



# 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.

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# Projet de la *Grande* Histoire des hôpitaux catholiques au Canada

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

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## Spirit of a Caring Community 75 Years of the Fort St. John Hospital\* 1931-2006

by  
Chandra Wong

Source: Courtesy of Fort St. John North Peace  
Museum and the Fort St. John Hospital  
Foundation

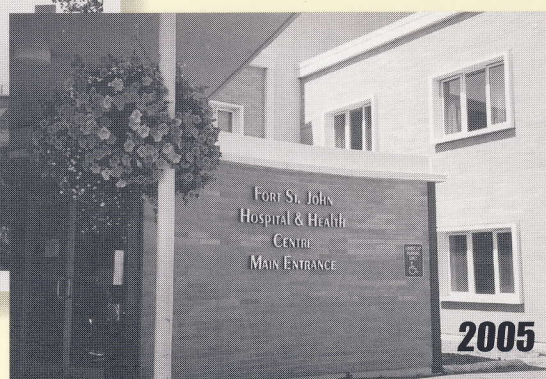
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\*hospital was called Providence Hospital from 1931-1973.



# SPRIT OF A CARING COMMUNITY



## 75 Years of the Fort St. John Hospital 1931 - 2006

*Written and designed by Chandra Wong  
Published by the Fort St. John Hospital Foundation*



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## Dedication

*T*his history is dedicated to all the people who bring the spirit of caring to the Fort St. John Hospital, making it the caring place it has been from its humble beginnings during the Depression years to the present.

In researching this project, the writer contacted many people to share their memories of events and people of yesteryear. Every effort was made to present an accurate portrayal of the hospital's history, based on research and those memories.

The particular memories that rise to the surface depend on the experiences of the person being interviewed. If memories of an event differ, please consider this an opportunity to share more memories of the 75 years the hospital and its staff have been caring for the people of Fort St. John and the surrounding communities.



*Providence Hosp Fort St John Jan 1935*

*"It's not just the doctors at the hospital who make life better, but every member of the staff, from nurse to janitor, who chooses to do one small thing to make a patient's life that much better."*

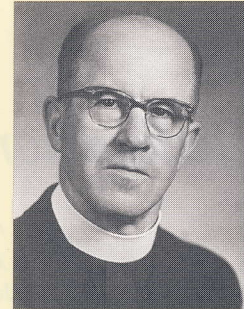
— Tom Wilkinson, July 1996 Alaska Highway News editorial



## *For want of a hospital...*

In the early 1930s, medical care was not easy to come by for people living on the north side of the Peace River. Fort St. John was a small collection of homesteads at the time and the nearest hospital was 60 miles to the southeast in Pouce Coupe. Residents knew a hospital was needed and built the Grandhaven Red Cross Outpost Hospital in early 1930. The two-bed hospital, run by nurse Anne Roberts, was helpful but soon the growing population outstripped the capacity of the little log hospital.

The community encouraged Catholic priest, Father Luc Beuglet, OMI to carry out a project to build a larger hospital and he approached the Sisters of Providence for their help. The Sisters of Providence were well known for their charity works in frontier areas. They often worked in rural areas, where there was little in the way of basic services. Frequently the Sisters had to refuse requests they were not equipped to accept.



Fr. Luc Beuglet

### *Initial request refused*

Despite Father Beuglet's request to come to Fort St. John, the Sisters had said they did not have enough resources or personnel to spare for a hospital. But Father Beuglet made a trip to Midnapore, a community outside Calgary, to see the Sisters and his zeal convinced the Sisters to visit Fort St. John in March 1930.

After meeting the people of Fort St. John and seeing their great need, the Sisters were moved to act, trusting in God's Providence that the necessary resources and people would be found. They agreed to run the hospital as long as a resident doctor was available.



*Providence Hospital Fort St. John.*

Srs. Catherine de Bologne and Agatha in front of the under-construction Providence Hospital, ca. 1931.

### *Sisters travel to Fort St. John*

Sr. Marie Gilberte and Sr. Agatha left Midnapore and traveled to Edmonton in the beginning of February 1931. Sr. Catherine de Bologne joined them, as they picked up supplies for the new hospital. Sr. Marie Gilberte was Sister Superior and administrator, Sr. Catherine was a trained nurse and Sr. Agatha was the cook and housekeeper for the hospital.

Father Beuglet met the Sisters in Dawson Creek and on the evening of February 17, 1931, they crossed the Peace River to reach Fort St. John.

*Trusting in the wilderness for the wilderness*

**T**he hospital was still under construction when the Sisters arrived. Construction began after a resident doctor arrived in the community in June 1930. In the mean time, the Sisters attended the sick and injured in their homes, as well as in the Bowes' Hotel, a log building without electricity or running water. Father Beuglet gave up his quarters provided by the Catholic church, so the Sisters had a place to stay until the hospital was completed in August.

The hospital was constructed on 10 acres of land, donated by town father and local businessman, C.M. Finch. The two-floor building was constructed by volunteers, with enough space for 15 beds, an operating room, maternity ward, intensive care unit and kitchen. The Sisters' quarters were located in the third floor attic.

### **Hospital opens**

Two more Sisters, Srs. Gérard Majella and Alfred de la Croix, arrived and the hospital was officially opened in September 1931. Dr. Hubert Brown was the only doctor. Initially, the hospital started with only 10 beds. The remaining beds would wait until money could be found to buy them.

The Sisters of Providence recorded their first patient as Alfred Kingsley, an accident patient with cut arteries and tendons. Kingsley had to be tied down with hame, or harness, straps for the operation because the hospital did not yet have proper anaesthetic or equipment.



The Providence Hospital's founding Sisters in Fort St. John in 1931.

*"They seemed awfully anxious to get the hospital, so I think it was important. The Sisters of Providence were just waiting for a doctor to arrive, so they could have the go-ahead for the hospital to be built. Everybody was pleased that's for sure."*

*"People came from miles and miles around. That was the only hospital north of the Peace. He was the only doctor north of the Peace."*

*"It was the whole country, the whole area. People came from all around. And lots of times people came to pick up daddy and take him, maybe a couple of days, by horse and wagon or horse and buggy, out to a patient that was in labour or something like that. So he did travel a lot around, but that was all you could do."*

— Bunty (Brown) Jordan, daughter of Dr. Hubert Brown,  
who was nine-years old when the family came to Fort St. John.



## A doctor for the wilderness arrives

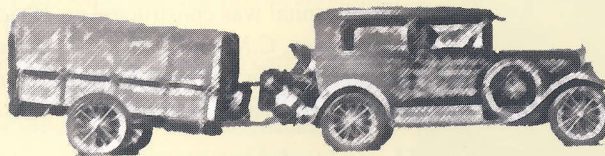
The infamous Peace “gumbo” mud was drying in the sun as a 1928 two-door Chevy and trailer passed through Fort St. John’s dirt streets on June 30, 1930. Dr. Hubert Brown, his wife Winnifred and five young children were nearing the end of an overland journey that covered over 4,000 miles. It had taken a month to drive from Toronto to Edmonton and another month to reach Fort St. John.

The Browns did not stop in Fort St. John. They kept pushing west, looking for an ideal camping spot, as Dr. Brown documented in the point form notes of his diary of the trip:

*“Traveled (sic) right west past FSJ, past Grand Haven to a hillside on 1/4 of a Mr. McLeod. Win and I took a big walk over the hillside and surveyed our possible future home. Magnificent view of Peace and beyond, and mountains to the west. Tired.”*

While the Browns were resting, rumours swirled like dust on the wind that a doctor had arrived in the area and, more importantly, was planning to stay. The Sisters of Providence had already agreed to run a local hospital, but a permanent doctor was still needed. A group of businessmen quickly confirmed the rumours and construction on the country hospital began.

