The Great Canadian Catholic Hospital History Project

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 Health Centre Guelph, Ontario A New Beginning 2002

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St. Joseph's Health Centre

- A New Beginning, 2002

Guelph, Ontario

he story of St. Joseph's Hospital and Home in Guelph is the story of the courage, commitment and faith of the members of the Congregation of the Sisters of St. Joseph. Their dedication and unwavering efforts on behalf of the poor, the sick, and the abandoned are an inspiration to all.

The story is also about the members of the community who responded to that vision and became an integral part of that history. In the 21st century we see the numbers of Sisters diminishing but the mission lives on in the hearts and minds of all the lay people who share their belief.

To all the Sisters, staff, volunteers, donors, and supporters 2002 represents a new direction, a chance to reaffirm the motto "it is an honour to serve."

"In fulfilling our mission, we continue on a journey which has no final destination. The road we travel may have many curves, but every corner we turn presents new opportunities to be explored. Each step provides fresh challenges and unique discoveries. Each new plateau allows us a different view; a chance to reflect on the distance we have travelled and to plan for the road that lies ahead."

> Sister Margaret Myatt, President and CEO, St. Joseph's Hospital and Home, 1990 - 1998, annual report 1991-92

St. Joseph's Health Centre, Guelph -A New Beginning, 2002

The history of St. Joseph's is taken from two earlier histories, written in 1961 and 1986, authors unknown. Mary DuQuesnay

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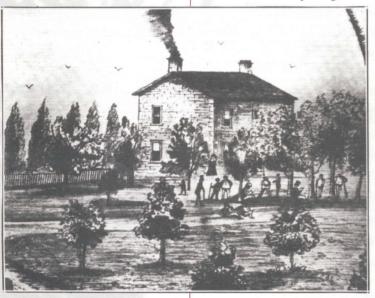
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Dawn Fulcher, Leaman Printing. The cover incorporates many elements from St. Joseph's history. The cross and arch are part of the 1895 portico from the front façade of the hospital; the lace, from France, represents one of the means by which the Sisters supported the activities of their mission, and the stained glass is from the chapel of the 1895 building.

History of St. Joseph's Hospital and Home, 1861 to 2002

n 1861, Upper Canada (Ontario) had only a handful of hospitals when Father J. Holtzer S.J., pastor of St. Bartholomew's parish - the current Church of Our Lady Immaculate - perceived the need for a hospital in the City of Guelph. The pastor travelled to Hamilton to see Bishop Farrell with his request.

The Sisters of St. Joseph had arrived in Hamilton in 1852 and were busy with schools and orphanages not only in Hamilton but also in Brantford



and Paris. Even though they had few resources, the Sisters considered the Bishop's request and Mother Martha Von Bunning travelled to Guelph to see the proposed building and to gather more information. Being assured of community support, she agreed to the request and on November 22, 1861, Mother Martha, accompanied by Sister Alphonsus Cashen and Sister Ignatius Pigott, travelled to Guelph by train to begin the new mission.

Sketch of original farm - 1851.

A carriage greeted them on their arrival and they were escorted to the western outskirts of town to a two story stone farm house in the township. This modest building became the first St. Joseph's Hospital and House of Providence. The house and grounds, originally owned by the Hussey family, were located by a toll booth and was known locally as the Gate House. Along with the house, 25 acres of land had been donated by the family. In addition, furnishings and supplies were donated.

The 16 beds in the Gate House were very quickly filled since the House had many functions. It served as a home for the mentally challenged, a home for the aged, a residence for the Sisters as well as the hospital.

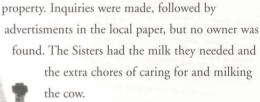
Shortly after the Sisters arrived a peddler appeared on the door step. The Sisters could not afford to buy any of the saplings he was selling but they invited him in for a meal. Money was so scarce that even 75 cents for a tree was not to be had. In gratitude for the hospitality, the peddler planted a silver maple sapling near the Gate House. This tree in time became incorporated in the logo of St. Joseph's. Silver maples are not normally very long lived trees - their normal life span is about 75 years. The silver maple, now 141 years old, planted by the pedlar is still growing at St. Joseph's. The tree has come to symbolize the strength, spirituality and caring characteristics of St. Joseph's. Several saplings have been planted on the grounds to ensure that there will always be a silver maple on the property.

In 1861 no formal medical training program existed in Canada. Florence Nightingale's training school in England had only started in 1860. The sisters did not let this hinder them and they cared for the patients and residents with compassion and tenderness as exhorted by the gospel. Patients were obviously grateful for the care they received since many stayed on to help the Sisters as volunteers. Michael Millaley, the very first patient, had arrived with severely burnt hands. Long after his recovery, he helped the Sisters by bringing the daily mail from town and running errands.

After only one year, it became apparent that more beds were needed and,

in 1862, a second building was added to the property, increasing the beds from 16 to 40. The third floor housed the permanent residents and the first and second floors held the hospital beds. The original gate house became the Sisters' residence and was known as the Upper House. The new limestone structure was capped with a bell tower from which the Angelus rang out three times daily. The same bell has hung in front of St. Joseph's Home since 1959 and will be sited in the front garden of the new St. Joseph's Health Centre.

Hardships were many in those days. There was no running water and a windmill drew the water from the well but it often failed and so the sisters had to resort to pumping by hand. Money was virtually non-existent and the Sisters on many occasions were assisted by divine intervention. A story is told that one day the milk supply had run out. With no funds available to purchase more, the Sisters were encouraged to pray to St. Joseph for assistance. Late in the afternoon a cow was discovered grazing on the



In addition to tending the sick and caring for the aged, the Sisters baked their own bread, and cooked all the meals. The laundry was done by hand in a zinc tub and instruments sterilized in the oven of the cook stove.

> By 1878 the population of the City had grown to 9,918, near double the 1861 figure of 5,076; however the growth brought with it not only prosperity but also disease. During the mid 1800 as cities expanded, little was known about sanitation



Photo of the 1862 building with maple sapling in left foreground.

