened the workload.

Nurses were immediately recognizable by their uniform which changed little over the years. A blue Oxford-cloth dress was covered by a white apron with a gathered waistline. Although the early kerchief bodice was replaced in 1908 with a bib, this basic uniform was kept well into the sixties. Over time, caps became a little larger, cuffs shorter and hemlines gradually inched upward, no longer conforming to the regulation four inches off the floor.



Class of 1911

While a number of the province's nursing schools closed in 1939, St. Joseph's Training School for Nurses remained open, having met all requirements except one, that it have a separate building. Nurses trained and lived in the hospital itself until 1949 when a new three storey yellow brick residence was opened. The St. Joseph's Training School for Nurses continued to operate there until the last class graduated in 1974. Nursing schools in the province then came under the jurisdiction of community colleges.

Ultimately, St. Joseph's Hospital outgrew the 1895 building. While the structure itself was sound, again space was limited and modern facilities were lacking. The hospital hired Toronto architects Stevens and Lee who designed two wings to project from the south end of the existing building. This design afforded the rooms sunlight and a pleasant view. The construction of the new wing and remodeling of the older part were completed in 1925 at a total cost of \$130,000. A door to door canvass raised more than \$5,000 for this project.

The Canadian Hospital printed a detailed article on the best features of the new 104 bed facility praising the terrazzo and rubber-covered floors which not only improved fire safety but did not creak under foot! Noting that two suites of rooms had private toilets and that all private rooms were outfitted with bedside call buttons and telephone receptacles, the article further remarked on the "devices which are conducive to the comfort and convalesce of the patient". These new devices in every room were the now common bed tables and portable lamps.

The new x-ray room was considered the most innovative facility. Its equipment, installed for less than \$4,000. was described by the hospital as "more than sufficient for all x-ray needs for diagnosis and treatment, except the treatment of deep cancer". The placement of the x-ray and viewing room was carefully planned. With the latter beside the operating room, doctors could examine the x-ray plate of the patient before beginning the operation. When the roentgenologist, Dr. Broome, returned from his training in Michigan he mailed formal announcements to the local doctors inviting them to make use of his new "x-ray laboratory" and gently suggesting they make appointments in advance.

In this era, there was great emphasis on the value of fresh air and sunshine for convalescing patients. Two balconies on the east side of the 1895 hospital building had allowed patients to "take the air". The new 1925 wing now provided solaria. These rooms situated on the south end of the two wings, were sealed off from the rest of the building by thick masonry walls to provide safe fire escape routes.

At the same time, considerable improvements were made to older sections of the hospital. Sinks, dressing rooms and a diet kitchen were added and "the modern nurses' call system" was extended. Eight years later, after more improvements to the X-ray Department and laboratory, the hospital was awarded full approval by the American College of Surgeons. Cited for its "high standards of service and promotion of scientific medicine", St. Joseph's Hospital had earned an impressive distinction for a relatively small institution of 104 beds.

In May, 1934, St. Joseph's opened its Physiotherapy Department and in the following year, a medical library. A sixty-member Ladies' Auxiliary took shape in 1936. Although women of the community had regularly worked at annual fundraising events, such as Ladies' Days, there had been no formally organized body of volunteers.

Operating costs in the 1940's rose and both city hospitals were forced to hike their daily rates, though rates remained lower than most hospitals in Ontario. Still, patients could enjoy private rooms for five dollars a day and newborns were cared for in the nurseries for one dollar per day!



Chapel in the 1895 building

The post-war baby boom necessitated expansion of hospitals everywhere. While the solaria at St. Joseph's were converted to semi-private rooms, the additional space made available when the nurses moved to their new residence proved to be inappropriate for conversion to patient rooms. Once again, a construction project was underway.

The five-storey edifice with a new main entrance on Westmount Road opened its doors in 1951. The major features of this latest building reflected the high birth rate, with a new third floor obstetrical department boasting two labor rooms and two care rooms. Each infant had its own cubicle with piped oxygen available. Two special nurseries were designed. One was for premature babies while the other, termed "a suspect nursery" was set apart for special cases. The new ward also included a room for the preparation of formula and new mothers

received instruction on how to care for newborns in the conference room. Fathers, who traditionally did not observe or assist at the birth, had their own waiting room at the end of the ward.

The department remained open until the end of 1972 - the last baby was born on Christmas Day that year. Since that time, obstetrics has been offered only at the Guelph General Hospital as part of the rationalization of services demanded by the provincial Ministry of Health. The Pediatrics Department closed soon after for the same reason.

Mechanical devices and conveniences taken for granted today were welcome additions to the 1951 building. Every room was equipped with an emergency call system, for example, and an automatic electric elevator was much appreciated by staff and visitors alike. Special rooms were outfitted with piped-in oxygen thus eliminating the need to wheel larger tanks of the gas around the hospital and the risk of these running empty.



Westmount building completed in 1951

Thanks to the Ladies' Auxiliary, a master clock system which synchronized all the building's clocks was installed with the main time-keeper, a self-winding device, hanging in the lobby. Programmed to ring at various times, such as the end of visiting hours, the system was considered remarkable.