Dr. Brown greatly enjoyed camping and horseback riding. The area’s wilderness may have appealed to his love of the outdoors, encouraging the family to stay. The doctor’s favourite hobby was gun collecting, making him a valuable addition to a community that relied on guns for food and safety.



The Brown family’s 1928 two-door Chevy and trailer.

### Working in the North Peace

Working with the Red Cross nurses stationed at hospital outposts in Grandhaven, Rose Prairie and Cecil Lake, Dr. Brown tended to the illnesses and injuries of the local residents. As the only doctor north of the Peace River, Dr. Brown travelled as far as Fort Nelson and Moberly Lake to help patients in need.

Concerned about drinking water quality, Dr. Brown started typhoid inoculations in the school and introduced the idea to put iodine in the water to help people affected by goiters.

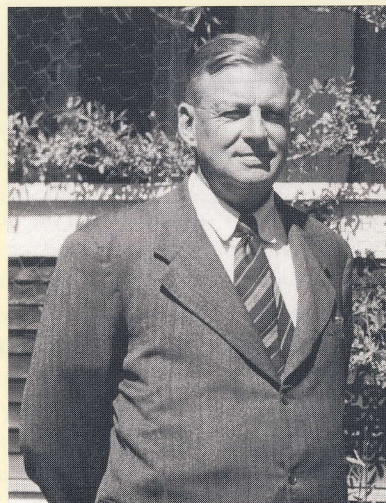
To supplement the family income, Dr. Brown accepted a position as Federal Indian Agent in early 1934. The job also meant more opportunities for him to explore and map the north country. But in 1945, he suddenly lost his hearing due to an injury suffered during the First World War. The deafness forced him to quit both jobs, and he and his wife moved to Parksville, BC. He lived there until his death in 1950.

*“I don’t know why they (my parents) decided to settle in Fort St. John. I think daddy had a romantic spirit. Things were really tough. It was the beginning of the Depression and he was adventuresome and the Frontier seemed very exciting, I guess.”*

— Bunty (Brown) Jordan,  
daughter of Dr. Hubert Brown.

*“Hubert Brown was just the right man for the job at that time — a friendly man who liked the north and didn’t feel isolated here as the most professional man.”*

— Gardner Russell in a tribute to Dr. Brown,  
from *The Peacemakers of North Peace*



Dr. Hubert Brown

## Trusting in Providence

Father Beuglet chose well when he approached the Sisters of Providence for help in setting up the hospital in Fort St. John. Since their founding in 1843, the Sisters of Providence have been striving to meet the basic needs of people that are not otherwise being met. Helping those in need – the poor, homeless or sick – was the Sisters of Providence's calling.

Foundress, Mother Emilie Gamelin, was well-known for the energy and resources she put into helping orphans and the elderly, as well as the impoverished, in Montreal, Quebec. The Sisters of Providence were so named because they relied on God's Providence, or loving care, to supply whatever was required to help the needy they served.

In the days before public services like health care or education, the Sisters often responded to requests for help in rural and remote communities where trained help was scarce. Requests for help were many and the Sisters had to turn down many petitions for support.



Some Sisters take a break in front of the hospital in 1955. From left, Sister Mary Patrick, Superior, Sister Philomena Mary, Sister Georges-Wilfred, and Sister Genovefa.

### Meeting many needs

Their missions often met many needs in the communities they served. In Fort St. John, the hospital housed orphans, as well as cared for the sick and injured.

The Sisters of Providence came from a variety of backgrounds. Many of the first Sisters were from the province of Quebec and spoke French. Jeanne Clelland remembers the Sisters speaking to her in French during the time she boarded at the hospital to attend school as a young girl. Other Sisters came from other parts of Canada and spoke other languages beside English.

The 73 Sisters of Providence who worked at the hospital in Fort St. John all shared a trust in Providence, and a desire to help others. In common with many pioneers of the area, they also possessed a spirit of adventure.

*"When Fr. Luc Beuglet, OMI was trying to persuade our Sisters to accept the hospital, the Mother General told him, "We just don't have enough Sisters to take on another mission." He said to her, "I promise you that if you take this hospital, the first three lay nurses that you have will become Sisters of Providence," and that came true.*

*"Miss Laura Murphy became Sr. Marcellina and then there was Ellen K. Gaunt, who became Sr. Priscilla Marie and then there was Christina McIntyre, who became Sr. Anne of the Sacred Heart. So Fr. Beuglet really had pull with the Almighty, I guess, to be able to keep a promise like that."*

— Sr. Margaret McGovern, Sisters of Providence historian

*"The Sisters always had the welfare of the persons, who were ill or sick in mind and heart. Often times they never thought of themselves. They would work evenings and nights with only a few hours of sleep. That was the self-sacrifice that they felt"*

— Sr. Josephine Mainka (Sister Ann Emily), Providence Hospital administrator from 1964–68



## Giving themselves to the community

The Sisters worked in all areas of the hospital: administration, nursing, housekeeping and cooking. Regardless of their specialty, each Sister touched the hearts of the patients and staff with whom they shared time.

Running the hospital was a team effort for the Sisters. To single out any of the 73 Sisters who worked at the hospital is a difficult task; however, Srs. Agatha, Marcellina and Philomena Mary are a few of the Sisters remembered with fondness.

### **Sister Albertine Ladouceur (Sr. Agatha)**

Sister Agatha was one of the first Sisters to arrive in Fort St. John. While she had wanted to become a nurse, her Superior suggested she would be more valuable as a cook. She became an excellent cook and was known for her kindness to the patients. She once gave some live chickens to a family in need and they named one of the hens, Agatha, in her honour.

*"Daddy went to the kitchen and he smelled prairie chicken cooking on the stove and he looked at Sr Agatha and said, "But Sr. Agatha, it's not hunting season, you know." She looked at him and said, "But doctor, it came right up onto the steps. We have to protect ourselves."*

– Bunty (Brown) Jordan, daughter of Dr. Hubert Brown.



Sister Agatha

### **Sister Laura Murphy (Sr. Marcellina)**

In July 1932 Laura Murphy was the first lay nurse to fulfil Fr. Beuglet's promise and become a Sister of Providence. She later returned to Fort St. John using her good listening skills and sense of humour as Superior and administrator. She was responsible for administering construction of the new hospital in 1962.

*"During the time we were building the new hospital there was a bit of friction between some of the people of the town. They didn't really want the hospital built by the Sisters ... She was just there with them and they finally accepted it, but it was a little struggle for her but she did extremely well. She was just a real peacemaker."*

– Sr. Josephine Mainka (Sr. Ann Emily),  
Providence Hospital administrator from 1964–68



Sister Marcellina

### **Sister Josephine Cullinan (Sr. Philomena Mary)**

Of all the Sisters, Sr. Philomena Mary's service to the people of Fort St. John was the longest. She worked as a registered nurse on two separate occasions and upon retirement returned to Fort St. John and visited with the sick and injured. Her vibrant personality and Irish wit kept many entertained.

The local Shriners and Knights of Columbus presented her with a plaque recognizing her service to the community in 1974.