Building Costs 1895

Mason, Stone and Brickwork Garpenters and Joiners Lathing and Plastering Tin, Galvanized Iron and Slatework Painting, Glazing, etc. Plumbing and Heating Hotwater Boilers and Radiators Electric Wirning, etc.	\$12,292.00 10,692.00 2,555.00 1,750.00 1,475.00 4,551.00 2,695.28 739.46 1,278.00
Architect's Fees Total Cost of new hospit	al 38,027.74
****	\$\$ \$\$ \$\$

Expenditures for April 188	38
Expenditures 1	2.90
+ Feed	117.50
Stock and Feed Butcher's Meat	18.25
	13.98
Repairs	31.05
Stationery	161.59
Tea and Coffee	22.85
Wood and Coal	108.51
Fish, Eggs and Fruit	69.10
Drugs, Medicines	76.37
Butter Flour, Bread and Meal	90.79
Flour, Bread and man	7.00
Dry Goods	8.00
Wages	15.00
Light, Oil, etc.	16.10
Coffins	10.10
Miscellaneous	* * * * * * *
	.49¢
Per Diem Cost in 1888	

Information from the St. Joseph's Hospital legers, 1888 and 1895. and air or water born diseases and so epidemics of typhus and cholera were increasing in frequency. In many cases, victims were left to die, most times untended for fear of the contagion. As many parents died, the numbers of orphans increased.

In 1888 a new epidemic, this time of diphtheria, led the Sisters to build an isolation cottage since that was the common method of caring for victims of the epidemics. From 1888 to 1892, over 100 patients were cared for in the cottage by Sister Mary DiPazzi and Sister Mary Marcelline. In this era hospitals were viewed as places of last resort, where extremely ill people went 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 the lack of antitoxins available to treat the epidemic. The very first tracheotomy in Guelph was performed on one of these patients and 50 years later she was still alive and visiting the Sisters, grateful for the care she had received.

Infection control methods were slim by modern standards. Instruments were sterilized in an oven and laundry was disinfected with carbolic acid, then hung to dry and ironed. No one wore masks or gloves.

Hospital records from this time and later, show typhoid and cholera epidemics with astonishing regularity. The insufficient and contaminated town water supply was blamed for the spread of the contagion. Dr. Henry O. Howitt, Guelph's Medical Officer of Health at the turn of the century, estimated that every fall, half the city's hospital beds were filled with victims of typhus. In 1909, when the city changed its water source from local rivers and wells to the Arkell Springs, typhoid was virtually eliminated.

Very few people, especially the long term and elderly patients, were able to pay for their up-keep,. Funding came from various sources including government grants, bequests and anonymous donations. The sisters augmented not only their income but also their food supply by growing produce and keeping livestock on the property. An 1886 leger entry shows that wool was sold for \$77.75. Another entry from 1888 shows that total expenses for the Hospital and Home totalled almost \$7,500.

In the winter months the Sisters went door to door in the country 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 the City of Guelph, St. Joseph's was only eligible for a grant

of \$200 since it lay outside the city limits.

Each summer, a group of women volunteers organized Ladies' Day. On one particular day each year, the women rode the trolleys collecting fares. It is not known whether they received all the rider's fare or simply donations.

Fund raising for health care with the active participation of volunteers has always brought out

innovative and fun ways for citizens to participate in helping their hospitals. Whether it is the current Festival of Trees, the Hot Foot Happening or the Ladies' Day of the early 1900, fund raising events rely on the generosity of the community whose assistance makes it possible to continue to help those in need.

A 1916 article in the local paper notes "the selling of flowers on the street by young ladies with gaily coloured automobiles as centres" of the activity. 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 items as was a high tea tent boasting "white napery and the sheen of fine china". Ice cream, however, was far and away the favourite item and the awarding of the ice cream order was dutifully printed in the paper each year. The four to five hundred dollars raised by Ladies' Day during the 1880's and 90's accounted for an impressive portion of the hospital's annual revenue.

Trolley car, circa 1900, City of Guelph.

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— photo courtesy of Guelph Public Library archives

The Guelph Daily Mercury AND ADVERTISER

The following is an exert from the Guelph Daily Mercury...

Foot Taken Off.-- About 9:30 on Tuesday evening, as Mr. P. Fitzpatrick, an employee in Geo. Williams' bakery, was crossing the G.T.R. track at Gordon st., he met with an accident by which he lost part of his left foot. On seeing train No. 10 going east, he stopped till it passed, but did not notice a freight train coming west at the same time. When the east train was past he went to cross the south track, and as he put his foot on the rail he saw the train, but not being able to get out of the road he was caught and his left foot was badly crushed. He was first carried to his home on Freshfield street, and then to St. Joseph's hospital, where the foot was amputated at the instep. Today was the first day the new building was used, and in the first hour the operating room was called into requisition to amputate Fitzpatrick's foot in. He is suffering considerable pain at present, but otherwise is doing as well as could be expected.

Fundraising at the turn of the century was absolutely essential to the simple day-to- day functioning of St. Joe's. This was long before a Ministry of Health supplied operating or capital project funds. The monies raised through the local volunteer initiatives could not be stretched to begin construction of the new building needed by the 1890's. The limited space and outdated facilities in the existing buildings were inefficient and labour intensive. Higher admission rates worsened a difficult situation. By the late 1890's the public was beginning to lose its fear of hospitals. Bishop Dowling of Hamilton agreed to over-see the financing of this latest project. Completed for the enormous sum of \$38,027.74, the new facility was opened in October of 1895.

The following account from the Guelph Daily Mercury highlights the many modern features of this new hospital - features that we would now just take for granted.

After commenting on the spacious and airy wards and private rooms, the article continues.."The chloroform room is fitted with all the necessary appliances for administering anaesthetics to patients before being taken to the operating room...a very large and lofty room, well lighted from each side and also from large skylights. Extra lights of ground glass are introduced to temper the light as the occasion may require...The new hospital and the original building will be lighted by electricity. The wiring and insulating being done in the most approved manner...While the wards are very neatly and comfortably furnished, some of the private ones...are even elegant and would grace any bedroom in any first class house. The beautifully finished bedsteads, the

dainty coverlets, the soft and roomy sofas and the pretty grates and fireplaces give such a high idea of comfort as to almost tempt one to get sick so as to experience it."

As part of the new chapel, Mrs Hudson and her daughter, of Omeath Ireland donated two large pieces of stained glass believed to have been made by the Robert McCausland Company of Toronto, still in operation today.