While the hospital was able to keep pace with demographic changes, the House of Providence remained an inadequate facility. It was too small to serve the elderly who were living longer. Improvements and renovations in the House of Providence were made incrementally but these could not transform a small 95 year old building into suitable accommodation for the elderly and infirm.

When government inspectors and the local fire chief deemed it a possible fire hazard, several local citizens' groups pressed for a new building. The Sisters considered renovating the older part of the hospital, however, this compromise was impractical, in light of problems posed by the stairs and narrow doorways of older buildings.

In 1956, plans for the construction of a new 216 bed home for the aged were announced. The need for a new facility was acknowledged by the community. The Sisters of St. Joseph could finance half of the 2.5 million construction costs. The provincial government agreed to provide \$540,000 but a proposed matching grant from the city did not materialize.

However, the project went forward with several major changes. Under the new plan a section was set aside for the chronically ill. In May of 1959, the residents of the House of Providence moved into a completed section of the structure. The historic house and its name gave way to the new St. Joseph's Hospital and Home. The Angelus bell from the House of Providence is currently displayed in front of the Home, one of the few concrete reminders of the past.

The spacious new residence contained 105 beds for the elderly and 109 for the chronically ill and allowed for new patient services. A craft room, barber shop, and library were featured. Later the beds were increased to 136.

Residents of the Home and Continuing Care Unit also benefited from the services of a new volunteer organization formed in March of 1960. Initiated by Sister St. Edmund, St. Joseph's Guild began with over 120 members. Under Claude Flood, its first president, the Guild undertook many projects in its inaugural year. Bed lights, craft supplies and physiotherapy equipment were some of the items purchased by the Guild. In October, 1960, after only three weeks of planning, St. Joseph's Guild held its first rummage sale at the Guelph Armoury and raised over \$2,300. Each March, the Guild held a spring tea, an important social event which raised money for much needed and valuable equipment which was welcomed by the Home and Continuing Care Unit.

Simple features such as wide halls, handrails and elevators gave greater mobility to residents with wheel chairs or crutches.

The next significant renovations were completed in 1973 in ten departments throughout the hospital. Respiratory Therapy, Medical Records and the Admitting department were improved under Operation Facelift. As well,

structural changes were made throughout the hospital to ensure fire safety. Hazardous stairwells were enclosed, self-closing fire doors were installed and the alarm system improved.

The history of St. Joseph's Hospital and Home in the last 25 years has been characterized by the development of community outreach programs. Many services for patients and their families allow for shorter hospital stays and greater personal independence. The hospital, prepares the food for the Red Cross Meals on Wheels Program, which permits the elderly to stay longer in the own residences. The out-patient Dialysis program similarly affords more independence. In one of the newest programs families who provide a high level of home nursing care for a relative, can apply to the Continuing Care Unit under the Relative Rest Program. St. Joseph's provides the interim professional nursing care for the patient and a respite for the care-giving relative.

Other innovative services are offered to patients and their relatives. The Social Work Department counsels in-patients and out-patients as well as their families. Services such as individual and marital therapy are considered an important adjunct to medical care in the 1980's.

Technology has also significantly changed St. Joseph's Hospital and Home in the past 25 years, making possible many advanced types of diagnostic services. The Respiratory Therapy Department, for example, uses precision instruments to measure the air volume of lungs. St. Joseph's is the only area facility with this equipment. Because such equipment is costly, hospitals can specialize in certain areas only. St. Joseph's other areas of expertise are special radiography and many types of sophisticated surgery.

Volunteers continue to play an important role in the functioning of the hospital. Men and women of all ages assist with various programs and services and are involved with much more than fundraising. Junior and senior volunteers in the Hospital and Home now number more than 300.

On June 16, 1983, the Board of Trustees and the Management Committee of the Home amalgamated to form the Board of Trustees of St. Joseph's Hospital and Home. Over the years the two institutions had functioned as unique but integrated units. Each had its own board and by-laws and offered a distinctly different service. The Home served the aging and the hospital served the acutely and chronically ill, but they also had much in common. They shared laundry, maintenance, kitchen and heating and were also under the same roof. Amalgamation of the Hospital and Home had several important results-it consolidated management, enhanced communication and allowed greater sharing of resources.

St. Joseph's is currently planning for the construction of a totally new hospital complex north and adjacent to the existing hospital. The first two of the building's six levels are designed to permit a 50% expansion in space. Comprised of 34 bed nursing units, the hospital can expand to as many as 500 beds, double its present capacity. A day hospital, geriatric assessment unit, rehabilitation services and a therapy pool are included in the plans.

The buildings and scope of the 1861 mission have enlarged considerably. St. Joseph's Hospital and Home employees now number 750, a far cry beyond the three founding sisters. The vegetable garden and livestock are gone. The underlying philosophy has remained constant over the 125 years however and St. Joseph's Hospital and Home still considers it an honour to serve the sick, the aging and the community.