*"She cared as much for the staff as the patients; she was gentle with everyone and visited with everyone. It didn't matter what walk of life they came from."*

– Bev Alexander, licenced practical nurse  
at the hospital from 1969–1970, 1971–1997

*"I hadn't been there very long and Sr. Philomena Mary, the operating room supervisor, didn't know very much about me when a patient comes in with a fractured dislocation of his ankle and ... she comes into the OR and watches me very carefully. So I go ahead and finish and ... she says, "Oh you can do anything!" So I never had any more trouble with Sister."*

– Dr. Jack Temple, general practitioner at the hospital from 1962–1980



Sister Philomena Mary

## The country doctor adored by many

Doctor Garnet Kearney came to Fort St. John during the summer of 1934, having heard about the growing community's need for a second doctor. He quickly became Fort St. John's beloved country doctor who helped residents in and around Fort St. John for 25 years.



Dr. Garnet Kearney with Cecil Lake Hospital Outpost nurses, Vi Woodward, left, and Agnes Ayling.

He lived humbly in a one-room building near the hospital and rarely billed for his services. He traded his skills for a few sacks of vegetables or a side of beef. He lived through the good and the bad that came to the area, just as the people he served.

### Operating over the radio

In late 1939 Kearney's expertise was tested, when he performed a tense operation over wireless radio to save the life of a young man suffering from a brain cyst in Watson Lake.

No road spanned the 600 mile (965 km) distance between Watson Lake and Fort St. John at the time. The lake was beginning to freeze making conditions impossible to land a floatplane.

Wireless operators in the north were alerted to clear the lines and Jack Baker, who would later become president of J.W. Baker Insurance, listened intently as the good doctor prepared him to carry out the operation on the patient.

"Doc's steady voice calmed me a little," said Baker

in an Alaska Highway News tribute to Kearney. "I was shaking like a leaf. I started to cut and... I asked Doc what to do about all the blood. 'Just wipe it up and keep the incision clear so you can see where you're going,' he said."

Baker completed a successful operation thanks to Kearney's knowledge and calm attitude.

### "Doc" and his old Ford

Nearly as memorable as "Doc" was his old Ford, which at times Kearney had to drag his foot to brake on hills. When the window broke in the car door, the ever-practical doctor filled the hole with an x-ray film.

In 1960 North Peace residents held a Dr. Kearney Picnic in Taylor on the banks of the Peace River celebrating Kearney's 25 years of service. Over 1,000 people attended, including many of Kearney's flock, the 1,030 babies he delivered over his long career caring for the people of the area. The booklet presented to Dr. Kearney that day can still be seen in the North Peace Museum in Fort St. John.

*"I would single out tonight one who is present here and who exemplifies in the highest degree the ideals of the healing profession – a man who for so many years carried an almost intolerable load on his shoulders – with whom I am proud to have been associated – and who I would point out to any young doctor a figure of unselfish devotion to his fellow men and who I count as a friend. I refer of course to Dr. Kearney."*

– Dr. George Cormack at the 1960 tribute dinner to Dr. Kearney

*"We used to be amused with Dr. Kearney because he had this funny little "bug", as we called it, a little car. He was always under it or fixing it or something. Patients who wanted to see the doctor would walk up to him. He would crawl out from under the thing, wipe his hands on his sleeves and have a look. As I remember he was a nice guy."*

– Bunty (Brown) Jordan, daughter of Dr. Hubert Brown



## Early struggles overcome

The Sisters' faith helped them deal with recurring challenges of scarce financial resources, low water and food supplies, and the threat of fire. As the community grew, finding enough room for an increasing number of patients also became a challenge.

### Feeding patients

Patients ate homegrown food which was either donated, provided as a "payment" for services or raised on the hospital's grounds in the garden or the barn. The Sisters would often go on trips to outlying homesteads asking for whatever could be spared for the hospital larder. Whether it was preserves, butter, eggs, chickens, a side of beef or wild game, settlers would do their best to help. The Sisters and hospital staff picked and canned wild berries and garden vegetables in preparation for long winters.

The weather did not always cooperate. Hospital records show the 1938 growing season was not a successful one.

*"Not a drop of rain has fallen all spring. There is no garden. Everything is dry. The seeds sown seem to be carried by the wind."*

Residents were thankful for the Sisters' efforts and offered what they could to support the hospital. Promises of work like chopping firewood, sewing and mending were exchanged for cash payment for treatment and medicine.

The hospital's stucco exterior in 1932 was the result of such a barter. Local resident, Lloyd Callison was one of the volunteers who helped with this project.

"Well, it was hard work but we stuck with it. Two men mixed up the cement and another crawled up a ladder and reached down for the bucket," said Callison. "It was fairly hard but I was young – 16 years old."

### Keeping warm and watered

The Sisters' hospital records document winters as "rigorous" in the early 1930s. Extreme cold and deep snow made travel difficult. A wood-fed heating system, donated by the Hudson's Bay Company kept the edge off frigid North Peace winters. One entry in hospital records indicates the extreme winter conditions sometimes felt:

*"December 1933 – Outside temp. – 60 degrees below (–51°C). Inside temp. 60 degrees above (15°C). Vegetables frozen in cellar."*

Many problems with the water supply and the sewage system were encountered. In the beginning, water was trucked in by barrel, until a 180-foot well was dug in the summer of 1931. The well water ran short at times so a cistern was used to collect run-off and water was trucked in again. Electricity was provided by a generator until 1942, when Canadian Utilities hooked up the hospital because the generator was too weak for hospital activities.

### Financial challenges

The hospital was provided with a provincial grant when it opened officially, followed by regularly scheduled payments for running the hospital. Much of the money went towards heating, electricity, equipment, supplies and staff wages.

The Women's Auxiliary was, as it still is today, an important financial supporter. Through bazaars and raffles, members raised money and contributed much needed hospital equipment.



The Sisters of Providence often travelled the countryside by horse and wagon to gather supplies like food and firewood, and promises of help in support of the hospital.



## Helping with a "Personal Touch"

Women from the community attended the first meeting of the Providence Hospital Women's Auxiliary on February 24, 1932. The Hospital Auxiliary history states the volunteers met to discuss how their efforts could "best help the hospital with a 'personal touch' as well as helping provide the material things so badly needed."

The election of officers was held and the executive committee included Mrs. C.M. Finch as president, Mrs. J. Somon as vice-president, and Mrs. J.H. Cummins as secretary treasurer. Additional executive members included Mrs. Donis, Mrs. Olgilvie and Miss Laura Murphy.

Despite the Depression, the women were able to raise \$400 in their first years to assist the Sisters. They also donated linens, an x-ray machine and other medical equipment. One of their first projects was to beautify the hospital grounds.

### Many items donated

The auxiliary was, and still is, a mainstay of the hospital. They donated the first electric fridge in 1944 to store large quantities of meat and vegetables. In 1953 a donation of a washing machine made life easier for staff. More recent support includes medical equipment like a fetal monitor and furniture for the palliative care unit. In 1983 the auxiliary raised nearly \$14,000 for the hospital's first helipad, which increased the speed, safety and ease of transporting workers injured in the field.

The auxiliary's volunteer support today provides comforts for hospital patients and their families. They circulate a cart of toiletries, snacks and reading material for bed-ridden patients. Rental TVs are available, due to the auxiliary's efforts. Members take pictures of newborns and operate a gift store on the hospital's main floor. In 1965 they initiated the Candy Strippers and still sponsor the similar Junior Volunteers program today.

*"The spirit was such that the people all wanted to help. They knew that they needed the hospital and they needed to do something to help out. It was all volunteer. They didn't get paid at all."*

— Sr. Josephine Mainka (Sister Ann Emily),  
Providence Hospital administrator from 1964–68



Cutting the ribbon to open the Hospital Auxiliary gift shop in 1985. From left, Toolie Hamilton, Belle Bremner, Lucy Sheck, Irene McLean, all life members, and then-president Winona Davidson.