The glass panels were moved in 1960 to the wall outside the Chapel of the current Hospital and Home. In 1995, it was evident that the panels were suffering from their exposed position and St. Joseph's Health Care Foundation asked for permission to restore the glass and include it in their new Donor Wall. The two panels, one of St. Joseph and one of the Virgin Mary have been relocated again and will form the centre panel of the Foundation's Donor Wall in the front lobby of the new Health Centre.

Chapel in the 1895 building. The two stained glass windows on each side of the alter are now part of the donor wall.

First lay graduating class. Graduates have black bands on their caps. Mrs. Hanlon is second from right, seated in the middle. 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 that 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 halfday each month was allotted for free time. - the 40 hours work week was a long way away.

St. Joseph's Health Centre - A New Beginning, 2002

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.

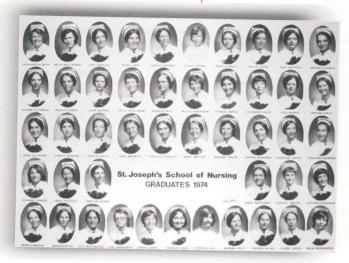


Photo of the last class to graduate from St. Joseph's School of Nursing – 1974. Nurses were immediately recognized by their uniform which changed little over the years. A blue Oxford-cloth dress was covered by a white apron with a gathered waist line . Although the early kerchief bodice was replaced 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.

While a number of the province's nursing schools closed in 1939, St. Joseph's 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. A special feature of the school was the tunnel that connected the Hospital to the residence so that students would not have to go outside in inclement weather or at night. The St. Joseph's Training School for Nurses continued to operate there until the last class graduated in 1974. Nursing

Artist's sketch of the School of Nursing – 1949.

schools in the province then came under the jurisdiction of community colleges.

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ST. JOSEPH'S NURSES' RESAM

By 1923 it was evident that St. Joseph's had outgrown the exisiting buildings. While the structures were sound, space was severely limited and modern facilities were lacking. Construction of two new wings on the south end of the building and the renovation of the existing space was completed in 1924 at a cost of \$130,000. In thirty years, costs had quadrupled. The new design featured sunrooms Photo of one flooded with light and a of the sun rooms in the new wing. pleasant view for convalescing

patients. These solaria were sealed off from the rest of the building by thick masonary walls to provide safe fire escape routes. In addition, two large balconies on the east side allowed patients to "take the air."

The new 104 bed facility was praised by the "Canadian Hospital", a health publication of the day. Terrazzo and rubber-covered floors were safer and did not squeak under foot! Two suites had private toilets and all private rooms were outfitted with bed side call buttons and telephone receptacles. The article also remarked on the "devices which are conducive to the comfort and convalesce of the patient" bed side tables and portable lamps. How different from the 2002 St. Joseph's Health Centre where every room has it's own toilet, bed side table, telephone and computer jacks and large windows with shelves for plants or books.

The new X-ray room was considered the most innovative feature. Its equipment, installed for less than \$4,000, was described by the hospital as "more that 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

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Residents taking in the fresh air on the veranda. Circa 1926. 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 that they make appointments in advance.

As well as adding on two new wings to the hospital, considerable improvements were made to the older sections of the building. Sinks,

dressing rooms and a diet kitchen were added and the nurses call system extended. Eight years later, after more improvements in 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 of 1934, St. Joseph's opened its Physiotherapy Department and in the following year, a medical library.

Operating costs in the 1940's continued to rise and both city hospitals were forced to hike their daily rates, though they remained lower than most hospitals in Ontario. Still, patients could enjoy a private room for \$5.00 a day and newborns were cared for in the nurseries for \$1.00 a day.

For many years, the Sisters operated a farm which supplied many of their needs as well as those of the the patients'. Since the early days when the famous cow wandered onto

the property, cows were kept thereby securing their own milk supply. This continued until 1948. Chickens were numerous and eggs plentiful in the old days. One year the Sisters undertook to raising ducks and geese but they made so much noise, disturbing the patients, that the project had to be abandoned. All the vegetables were grown in the garden and enough potatoes, parsnips, onions, turnips and carrots were stored in the root house to last through the winter.

DUE TO INCREASED OPERATING COSTS St. Joseph's Hospital and Guelph General Hospital

ANNOUNCE THE FOLLOWING RATES:

Effective Monday, October 20, 1947

WARDS \$3.50 per day SEMI-PRIVATE ROOMS 4.50 per day PRIVATE ROOMS 5.00 to 7.00 per day NURSERY 1.00 per day NURSERY (after mother is discharged from hospital) 3.00 per day

RATES INCLUDE: Room, meals and routine nursing care. There is no charge for the day of discharge if the patient leaves hospital by 3 p.m.

The above rates are lower than the prevailing rates in most hospitals in the Province. In order that these low rates may be maintained, arrangements for payment of hospital accounts must be made in advance, or not later than time of admission to hospital.

Guelph General Hospital — St. Joseph's Hospital

The first barn was burned down early in the century and rebuilt with further expansion in 1941 to accommodate 10 to 12 cows and 4 horses. Eventually as help became scarce during the war, and the district became more residential, the fields and barns were abandoned.



The post-war baby boom necessitated expansion of hospitals everywhere. While the solaria were converted to semi-private rooms and the nursing students' rooms were vacated, more space was needed and so another building project was embarked upon.

The front of St. Joseph's Hospital – 1951. The street sign, in front of the bus, reads Hospital Street. The name was changed to Westmount Road several years later.

A five storey addition with a main entrance on Westmount Road opened in 1951. The main features of this latest building reflected the high birth rates of the day, with a new third floor obstetrical department boasting two labour rooms and two care rooms. Each infant had its own cubicle with piped in oxygen. Two special nurseries were also constructed: one for premature babies and the other for "suspect babies" isolated for special cases. The new ward also featured a

> room for the preparation of formula and a conference room for educating new mothers on the care of their infants. Fathers, who at this time did not participate in the birthing process, had a special waiting room on the floor.

> The obstetrics department remained open until the end of 1972 - the last baby was born on Christmas Day that year. Since that time obstetrics has been only offered at the Guelph General Hospital as part of the rationalization of

services demanded by the Ministry of Health. The pediatrics department closed soon after for the same reason.

Nurses and infants in the busy nursery.