## Remembering the “Old Hospital”



An army stretcher and two strong men help move patients between floors.

### Stairway makes for tight squeeze

*“We had many inconveniences like the narrow stairs to climb and no elevators, but you never heard the people complain. They were always gracious and thankful for what they had.”*

– Sr. Pearl Oster (Sister Casilda), Registered Nursing Assistant at the hospital from 1955–1957

*“...you could get a stretcher up that stairs if you had somebody on each end. So you had to round up the men or round up a visitor or two to help you. The people of the community, the men, they were so good they never ever refused. They just jumped and came to do things like that.”*

– Barbara Godberson, registered nurse at the hospital from 1954–55, 1958–1993

### Making room for everyone

*“At times the hospital was very crowded but the patients were very kind and never complained about the crowdedness. There was a time when we had to put children on cots between adult beds in a ward of four beds. We’d always seem to make room for another patient that was admitted whether it was on the table in the obstetric room or on the floor in sleeping bags.”*

– Sr. Pearl Oster (Sister Casilda), registered nursing assistant at the hospital from 1955–1957



Rooms may be over-crowded in the growing community, but patients never complained.



“Nana” Mead takes care of René Wolfe, Maureen Frocklage and Ronnie Wolfe in the nursery in 1955.

### Birthing babies

*“It was different back then. When women living at North Pine or Cecil Lake were expecting a baby, they never knew what the weather was going to be like, so days before their due date they’d come to the hospital and just stay there until they went into labour.”*

– Jeanne Clelland, boarded at the hospital to go to school in Fort St. John from 1932–33

*“At a busy time in the month, I would maybe have four women in labour. One on the operating table without a bed and one in the case room without a bed and then you’ve got another one sitting in the rocking chair at the end and it’s not her first baby – sometimes they go fast. It even got so I’d go to someone who was going to be sent home that morning and say, ‘I’m sorry to bother you but would you mind putting your housecoat on and I’ll give you an easy chair, because I need your bed.’ It was like playing Chinese checkers with people.”*

– Alice O’Neill, nurse at the hospital from 1957–1985





Operating room, ca. 1931.

## Case Room miscalculation

*"When the hospital was being renovated, the Sisters stressed the need for a good, roomy case room in which to meet with patients and talk about their medical cases. When the hospital was finished, the Sisters were inspecting the additions. Everything was to their satisfaction except there was no case room. One of the Sisters turned to the contractor and asked about the case room. He took them to a little space under the stairs and said, 'There's lots of room here. There's lots of space for all kinds of cases.'"*

*"So they had to cut the operating room in half to incorporate the case room. Both rooms were rather tight and when you had to do a forceps delivery, you had to open the door behind you to get the extra length you needed."*

– Dr. Jack Temple, general practitioner  
at the hospital from 1962–1980

## Feeding patients

*"When I worked in the old hospital building, we had potatoes planted all the way from where the admitting office is right now to the road by the school. They were all dug and used in the hospital. They (the Sisters) did that to make both ends meet."*

– Alice O'Neill, nurse at the hospital from 1957–1985

Phyllis Doetzel, assistant cook and housekeeper from 1933–35, remembers wading through the snow to deliver the trays of meals to the aboriginal patients who were housed in tents behind the hospital. At the time the patients preferred being in tents to being indoors.



Sr. Phillipe Cesaree prepares breakfast with the help of Winnie Houle, ca. 1958.



Christmas, ca. 1955, at the old Providence Hospital is a time of fun and games for all.

## Celebrating Christmas

*"The staff all came in and helped, so that was great. I did a lot of cooking for the dinner because it was extra above what the girls in the kitchen did. Staff would come from x-ray and all the other offices to serve and mix drinks. We had lots of help. It was fun and we served lots of people. When the Sisters were there, they used to serve the drinks which was a big deal because they served Martinis."*

– Dorothy Callison, Director of Dietetics  
at the hospital from late 1960s to 1985

*"There was always a marvellous Christmas dinner for the staff and their spouses. The Sisters always had a reception before dinner and Sr. Mainka made the best Martinis I've ever tasted."*

– Dr. Jack Temple, general practitioner  
at the hospital from 1962–1980



## *Providing compassionate care*

**I**n the early 1900s in the North Peace, nurses often were the only ones available to help the sick or injured. They also provided necessary midwifery skills to women in the area. Trained nurses in the area were always ready to give a hand when needed, even before the hospital outposts and the hospital were built.

### *Looking for adventure*

What many of these nurses had in common was their inner strength, compassion and a spirit of adventure to travel to and live in, what still is today a remote part of the country.

Many of the early nurses were trained overseas before they came to the Peace. In the 1920s, Kathleen Peck, an English nurse settled with her family in Hudson's Hope providing nursing services for many years. Also from England, Mae Birley settled in Fort St. John on her brother's homestead. Anne (Young) Roberts was hired from Wales to run the Grandhaven Red Cross Hospital Outpost. She was later replaced by English nurse and midwife, Elinor Claxton.

More nurses joined the community when the hospital was built, including Srs. Catherine de Bologne and Alfred de la Croix. Laura Murphy was the first secular nurse to join the Sisters. Along with Ellen Gaunt and Christina McIntyre, she fulfilled Fr. Beuglet's promise that the first three nurses to work at the hospital would become Sisters of Providence.

### *Public health*

Public Health nurses worked in remote areas, providing care, educating people on health issues and recommending hospital care as needed. Marge Garrett came to Fort St. John in 1938 after training to be a public health nurse. She worked as the only public health nurse in the area until she married in 1940.

### *Pioneer nurses*

Through the years many nurses have come to provide care at the hospital. Some made the North Peace their life-long home.

Violet Woodward's adventurous spirit and desire to provide nursing care to northern communities brought her to the Cecil Lake Red Cross Outpost Hospital in 1937. She worked there until it closed in 1954 and began working at the Providence Hospital in 1959 as Head Nurse of Maternity until she retired in 1972.

"She was a true pioneer for this community. She was dedicated to nursing. She was always a mover and a shaker. Even when she was in the Pouce Coupe care home, she was always organizing day trips and events. She was very instrumental in the museum, in building the care home, and on the library board. She was very much driven to perfection," recalls registered nurse Claire Harwood.

Charlotte Artemenko joined Providence Hospital from 1939 until she married in 1942. She returned to the hospital in 1947 and worked in all areas of the old Providence Hospital. In the new hospital she worked as an operating room nurse until her retirement in 1978.

Agnes Scheck came to work at Providence Hospital in 1940. She served as head of surgery with the US Medical Corps in Fort Nelson from 1943-1945 during the Alaska Highway construction. She returned to Fort St. John at the end of the war and was Head of Emergency until she retired in 1979.

"She was a damn good nurse. She used her eyes and ears and common sense, and when she phoned and told you something, you knew the situation was exactly as she described," said Dr. Jack Temple, general practitioner at the hospital from 1962-1980.



The second-floor nurses station ca. 1955, Barbara (Loucks) Godberson, right, with Bernice Beaton.



Providing assistance during surgery, these nurses were photographed by Rudy Schubert in 1958.

### ***“Ma” Murray lends a hand***

In 1947, recently-arrived Elanor Lawrence was prepared to nurse but was waiting for her uniforms to arrive. Local newspaper editor, Margaret “Ma” Murray, knocked at her door and demanded to know why Lawrence wasn’t working when the hospital desperately needed nurses. “Ma” took things in hand, and the next day Lawrence was working at the hospital with a hospital gown tied over her street clothes.