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Mechanical devices and conveniences, taken for granted now, were welcomed additions to the 1951 building. Every room was

> equipped with an emergency call system and an automatic electric elevator was much appreciated by staff and visitors alike. Special rooms were outfitted with pipedin oxygen thus eliminating the need to wheel tanks of gas around the hospital and removing the risk of tanks running empty.

While the Hospital was thus able to keep pace with the demographic changes and the demands

Artist's sketch of St. Joseph's Home with the new chapel on the right. of technology, the House of Providence remained an inadequate facility. It was too small to serve the elderly who were living longer. Improvements and renovations had been undertaken over time but nothing could be done to transform a 95 year old building to meet the needs of the day. After the building was deemed a possible fire hazard, several local citizens' groups pressed for a new building.

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In 1956, plans for the construction of a new 216 bed Home for the Aged were announced. The Sisters of St. Joseph would finance

> half of the 2.5 million construction costs and the Province agreed to pay a portion of the costs but a grant from the City of Guelph did not materialize. A plebiscite to approve a grant of \$540,000 was defeated by 851 votes.

The project went forward anyway with several major changes. Under the new plan, a section was set aside for the chronically ill. Over 100 beds each were allocated for the elderly and for the "Chronic

Care" areas. In May of 1959, the residents of the House of Providence moved into a completed section of the new structure. The historic house and its name gave way to the new St. Joseph's Hospital and

Demolition of the 1862 and 1877 House of Providence – 1959.

St. Joseph's Health Centre - A New Beginning, 2002

Home. The old angelus bell was displayed in front of the Home as a visible reminder of the past.

The new residence featured a craft room, barber shop, and a library. Simple features such as wide halls, handrails and elevators gave greater freedom to residents with limited mobility.

> In 1973 significant renovations were completed in ten different departments throughout the Hospital. Respiratory therapy, Medical Records and the Admitting Department were improved under Operation Facelift. In addition the first full time Recreationist, Director of Volunteer Services, and Speech Pathologist were hired.

Increased activity was seen particularly in the Chronic Care area. The first wheel chair accessible van was acquired through the assistance of the Kiwanis Club of Guelph. This opened up a new experience for many of the residents and patients as outings became a regular activity with both local trips

and longer excursions to places like the ROM, Ontario Place and Niagara Falls. What used to be a rather quiet area became a beehive of activity with expanded crafts and recreational programs such as the "Pub" night.

During this time, the Hospital and Home engaged in the development of a wide range of community outreach programs. Many of the services for patients and their families allowed for shorter hospital stays and greater personal independence. For example, the Hospital prepared (and still does to this day) the meals for the Red Cross Meals on Wheels program which permited individuals to stay in their own residences longer. At the same time, an out-patient dialysis program was started as well as a Relative Respite Program. Full time Social workers were added to staff as well, counselling both in-patients and out-patients and families.

Resident and Sister in the corridor of the new St. Joseph's Home. Technological changes in the 70's saw many advances in diagnostic services. In the Respiratory Therapy Department, new precision instruments measured air volume in the lungs. Because of the cost of equipment and training of staff, hospitals specialized in certain areas. Besides respiratory, St. Joseph's specialized in radiography and many types of sophisticated surgery including hip and knee replacements and ophthalmology.

In 1983, the Boards of the Hospital and Home amalgamated to form the Board of Trustees of St. Joseph's Hospital and Home. Over the years, the two facilities had functioned as distinct but integrated units. While serving very distinct populations, they nevertheless shared maintenance, kitchen, heating and many other services. While this produced some economies, full integration resulted in consolidated management, enhanced communications and increased cost efficiencies.

In 1986, with the planned redevelopment of the whole site, a major capital campaign was initiated. The new acute and long term care facility had the potential capacity for 500 beds, double its existing bed numbers. Elinor Caplan, the Minister of Health came to celebrate with a sod turning. As part of the celebrations of that year, the 125th anniversary, the Federal Government financed the restoration of the old historic cemetery. St. Joseph's staff under the direction of Mr. Roy Bock undertook this important task.

> The audiology department was opened in October of 1986 with a focus on pre- school children and the elderly. A special dedicated mammography unit was installed, significantly reducing the amount of radiation used in breast exams. This highly sophisticated piece of equipment was the only one of its kind in the province of Ontario. The first

Alzheimer Day Program in the province opened in 1986 as well. Focusing on education, support, and care giver relief, the program is designed for those individuals with moderate to severe memory loss due to Alzheimer Disease or other forms of dementia. The

Speech and Language Pathology camp, summer 2000.

St. Joseph's Health Centre - A New Beginning, 2002

Small group therapy, Speech and Language Pathology. program became a model for others in the region.

While planning for the future, St. Joseph's continued to address the concerns of the present. In 1989 the Community

Speech and Language Program was initiated to offer assistance to

developmentally-delayed preschoolers and adults with communication difficulties. The emphasis in the program was to assist the parents or caregivers by giving them techniques which would facilitate communication. In addition, a new vascular laboratory to assist doctors in diagnosing circulatory problems in the

arteries was opened and the first laparoscopic cholecystectomies were performed. An interesting fact was that, although 16 beds were closed, there was in increase in the occupancy rate accompanied by a decrease in the length of stay. A Yag laser for eye treatments was also installed thanks to the Lions Club of Guelph.

> 1991 was another celebratory year for St. Joseph's with the 130th anniversary coinciding with the formation of St. Joseph's Health Care Foundation (Guelph). 1991 also saw St. Joe's switch to an elective surgical hospital in a effort to improve efficiency, better utilize highly trained staff, and generally improve patient care.

A major innovation in health care administration came with the formation of the St. Joseph's Health Care System in 1992. Members of the system, comprised of the hospitals and homes in Guelph, Kitchener,

Dr. Kuder explaining the new phacoemulsification unit to Jason H. McElry, president of Guelph Lion's Club – 1998. Dundas, Hamilton and Brantford, were strengthened by the sharing of a common mission. Each institution retained its individuality while receiving the benefits that come from co-operation and innovation.

1992 also saw the Government of the day endorse the Blundell Report as the framework for the development of hospital services in Guelph. This led to the establishment of the Guelph Hospitals' Implementation Steering Committee. With St. Joseph's role defined as a "long term care centre of excellence", the process of preparing for the future began. The difficult job of defining services and writing a functional program were the prelude to hiring an architect and producing the plans for a building that would not only reflect the philosophy of care but also be a homelike facility for the residents.