Barbara Godberson came north in 1954 in search of a challenge and adventure. She worked in all areas of nursing in the old and new hospitals until her retirement in 1993.

Winefride Johnston arrived in Fort St. John in 1954 after working at a variety of nursing positions in BC, the Yukon and Washington. During her first week of work in Fort St. John, her previous experiences helped her to react quickly to a terrible traffic accident on the Alaska Highway. Many people were seriously injured and the doctors and Sisters were away for the day.

“If I hadn’t had two years at the hospital outpost, I think I would have sat down and cried,” she said.

Alice O’Neill arrived with her husband and family in Fort St. John in 1957 and worked in both the old Providence Hospital and the Fort St. John Hospital in maternity until her retirement in 1985.

“I respected her for her total commitment to nursing. She provided the best care in the most complete manner. If someone on the maternity floor was in trouble, you wanted Alice there. Her care was delivered with a professional, superb ability. She was a wonderful nurse,” said Bev Alexander, licenced practical nurse.

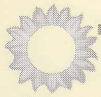
Esther Fisher was invited to work at the Providence Hospital in 1950 by Sr. Marcellina. She began nursing in Fort St. John, but she wasn’t ready to settle down. She travelled and worked in a variety of positions before finishing her career at the Fort St. John Child Development Centre.

Medical technicians provided valuable support to nurses and doctors when the Sisters turned the hospital over to the community. Elaine Marsh arrived in Fort St. John to work as the hospital’s first x-ray technician in 1960. Her first week left her with two black eyes

from a kicking patient, but she only had \$35 to her name so she “couldn’t escape back home to Manitoba.”



These pioneer nurses were honoured at the 75th Anniversary of the Registered Nurses Association of British Columbia in 1986. Back from left, Marge Garrett, Elanor Lawrence, Alice O Neill, Vi Woodward. Front from left, Winefride Johnston, Agnes Scheck, Barbara Godberson, Esther Fisher and Charlotte Artemenko.



## The U.S. Army arrives

The US Army arrived in Fort St. John in early 1942. The army had come to build a 1,500 mile (2,400 km) overland route from Dawson Creek to Alaska to protect the remote north from possible threat, after the Japanese bombing of Pearl Harbour in December, 1941.

Over 6,000 soldiers worked to construct the Alaska Highway and many of them spent time in the quiet, little farming community of Fort St. John before heading further north. They lived in a massive tent city, nicknamed Camp Alcan, between Fort St. John and Grandhaven.

The influx of people during the Second World War put a strain on the already war-rationed resources in the community and the hospital. However, the soldiers were welcomed and a much-valued relationship developed between the army and the Sisters of Providence.

### **Sisters and US Army cooperate**

The hospital helped the army during the construction of the highway. American doctors would often use the hospital's operating room, thankful to be working under a solid roof. Many soldiers came to the hospital seeking treatment for minor injuries and illnesses. During a bout of bad weather, Dr. Kearney treated 17 soldiers with respiratory problems.

In return for the hospital's assistance, the army helped the Sisters solve water and sewage problems by connecting the hospital's systems to the army's. When the hot water tank sprang a leak, the army responded to the hospital's SOS with a replacement tank that same evening.

### **US Air Force helps**

The US Air Force stationed at the Fort St. John airport also helped the hospital. The Air Force surgeon performed surgeries for the hospital as needed. He would begin at 2 a.m. so he could be at his post by 8 a.m. The Air Force also helped to connect hospital pipes to the water line from Charlie Lake to the airport.

When the soldiers departed in 1945, they left the hospital extra medicine, furniture and linen. The hospital also bought a vacated army barrack for \$500 to shelter coal from the elements.



During the construction of the Alaska Highway, a cooperative relationship developed between the Sisters of Providence and the U.S. Army and Air Force

*"That was hectic when the army arrived because it was just out of the blue that they moved in ... They spent a lot of time in town because it was close and the only town at that time. There were soldiers and labourers and everything under the sun ... Nobody had much of a clue that this was going to happen. All of sudden this was to happen and they were here.*

– Dorothy Callison, Director of Dietetics from late 1960s to 1985

*"One of the older Sisters told me that many of the US Army were young men and they were lonely for home and missed their moms. So they would find reasons to come up to the hospital. One fellow would come up and ask to have his ears cleaned even though they didn't need cleaning because he wanted a little attention."*

– Sr. Margaret McGovern, Sisters of Providence historian

## Polio epidemic strikes the North Peace

The summer of 1948 was like no other in Fort St. John. The Alaska Highway News reported a polio epidemic beginning in June 1948 with 10 confirmed cases.

The crippling disease affected mainly children and young people under 18. Residents of all ages were told to wash their hands more often, and avoid swimming pools and crowds. Many regular summer events were cancelled. The high school graduation dinner and the North Peace Fall Fair were two such events.



The "clover tank" was built at Providence Hospital to give polio patients needed therapy.

### Polio annex built

With the town quarantined, Dr. George Cormack coordinated the construction of an annex behind the hospital to isolate polio victims. With the help of the Elks Club, army doctors and others, Cormack improvised a large pool in the shape of a clover for water therapy. The polio annex provided needed therapy for patients, who otherwise had to travel to Edmonton for treatment.

The quarantine lasted four months, delaying the start of school until September 27, 1948. The cold weather brought an end to the epidemic and life returned to normal. Of the 50 patients in the area treated for polio, only one person died.

## Threatened by fire



Fire was always a threat to wooden buildings like the hospital. Rudy Schubert captured a fire drill in 1958.

Throughout its many renovations in 1932, 1938 and 1942, the early Providence Hospital was always threatened by fire. The fire marshal suggested many improvements to keep patients safe, but eventually the cost was more than the Sisters could afford.

The fire marshal ordered the third floor to be closed in June 1950 unless improvements were made. The Sisters decided they would have to close the hospital because they did not have the necessary resources to make the required changes.

With the help of William Blackstock, Anglican minister and hospital board member, residents organized to keep the hospital open by sharing the financial responsibilities with the provincial government and the Sisters.

*"They (the Sisters) trusted in prayer: Most of our rural buildings were built of wood and because the Sisters were poor, they couldn't afford to replace them with more modern structures. The Sisters prayed daily for protection against fire in their buildings and they trusted that God would look after everybody."*

— Sr. Margaret McGovern,  
Sisters of Providence historian



## Dr. George Cormack

**D**r. George Cormack was a welcome arrival to the Providence Hospital and Fort St. John in 1945. Trained as a surgeon, his arrival meant patients no longer had to travel out of the community for operations.

Cormack went to great lengths to assist people in the area. He flew his own small plane to the Halfway Reserve in the winter of 1948, when an influenza epidemic threatened the residents. He battled through the epidemic with help from a public health nurse.

Another time in 1952, he drove a horse and cutter through a blizzard to help a farmer's wife in labour, even though he was not familiar with horses.

As well as caring for his patients, this seemingly tireless man also led community planning and promoted cultural activities. He wrote and performed in dramatic plays, and encouraged others to express their creative natures.

When he left Fort St. John in 1957, Cormack was presented with a testimonial list of nearly 1,000 signatures from people grateful for the help they received from him.