From 1993 until 2001, the long process of preparing to transfer all acute care services to the Guelph General involved many staff and many, many hours of time. Concurrently St. Joseph's continued to provide

> excellence in the many services it offered to the community while, at the same time, adding new, much needed services.

> > The Respiratory Rehabilitation Out Patient Program for individuals with chronic lung diseases was initiated. An Ultrasonic Guided Prostate Biopsy Program to assist in the early detection of prostate cancer and a

state of the art Bone Densitometry unit for the detection and treatment of osteoporosis were started in 1993.

The very first geriatrician in Guelph was appointed as Director of Longterm Care at St. Joseph's in 1993 as well. With the new emphasis on long term and chronic care and rehabilitation, this was an important step.

The mid to late 90's were period of transition for St. Joseph's. Great emphasis was placed on developing the new model for long term care.

Construction of the new St. Joseph's Health Centre from Westmount Road, fall 2001. Elm or the Enhanced Living Model was three years in the making and represents a shift from a exclusively medical model to a primarily resident centered model. At the same time this internal restructuring as taking place, St. Joseph's continued to deliver high quality acute care in great co-operation with the Guelph General Hospital. This time also saw many long time employees leave St. Joseph's either to transfer to GGH or to retire.

> New community alliances were formed with groups such as Lourdes High School, Grand River Conservation Authority and the Guelph Field Naturalists. A program to naturalize a portion of the grounds at the south west corner near

A special moment between resident and staff.

the old historic cemetery was initiated. This program continues to this day and will be expanded upon as development of the grounds around the new facility occurs.

The first two years of the 21st century saw the last acute care service move to the Guelph General Hospital. Many tears were shed as old friends moved on and many areas of the old St. Joseph's fell silent after more than 100 years of activity.

In the midst of the sorrow for what was, there was also rejoiceing in the promise of what is to be. The new St. Joseph's Health Centre will continue the spirit of those first sisters who came to Guelph 142 years ago. They did not know what the future would be but they served the citizens of Guelph and Wellington County with love and Life experienced compassion, firm in their faith and sustained by the Spirit. The staff of the new St. Joseph's Health Centre are the

inheritors of that tradition of caring. Their challenge will be to live up to the Sisters' example and to their motto - "It is an honour to serve."

Reyor

(1000

Georgina

4)

Written on

the walls of the first

floor after all acute care

services were transferred - 2001.

Kaber

Mary

Sanvido

90 vears

Vice



Elm in Action Enhanced Living -Helping each other grow

ith the change in role from acute and long term care to solely long term, medically complex, rehabilitation and community outreach, a change in philosophy from a medically oriented to a resident focus philosophy was imperative.

Staff, residents, families and volunteers worked together for over two years, exploring different models and developing a care philosophy unique to St. Joseph's. ELM (enhanced living model) is a resident focused, more social model, where the residents and their families are encouraged to participate in the decisions that affect their life at St. Joseph's. Since the majority of residents live at St. Joseph's for the remainder of their lives, staff recognized the need to develop opportunities that would permitting residents to live a spiritual, purposeful, respectful, and independent lifestyle, in as homelike a setting as possible.

Leo, a resident, and Simba, one of the 'home' cats, sharing a hug.

> — photo courtesy of Hellingman Communications

Supporting and encouraging responsible leadership

Creating a homelike environment

Fostering positive relationships between residents, families, staff and volunteers

Honouring the uniqueness of the individual

St. Joseph's Health Centre - A New Beginning, 2002



Encouraging and supporting individual spirituality

Celebrating 150 years of Service

2002 marks the 150th anniversary of the arrival of the Sister's of St. Joseph in the diocese of Hamilton.

ounded in 1650, in France, on the Feast of St. Theresa of Avila, the Congregation of the Sisters of St. Joseph consisted of six women, only one of whom could read and write. From the beginning their's was an apostolic order - women called to minister to the needy outside convent walls. The order flourished until the time of the French Revolution when five of their number were sent to the guillotine and the rest forced to disband. With the fall of Robespierre on July 28, 1794, the worst excesses of the revolution came to an end. Mother St. John Fontbonne - she escaped execution only because of the end of the revolution - was asked to reorganize the scattered remnants of the Sisters. The order flourished again and in 1836 at Havre de Grace, France, six sisters set sail on the Feast of St. Anthony for the new world. Arriving in

> St. Louis, Missouri, the sisters immediately set about setting up schools and ministering to the poor. Within 5 years their numbers had grown to 48 and they had expanded to Carondelet, Missouri and to Philadelphia even though some of their number had died from the plague or tuberculosis. In 1851 Sister Delphine Fontbonne and three

companions arrived in Toronto to establish an orphanage. Within one year they expanded again as the need for their ministry was

evident. Arriving in Hamilton, they set up another orphanage and worked unstintingly in the cholera sheds during the outbreaks of that dread disease in the mid 1850's.

In 1861 they answered the call to come to Guelph.

On November 22nd, Sister Martha von Bunning, accompanied by Sister Ignatius Piggott and Sister Alphonsus Cashen, established the first area hospital and home for the aged. These were the first in a long line of Sisters of St. Joseph to serve the citizens of Guelph and surrounding area.

On the occasion of their 150th Anniversary in the Diocese of Hamilton, a plaque in the new St. Joseph's Health Centre was dedicated to the many Sisters who worked at St. Joseph's Hospital and Home from 1861 to 2002. Their leadership in, and commitment to, providing the best possible health care to all is an extraordinary example of mission in action, of compassion and of caring.

DEO GRATIAS

Sketch of the original motherhouse, St. Louis, Missouri – 1836.