*"He was a wonderful person. He was very, very clever. He was such an education to me, when I worked for him ... People missed him when he left. He started a private school in Edmonton when he left."*

— Jeanne Clelland, friend of Dr. Cormack

*He did not suffer fools gladly. He did not want to put up with nonsense from anybody. So when you'd phone in, he'd want the facts ... I'm sure he stayed up most of the night reading because from the front window of the hospital on the second floor, I could see where he lived and the lights would be on at that house until three or four in the morning.*

— Barbara Godberson, registered nurse  
at the hospital from 1954–55, 1958–1993



Dr. George Cormack

## Drs. Dixon, Westover and Stefanik

**B**y 1957 Fort St. John was beginning to swell with the growth of its fledgling gas industry. The village's optimistic outlook matched that of two young doctors, Keith Dixon and Gary Westover, who were taking over Dr. George Cormack's practice. The two classmates had just finished their internship at the Royal Alexandra Hospital in Edmonton and were keen to use the knowledge they had learned to treat their own interesting cases.

### ***Cormack satisfied***

Cormack was encouraged by the young doctors. He sold them his equipment and stopped practicing as soon as they arrived. In 1958 fellow graduate, Dr. George Stefanik joined the doctors. Stefanik had stayed for an extra year to study surgery. The community was expanding and the possibility of providing the north with some of the specialties of a city was beginning to look like a reality.

*"The two new doctors came and it was their first assignment. Were they ever generous ... giving of their time, being on call in an emergency ... Instead of generous maybe I should say self-sacrificing. Dr. Stefanik was a wonderful surgeon too. He would do the surgeries and the other doctors would assist him."*

— Sister Evelyn M. Dechant (Sr. Damiana),  
registered nurse at the hospital from 1960–64, 1966–68

## Margaret “Ma” Murray

*T*enacious and outspoken, Margaret “Ma” Murray was always ready to support the hospital. She and her husband, George, owned and operated the first local newspaper, The Alaska Highway News.



Margaret “Ma” Murray

As editor, “Ma” was never afraid to speak her mind, in person or in print. Throughout the 1950s her desire for a new hospital to be built and run by the Sisters fueled much debate.

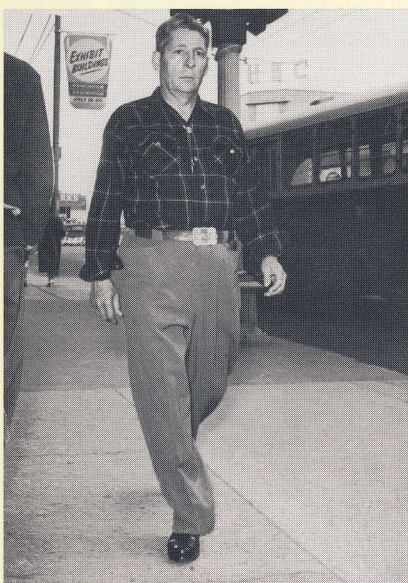
*“I didn’t believe it at first but then I saw it actually happening. She (“Ma” Murray) would come up to the hospital on a weekly basis and go around and visit with everybody and find out what had happened to them. Why were they in the hospital? How sick were they? This, that and the other thing. She’d find out who had had babies, what the babies were and this all ended up on the front page of the Alaska Highway News. She did and I saw her do it.”*

— Barbara Godberson, registered nurse  
at the hospital from 1954–55, 1958–1993

## Ernie Carriere

*E*rnie Carriere credited “Ma” Murray for getting him into the ambulance business in Fort St. John in the 1940s.

In 1946 Carriere drove the body of a man, who had been killed at Mile 81, to the hospital. By chance he parked outside the Alaska Highway News office and the next week “Ma” got Carriere in a business that spanned many years. She even set his hours of service, so he could be called 24 hours a day.



Ernie Carriere

“So what could I do?” asked Carriere in a December, 1963 Alaska Highway News article.

Carriere was quick to fill in where there was a need in the growing community. As well as ambulance driver, he was dog catcher, plumber, undertaker, water wagon driver, parade marshall and the list continued.

He would often drive aboriginal patients and their families between the hospital and the outlying reserves.

*“When I first came to Fort St. John, there was only an in-town ambulance. For accidents out of town or on the highway, a Suburban would go pick up the patients and when it wasn’t being an ambulance, it doubled as the dog-catching van.”*

— Claire Harwood, registered nurse at the hospital from 1971–2005

*“He was very friendly. Very much of a character, this one. Very much a community man I would say, because he took on a lot of things to fill out some spots that we didn’t have in the community.”*

— Alice O’Neill, nurse at the hospital from 1957–1985



## Oil and gas industry increases pressure

There always seemed to be more patients than beds at the hospital. More pressure mounted when the petroleum industry opened up in the Northeast in 1956.

The budding industry attracted workers and their families to the area, often filling the 30-bed hospital with up to 55 patients. Industrial accidents also brought new challenges in caring for patients. Hospital resources were strained even more when the natural gas plant and connecting pipeline was constructed in Taylor in 1957.

### Third floor reopens

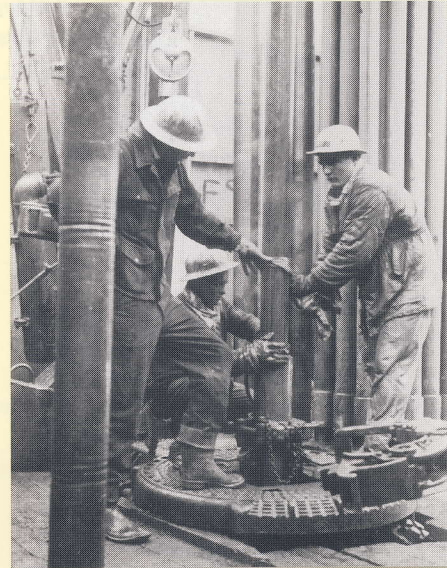
The third floor re-opened to patients in 1953, but serving the community for more than 30 years was taking its toll on the building. The floor was closed again in 1959 because of safety concerns. Trusting that God would keep them safe, the Sisters moved to the third floor, giving their accommodations on the second floor to the patients. The push was on to construct a new hospital.

*"We always had lumber and farming, but it was really slowing down. It got to the point where it was really slow. And then they hit this oil and that was a big thing. That changed things pretty much overnight. All these outfits moving in and needing trucks and people working on the sites."*

— Dorothy Callison, Director of Dietetics from late 1960s to 1985

*"The boom increased the number of accidents we dealt with and the types of accidents. Seems to me there was a burn case we had to deal with and he was shipped out right away."*

— Barbara Godberson, registered nurse  
at the hospital from 1954–55, 1958–1993



In the 1950s, a developing oil and gas industry brought additional pressures to the hospital.

## Hospital plans stalled

The community agreed a new hospital was needed. In 1956 the Sisters of Providence and the provincial government said they would fund a new hospital, but construction was held up.

A debate developed amongst a small, but vocal minority opposed to any church running the hospital. At the centre of the debate was "Ma" Murray and Phil Tompkins, a local rancher, involved in the transportation industry.

"He (Phil Tompkins) was concerned about the assets of the Providence Hospital ... going to the Catholic Church. A good part of what the Sisters had was donated by the community to the Sisters of Providence for the hospital. He certainly had no animosity towards the Sisters," said Short Tompkins, Phil Tompkins' son.

"She ("Ma" Murray) was quite vocal and I think she brought things out the way they really were. I think that she helped keep it going instead of letting it die out. She was quite vocal. There was always something in the newspaper," said Sister Evelyn M. Dechant (Sr. Damiana), registered nurse at the hospital from 1960–64, 1966–68.

### Confusion increases

Confusion also increased as various groups came forward to represent health care interests in the community. Many meetings were held to unite the groups under one organization, resulting in the North Peace Hospital Improvement District, also known as the HID.

Three plebiscites were held in 1955, 1958 and 1959. Despite positive results in all three, hospital plans remained stalled. A lawsuit was launched challenging the authority of the HID trustees. The case went all the way to the Supreme Court of Canada, but by mid-1961 Dr. Kearney officially turned the sod for construction of a new hospital, and a 68-bed hospital opened in 1962. The new hospital received full accreditation in 1967.



## Building a new hospital

*B*uilt to the west of the old hospital, the new hospital opened officially in December 1962 with ceremonies and speeches from many church, government and hospital dignitaries. The modern facility provided 68 hospital beds to the community and surrounding areas.

Moving day began December 28, 1962, starting with equipment and furniture. With the help of many volunteers, the patients were soon snug in the new building by January 2.

*"The staff carried all the kids of the pediatric ward in the old hospital into the new hospital in their arms, not on stretchers. It was no distance at all, just across a road."*

— Dr. Jack Temple, general practitioner at the hospital from 1962–1980

*"Somebody had brought a woman in from way out in the country. She was going to be having a baby and they dropped her off at the old hospital. Except there was nobody in the old hospital. It was open, but there was nobody there and I don't know if it was Alice or one of the Sisters that had occasion to be over there and found this poor woman wandering around and got her over to the right place."*

— Barbara Godberson, registered nurse at the hospital from 1954–55, 1958–1993

## George Broadhurst



George Broadhurst

*G*eorge Broadhurst was devoted to the community, and was on the hospital board for 30 years, 25 of which he served as chairman. Whether he was fixing a suction pump in the operating room or organizing Christmas parties, Broadhurst was always ready to help the Sisters, assisted by his good humor and love of life.

*"Mr. Broadhurst was chairman of the hospital board for 25 years, but he was also a handyman who helped with different things at the hospital. Whatever it was he was there, Johnny-on-the-spot and you certainly had to admire the man. Mr. Broadhurst was certainly a godsend. He was there all the time. You just couldn't do without George. He was just so devoted to the hospital."*

— Sr. Josephine Mainka (Sister Ann Emily),  
Providence Hospital administrator from 1964–68

*"George Broadhurst was certainly a character. You couldn't just walk by him ever without him telling a joke. That was just his way."*

— Lexie Gordon, worked in hospital administration from 1972 to present

## Doctors and nurses needed

*T*he modern hospital with more beds was heartily welcomed by the people of Fort St. John and surrounding areas. The oil and gas boom and construction of the W.A.C. Bennett and Peace Canyon Dams in Hudson's Hope in the late 1960s brought more people to the area.

The growing demands that come with a larger facility meant more staff was required at the new Providence Hospital. Many doctors and nurses came to the Peace region from places like Australia, the Philippines, Europe and Korea, answering the call from the Sisters of Providence. Some staff worked at the hospital for a short time, while others ended up making Fort St. John their home.

*"There are so, so many people that have come and gone. People, who came here from other countries and went back to their countries. I wish I could have a visual of all the people that went by because ... a lot of people come and go in 25 or 30 years."*

— Lexie Gordon, worked in a variety of positions  
in hospital administration from 1972 to present



## Saying a sad goodbye

During the 1960s, the new hospital continued to grow. Plans were made in 1969 to expand, especially in the laboratory and outpatient services. However, by that time the Sisters realized they no longer had the personnel to administer the hospital. They began to make plans to turn the hospital over to the community.

It was a sad day for many when ownership of the hospital, now the Fort St. John General Hospital, was transferred from the Sisters to the district and the locally-run hospital board on October 30, 1973. Many Sisters returned to Fort St. John for the ceremony and dinner, where they recalled memorable events of past days.

Sr. Josephine Cullinan (Sr. Philomena Mary), Sr. Alice Dancause (Sr. Anne Regina) and Sr. Pauline Kruchten continued to work in Fort St. John until the Sisters of Providence withdrew from Fort St. John in April, 1976.

*"It was really sad to have to leave a place. When you enjoyed the place it was even harder."*

— Sr. Josephine Mainka (Sister Ann Emily), Providence Hospital administrator from 1964–68

*"All the Sisters were very, very nice. I'm sure a lot of people missed them when they left the hospital. They, the older people I know, still often say, 'That wouldn't happen if the Sisters were still here.'"*

— Jeanne Clelland, North Peace resident

## Being a good neighbour

Much of what the hospital is today is due to the volunteer efforts of the community. During its lifetime, the hospital has been able to return the favour and contribute to the health and spirit of Fort St. John.

In the early 1980s the Meals on Wheels program was established, with the hospital kitchen playing an important role in helping those in need. Today, the kitchen still provides hot, nutritious meals to seniors and adults living with disabilities.

"We used to serve them whatever patients got for lunch. The girls usually would give them a bigger serving so if they wanted to save some for evening meal they could. We got the lunches packed, ready and somebody picked them up and delivered them," said Dorothy Callison, the hospital's Director of Dietetics from late 1960s to 1985.

The hospital also helped with the 1984 BC Winter Games, providing some meals to the many contestants, coaches and their supporters. The hospital did some of the cooking because kitchen staff were comfortable ordering and cooking large quantities of food.

"We served the lunches right from the hospital. Nurses and everybody who was off that day, all came in to help and we had those lunches served and in the box before you had time to turn around. Everybody really went out for that and it really went very, very well. It was lots of work, but everybody seemed to enjoy it. I was surprised at how many people got involved," said Callison.



Hospital staff, like Gladys Wiens in Food Services contribute to the health and spirit of the community of Fort St. John.

## Changes in medical treatments

Over time the hospital has improved its efficiency and quality of care as advances in medical technologies were made. Each new medical development has helped the medical staff provide better care to their patients.



Medical equipment like ultrasound equipment allows medical staff like Charlene Cavers, left, to give better care to patients, like Shannon Crook.

The development of the medivac program during the 1980s meant patients needing urgent care could be flown with a medical team from Fort St. John to larger centres for more advanced treatment.

A second helipad was established on the hospital's roof in 2002, providing safer and more comfortable transport of patients injured in remote areas. The helipad was funded entirely by community donations provided through the Hospital Auxiliary.

Some developments have changed the way patients visit the hospital. In the past, a hospital stay may have lasted weeks. Today, patients can often undergo major medical treatment in a day.

"Hospital stays have become so much shorter," said Lexie Gordon, who has worked in a variety of hospital administration positions from 1972 to the present.

"When critically ill patients are admitted they stay for a shorter time than they did in the past."

Technological improvements, like nuclear medicine, mean patients are diagnosed faster. Improved anaesthetics can be applied so patients recover faster from surgeries.

"The anaesthetic drugs also allow more day care operations, like tonsillectomies and removal of gall bladder, to take place. Patients aren't in the hospital as long so there's not so many beds needed," said Claire Harwood, a registered nurse at the hospital from 1971–2005.

## The move to regionally-directed care

Medical advancements have improved the care each patient receives in Fort St. John, but the costs for health care equipment and treatments have increased dramatically.

In an effort to ease the health care costs for each hospital in the north, the provincial government restructured how health care was delivered. On December 12, 2001, the Fort St. John Hospital joined 16 other health organizations to become part of one unified body called the Northern Health Authority.

"There was a lot of uncertainty in the formation of Northern Health and us joining as part of a much larger family," said Lexie Gordon, who works in hospital administration.

"At the beginning it was very much an unknown entity because it was new and hadn't existed before. There was no guarantee how and what would be done."