91



Sister Anne Anderson Sister M. Ursula Barry Sister M. Irene Bester Sister Rita Bohnert Mother Austin Bolan Sister M. Leona Bolger Mother M. Irene Browne Sister M. Gabriel Buckley Sister M. Marcia Buckley Sister M. Petronilla Buckley Sister Audrey Burns Sister M. Agatha Butler Sister M. Annunciata Campbell Sister M. Augustine Campbell Sister M. Geraldine Campbell Sister M. Alexia Carroll Sister M. Celeste Carty Sister Dympna Cunningham Mother M. Alphonsus Cashen Sister Leo Cass Sister M. St. Bernard Clohecy Sister M. Ambrose Collins Sister M. Callista Cronin Sister M. Holy Cross Daly Sister Felicitas Cushing Sister M. Clotilde Dales Sister M. St. Edmund Dales Sister M. Euphrosyne Dandeno Sister M. Jeanne D'arc Ducas Sister Aloysia Dearling Sister M. Mildred Dietrich

Sister M. Ruth Ditner Sister M. Regina Doherty Sister Francis Clare Donaghy Sister M. De Sales Donovan Sister M. Chabanel Duffy Sister Bonaventure Fagan Sister M. Ancilla Fagan Sister M. St. Norbert Farrell Sister M. Praxades Fischer Sister M. Rita Paul Fischer Sister M. Bertille Gaffney Sister M. Venard Gage Sister M. Mercedes Gallagher Sister M. Adelaide Godfrey Sister Katherine Godfrey Sister M. Dolorosa Godfrey Sister M. Francis Joseph Golden Sister M. Loyola Golden Sister M. Augusta Gormican Sister M. Virginia Hanlon Sister Patricia Hanlon Sister Teresa Carmel Hartnett Sister M. Helena Heenan Sister M. Ursula Heenan Sister Grace Heffernan Sister M. Angelica Heffernan Sister M. St. Mark Hergott Sister M. Joan Holman Sister M. Annette Holubeshen Mother M. Benedicta Horan Mother Francis Joseph Hughes



Sister Alice Isabelle Sister M. Isidore Johnston Sister M. Elizabeth Jones Sister Anne Karges Sister M. Assumption Kehoe Sister M. St. Alban Kelly Sister M. Visitation Kelly Sister M. Anita Kennedy Sister M. Patrice Kennedy Sister M. Victorine Kennedy Sister M. Anita Kennedy Sister M. Alberta Kenney Sister Mary William Kimpfel Sister Carol King Sister M. Genevieve Kirvan Sister M. Constance Knipfel Sister Dora Kruis Sister M. Josepha Lambertus Sister M. St. Paul Lardie Sister M. St. Julien Lawlor Mother M. Phillip Lenaten Sister Gabriel Lynch Sister M. Anastasia Lynch Sister Bernardine Madden Sister M. Ursula Madden Sister Geraldine Madigan Sister Ann Marshall Sister M. Leonie Martin Sister M. St. Basil McClarty Sister M. Placidia McConell Sister Victor McGill Sister M. Marcelline McGinnis Sister M. Elizabeth McGlogan Mother M. Emerentia McIntosh Sister M. Kathleen McKenna

Sister M. Roberta McKenna Sister M. St. Joseph McKenna Sister M. Regis McLaughlin Sister M. Isabelle McLeod Sister M. Valeria McLeod Sister Anne McLoughlin Sister Joan McLoughlin Sister Cordula McNamara Sister M. Monica McNamara Sister M. Pauline Monaghan Sister M. Norine Mooney Sister Diane Oberle Sister M. Bernadette O'Brien Sister M. Josephine O'Connor Sister M. St. Patrick O'Connor Sister M. Crescentia O'Donnel Sister M. Vincentia O'Donnell Mother M. Antoinette Ogg Mother M. Vincent O'Hagan Sister Kathleen O'Neill Sister M. Dominica O'Neill Sister M. Teresa O'Neill Sister M. Joan O'Sullivan Sister Mary O'Sullivan Mother M. Thecla Padden Sister M. Rose Pautler Sister M. Liguori Petrie Sister Ignatius Pigott Sister Mary Austin Reding Sister M. Redempta Rigby Sister M. Canisius Riordan Sister M. Evelyn Riordan Sister M. Sebastian Rogers Sister M. Eusebia Rooney Sister Alphonsine Rosenblatt

St. Joseph's Health Centre - A New Beginning, 2002

Sister M. Francis Rossignoli Sister Mary Jane Ryan Sister Maria Goretti Salvador Sister M. Victor Schaefer Sister M. Consolata Schill Sister M. Audry Schmidt Sister Beatrice Schnarr Sister M. Paula Schnurr Sister Terri Sexton Mothe M. Martina Shanahan Sister M. Dolores Sherry Sister M. Justina Shields Sister M. Adrian Smith Sister M. Bernardine Smith Sister M. St. Urban Smythe Sister M. Aquinas Stack Sister Mary Grace Stevens Sister M. Jude Stradiotto

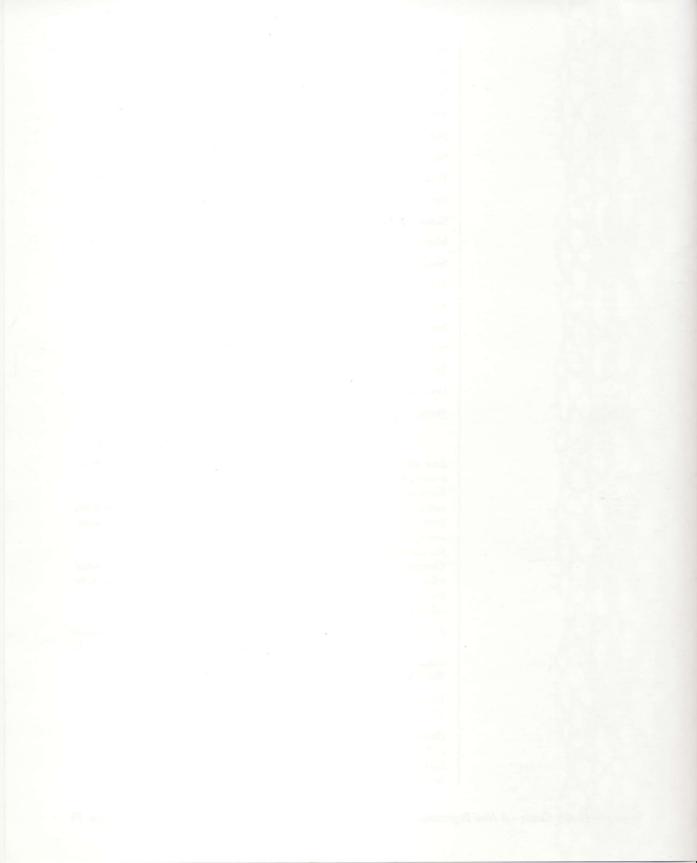
Sister M. Christina Straus Sister Mary Andrew Stroeder Mother M. Dympna Sullivan Sister M. Raphael Sweeney Sister Regina Tobin Sister Margaret Mary Tovell Sister M. St. Lawrence Towler Sister M. Patricia Travnor Sister Elizabeth Ann Tubb Sister M. St. Leonard Turnbull Sister Patricia Valeriote Sister M. Rita Wand Sister M. St. Thomas Warren Sister Mary Daniel Weadick Sister M. Frances Wickham Sister M. Francis Xavier Ruth Sister M. Barbara Zister Sister M. Benigna Zister

Lace, due to fashion dictates, was brought into being to help stabilize the French economy in 1665. A small factory began in LePuy France, the city in which The Sisters of St. Joseph had been founded in 1650 and lace makers from Venice instructed the French workers. By 1670, again to stabilize the economy, an edict was declared that only French laces be worn. By the 1680s a profusion of lace was being used by both sexes. It was found on hats, boot cuffs, shoes and bedding to name a few. Lace making became a means of support for many women during this time. Cloistered Sisters might have made lace for use by the clergy, Country women would sell it to the wealthy and the Sisters of St. Joseph used it as a means to raise funds for their living costs as well as to aid in their work with those living in misery and suffering from the plague, poverty and hunger.

Lace became very much in demand and lace making so popular that the government prohibited any new lace making because there were very few servants left to serve the rich. St. Francis Regis interceded for the lace makers and the law was overturned. Today he is the patron of lace makers.

The popularity of Lace continued until the time of the French Revolution (1781). The craft was associated with the aristocracy and that meant the guillotine.

During a pilgrimage to France with a group of Canadian Sisters of St. Joseph, our archivist, Sr. Doreen purchased the lace that you see used in this publication from LePuy in honour of the Sisters' 150th anniversary. It continues to be a symbol for Sisters of St. Joseph's around the world.



Reaching Out to the Community

ecognizing that many individuals can stay within the community if they have the necessary supports to allow them to do so, St. Joseph's initiated its first Day Program in 1984.

Since then three distinct programs focusing on different groups have served more than 5000 individuals and their families. The Ministry of Health and the Canadian Accreditation Council on Health Services has cited the St. Joseph's Adult Day Service as a leader in its field. The staff has been acknowledged for its dedication and commitment to client centred care and for managing some of the most challenging referrals. Staff committment to research and forging links with the community have been cited as some of the strengths of the programs.

Vital components of the program are family support, education, and counseling for both participants and families.

Out 'N' About Centre - opened in January 1984

Twenty participants participate daily in a variety of programs designed for the frail elderly. Although living independently in the community, they require a more therapeutic environment due to physical frailty, social isolation, mild memory loss, or depression.

Encouranging conversation through sharing everyday activities.

Dear "Little Girls"

H... & 9 would like to say a big "Thank You" for all you have done for us to make our lives more pleasant. You are the best! 9 am quite sure we would never have made it through the past years without all your love and caring. We will be forever grateful! Keep up the good work. With all our love.

Alzheimer's Day Centre - opened 1986

Opened jointly with the local chapter of the Alzheimer's Society in 1987, the centre offers a unique program for people with moderate to severe memory loss due to Alzheimer Disease or a related dementia. An important aspect of the program is care giver relief since caring for individuals with dementia is a 24 hour a day task.

Acquired Brain Injury Program - opened 2001

Designed specifically for those individuals - mainly young people- who have suffered a traumatic injury through such things as a motor vehicle accident, fall, or sports injury, the

> program provides opportunities to individuals to participate in meaningful recreational activities and practice skills, and help them maintain an optimum level of physical, emotional and social functioning. As with the other day programs, education and respite for family members are very important components.

A young participant paints a special picture for the new program area.



St. Joseph's Volunteer Association

rom the earliest days of St. Joseph's Hospital, members of the community have assisted the Sisters in carrying out their mission. Many early patients volunteered for years, grateful for the care they had received. In 1895, seven ladies collected money and furnishings for the newly constructed hospital.

Early fundraisers included "Ladies Day" and the field days held on the grounds of the Ontario Agricultural College. In 1897 the records tell of a Diamond Jubilee Celebration and Bazaar held in the City Hall on June 4th and 5th in aid of the Hospital. Since this was the Diamond Jubilee of Queen Victoria's reign, part of the programme consisted of three tableaux depicting "important historical events in the life of Her Majesty."

In 1935, the Ladies Auxiliary of the Hospital was formed. Records show a membership of 60 ladies the first year. Over the years, the Auxiliary was responsible for funding the Blood Bank, as well as purchasing equipment such as Obstetrical Tables, Whirlpool Baths, Stryker Frames, and Recovery Stretchers.



Having your hair done always makes you feel good.

A Master clock system which synchronized all the clocks in the building was a gift from the Auxiliary in the 1951 addition. The system was installed with a main time-keeper, a self winding device, that hung in the front lobby for years. It was considered remarkable in its day.

> 1960 saw the creation of a new Volunteer Organization to benefit the residents of the Home and Continuing Care Units. The St. Joseph's Guild began with 120 members. Annual events such as the Spring Tea and the Giant Rummage sale allowed the Guild to purchase equipment for physiotherapy as well as supplies for the craft and wood working areas.

> > The first Director of Volunteer Services was hired in 1973, the same year as

Operation Facelift. The Volunteer Department and the Volunteer Organizations worked closely together identifying new areas for volunteer service, streamlining the orientation process, and implementing new training programs.

In 1983, the two Associations amalgamated to form the St. Joseph's Hospital and Home Volunteer Association. Today, as in the past, volunteers continue to work in many areas of the facility including recreation and horticultural therapy. The Association also runs the Silver Maple Coffee and Gift Shop, the Tuck Shop and the Beauty Salon. Over 300 volunteers both junior and senior through their caring and commitment bring a extra level of comfort to the residents.

Sharing tea and conversation in St. Joseph's Home, circa 1960.

St. Joseph's Health Care Foundation (Guelph)

n 1988, with planning well underway for a new St. Joseph's Hospital, a capital campaign to raise over \$7.7 million was begun. Under the leadership of Mr. Harry Worton, the campaign had achieved considerable success, reaching nearly 80% of its goal, when the Ministry of Health put all hospital construction in Guelph on hold as it considered the wider question of health care delivery throughout the province.

In 1999, the need was seen to create a Foundation to manage the funds that had been raised for the construction of the new St. Joseph's. In addition, the Foundation was charged with assisting the Hospital and Home through the purchase of equipment, support for programs, and the funding of research that would better the lives of patients and residents.

In 1993, in co-operation with the Foundation of the Guelph General Hospital, the highly successful Hot Foot Happening 24 Hour Relay for Health was launched. This proved to be the most successful special event in the city, raising over \$1.2 million in its nine years.



St. Joe's Ambu Bags strutting their stuff at Hot Foot.



Ringing in the Christmas Season with trees, trees and more trees. River Run Centre, Festival of Trees – 2001.



Ingrid Von Cube, founder of Taste of Guelph, sampling one of the many delicacies at Taste 2000.

The Foundation also initiated several other successful fund raising initiatives such as the Lights of Honour, Lights of Love Christmas campaign held concurrently with the Festival of Trees.

Over the years, due to the extreme generosity of the people of Guelph and surrounding area, the Foundation has been able to purchase more than \$4,000,000 in equipment, equipment that makes a difference to the lives of the patients and residents of St. Joseph's.

In 1995, with the unveiling of the Donor Wall, the Foundation was able to publicly thank all those many individuals who had supported St. Joseph's Hospital and Home for many, many years.

With the question of hospital redevelopment settled and the plans well underway for the St. Joseph's Health Centre, the Foundation again collaborated with the Foundation of the Guelph General Hospital. The Partners for Better Health Campaign to raise \$11,000,000 for the two health care facilities was launched in the fall of 2000.



Robert Ireland, Chair of Partners for Better Health, receiving a special thank you gift for his untiring efforts.

In February of 2002, thanks to tremendous volunteer effort and great generosity by the community, the campaign went \$1.2 million over goal. The monies raised by this campaign will be used at St. Joseph's for beds, room furnishings, gardens for the residents and their families, and for special quality of life programs.

Even with a new, fully furnished building, the Foundation will continue, with the co-operation and support of the community, to provide much needed support to all areas of St. Joseph's Health Centre.

St. Joseph's Health System

ne of the largest health care systems in Canada, the St. Joseph's Health System is based on the healing mission of the Sisters of St. Joseph of Hamilton. Committed to promoting the dignity of all, to living the gospel through healing the sick, feeding the hungry, and sheltering the homeless, the System at the same time fosters economic responsibility and co-operation.

Member organizations offer a variety of services from acute care, teaching, research, long term care and rehabilitation to community outreach, mental health, palliative care, and complex medical care.

Member organizations are:

- St. Joseph's Lifecare Centre, Brantford
- St. Joseph's Villa, Dundas
- St. Joseph's Health Centre, Guelph
- St. Joseph's Healthcare Hamilton
- St. Mary's General Hospital, Kitchener
- SEN Community Health Care, Hamilton

Over \$100 million in medical equipment and nutritional supplies were purchased in 2001 through the St. Joseph's Purchasing Group, made up of the members of the System plus 130 other health care organizations from Saskatchewan to New Brunswick.. The enormous savings generated through this co-operative effort result in significant cost savings re-directed to patient/resident care.

Did you know that through the Purchasing group, one urology laser, costs \$99,000 instead of \$164,000. That is a saving of \$65,000, a saving that can be used to purchase other equipment or to go directly to patient care.

Research that makes a difference

"Our research isn't from the ivory tower: it deals with the broad implications of service provided and how they can affect a person's quality of life. Our programs provide tangible results that can be put to immediate use in local communities." Kevin Brazil, PhD, director, St. Joseph's Health System Research Network.

The "Care of the Seriously III in the Community" Study being conducted in 2002 is an example of the kind of hands on research in which the network excels. Funded by the Canadian Health Services Research Foundation and the Ontario Ministry of Health and Long Term Care, the study is looking at palliative care services available to the seriously ill and their primary care givers. It also examines the care givers' reactions to delivering care to their loved ones.

Data is being collected through in-home interviews, telephone surveys and an analysis of service use patterns as recorded in the Ontario Ministry of Health data base. Gathered in six counties in Ontario with a rural and urban mix, the findings will allow service planners to see gaps in service from one county to the next and help them understand what services families really need and find useful. This will aid in the development of new services based on real need and not theory.

In Guelph, St. Joseph's has links not only with the Research Network but also with the Nursing and Geriatric Programs at the University of Guelph. These linkages have resulted in two nutritional studies on long term care residents - studies that will prove valuable not only to residents at St. Joseph's but to Long Term Care facilities across the country.

St. Joseph's, Guelph is also one of 20 facilities involved in a pilot study regarding Geriatrician- Nurse Practitioner teams in long term care facilities. Geriatric professionals can identify and address many problems in the frail elderly population, problems that affect their quality of life. Since there are not enough geriatric professionals in the province to meet the ever increasing need, the findings from this study will be used to improve the delivery and quality of services while reducing costs by increasing local access to assessment and care.

Vision

St. Joseph's Health Centre, Guelph, is a leader in providing outstanding health care and support to residents, patients, families and the broader community we serve.

Mission

In the spirit of the tradition of service of the Sisters of St. Joseph and the healing mission of Jesus Christ, we serve Guelph and Wellington County as leaders in long term care, complex continuing care and rehabilitation and contribute to improved knowledge and innovative service delivery through education and research.

Our Values

We are committed to:

Cherish the sacredness of life at all stages. Provide exemplary care and support to residents and patients. Respect the dignity of residents, patients, families, staff and volunteers.

Respond to the needs of the community.

Promote team spirit to strengthen the quality of care and work life.

Collaborate both within St. Joseph's Health System and with others within our community to meet health care needs.

Be fiscally responsible in the stewardship of our resources.

Embrace the challenges and opportunities of the future.

Respect the diverse cultural, spiritual and religious backgrounds of those we serve.







St. Joseph's Health Centre

- A New Beginning, 2002

Guelph, Ontario