For Fort St. John, the regionalization of health care was as dramatic as when the Sisters turned over the hospital to the residents. Northern Health covers the northern two-thirds of the province and includes nearly 40 care facilities. With over 300,000 people living in the area covered by Northern Health, many local residents were wary of the change because there appeared to be less local control over decisions made about the hospital. Northern Health is governed by a ten-member board made of people living in the north. Their decisions reflect health care concerns for all northern communities, including Fort St. John.

"I think that people can see the benefits of sharing a lot of the effort," said Gordon.

"There are lots of times we are sharing our effort for the benefit of the rest and there are times when they are sharing their effort for the benefit of us. We have become a much larger family, but we have become a family."



## Community spirit remains strong

The Fort St. John Hospital Foundation was established in 1994 as a result of increased medical costs and the trend towards regionalized health care. A contribution from the estate of Archie Ferguson set up a significant reserve that could be used to purchase much-needed health care equipment for the hospital.

The foundation ensures that locally-donated dollars benefit the hospital directly and provides the community with an opportunity to have input into the quality of health care at the hospital.

*"Quite frankly I think the hospital foundation is exceptional. I can stack this foundation quite literally against any foundation that I've seen in all of the facilities I've worked with and it will still stack up as exceptional. And it's a combination of the dedicated leadership and the personalities involved and the depth within the community that exists in that relationship."*

— Larry Tokarchuk, chief operating officer for northeast area of Northern Health

## Celebrating the hospital's 75th Anniversary

The idea of celebrating 75 years of patient care at the Fort St. John Hospital created a flurry of interest in local history, and the many babies born in the hospital since 1931. The Fort St. John Hospital Foundation initiated the celebration and the Hospital Auxiliary, the City of Fort St. John and the District of Taylor joined the planning for the celebration day on July 22, 2006.

A search for the estimated 25,000 babies born in the hospital became a challenge that expanded world-wide. People registered from as far away as Australia, the Grand Caymans and Kuwait. The first three babies born in the hospital still live in British Columbia. They are Rose (Dart) Goodfellow, Frances (Shortt) Hodgkinson and Benjamin Anderson.

Celebrating the 75th anniversary means that some of those who built the hospital, and were patients or staff are still available to share stories about the early hospital.



## Honouring the fabric of our community

As part of the anniversary celebrations, a mural has been painted in the hospital's Maternity Ward featuring three beautiful quilts hanging on a clothes line in the Peace Country. The mural provides a way to honour community members, who are the fabric of the community.

Community residents born at the hospital can make a donation to have their name and birthdate inscribed on a permanent plaque to be added to one of the three quilts in the mural. One quilt is for those born in the original Providence Hospital; another is for residents born in the "new" hospital between 1963 and 2005; and the remaining quilt is for newcomers to the region born during and following the hospital's 75th year.

The mural was designed and painted by Fort St. John former resident, Peter Vogelaar, a professional artist and sculptor. Local artist, Margaret May's creative skill gave the quilts their realistic texture.

The names of babies born in Fort St. John's hospital over the past 75 years will help raise funds for medical equipment at the hospital through the efforts of the Fort St. John Hospital Foundation.



Rose (Dart) Goodfellow is the first to have her name added to the Fabric of the Community mural. Goodfellow was the first baby born in the Providence Hospital on September 6, 1931.

## *The hospital's future looks bright*

The hospital will have to adapt to match increasing demands for health care as Fort St. John and the surrounding communities continue to grow, says Larry Tokarchuk, Northern Health's chief operating officer for the Northeast.

"Assuming the population growth continues, I think we have to start looking at, and planning for a hospital replacement," said Tokarchuk.

"What it might look like I don't know, because it's really at its infancy but I would suggest we're going to see a new hospital in Fort St. John. Whether it's 10 or 12 or 15 years from now I can't tell you, but I think we have to start planning as if it's going to happen."

### ***Health care changes***

Health care delivery is changing. In the past, growth meant enlarging the Fort St. John hospital and adding more beds. A new hospital for Fort St. John will take care of residents in a different manner. There will be fewer beds, more outpatient services, expanded technologies and a greater capacity to deliver more services typically offered in more southern communities.



Potential doctors from Baldonnel Elementary are ready for the hospital's future.

The Fort St. John hospital will continue to reach out to its neighbours, providing health care to other communities throughout the Northeast. Specialist doctors visit communities outside Fort St. John, and Northern Health is in the process of developing a regular transportation link between smaller communities to access labs, diagnostic imaging departments and cancer treatment in Fort St. John and Dawson Creek.

### ***Pooling resources***

Northern Health is also investing in a clinical information system to electronically link northern doctors' offices together. Northern Health is developing telemedicine where medical images, like x-rays, can be transmitted to specialists in larger centres. These are some of the advantages of being part of the "larger family called Northern Health", said Tokarchuk.

"You can then have multimillions of dollars being invested into clinical information systems or the ability to transmit images and have x-rays interpreted in Prince George. All of those types of things you couldn't do as an individual facility but you can do it as part of a larger organization. All of which is happening now," he said.

### ***Training doctors in the north***

Hospital staff are also preparing to be part of the northern medical school program run by the University of Northern BC and the University of British Columbia with the aim of training doctors who want to stay in northern communities like Fort St. John.

A new Fort St. John hospital will have to serve an expanding and aging population. Health care changes are aiming to reduce the need for patients to travel to larger centres for treatment. Pooling resources with other communities will help achieve that goal. With student doctors receiving their training in northern communities like Fort St. John, the future seems bright for health care in the Northeast.



## Acknowledgements

*T*his publication would not have been possible without the help of many people who shared their knowledge and memories of the "old" and "new" hospital in Fort St. John. Their contributions make the history of Providence Hospital and the Fort St. John General Hospital come alive. Thank you.

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## Bibliography

Freeman, E. 1999 Research paper. Lure of the Canadian Northwest: An analysis of Dr. Hubert Brown's Diary, 1930.

Quesnelle, H. Date Unknown. *Precis of Chronicles of the Providence Hospital in Fort St. John from February 1931 to April 29, 1976.* Sisters of Providence.

Senior Friends of the Fort St. John Library. 1985. *North Peace Trivia.* Alaska Highway Daily News Printing Department.

Ventress, C., Davies, M., Kylo, E. 1973. *The Peacemakers of North Peace.* Davies, Ventress and Kylo. 514 pp.

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*C*handra Wong is a writer, photographer and artist with an interest in cultural and natural history. A resident of Fort St. John, she is intrigued by the unique history and challenges of living in the north. History came alive in this project for her because she was able to connect with some of the people who have made history on the north side of the Peace. She looks forward to working on future projects focused on the beauty of the Peace River.



## Photo credits

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### Photos

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Bunty Jordan: pp. 4; Fort St. John Hospital Foundation: pp. 4, 22; Sisters of Providence Archives, Edmonton Alberta: pp. front (top) (75.47-7-2), 8

## The last word

*"Even though I have retired, I can not seem to leave. The quality of care in this hospital is second to none and beats the standard of any best."*

– Jo-Ann Scriba, worked in a variety of nursing positions at the hospital from 1963–2003

*"Camaraderie is obvious in this hospital. All workers are friends. In a smaller hospital friendships develop with other nurses, housekeeping, laundry and kitchen."*

– Sharon Freeman, registered nurse at the hospital from 1975–2001

*"I just think it was wonderful because we had very little to work with, but it was amazing what we did and how happy our patients were. I wouldn't have wanted to miss those years I worked in the old hospital for all the rice in China. In that old building we didn't have a lot to work with, but we worked hard. People were content."*

– Alice O'Neill, nurse at the hospital from 1957–1985

*"The community was involved with the hospital. It was very much a community hospital. They were supportive of it and the hospital was supportive of them."*

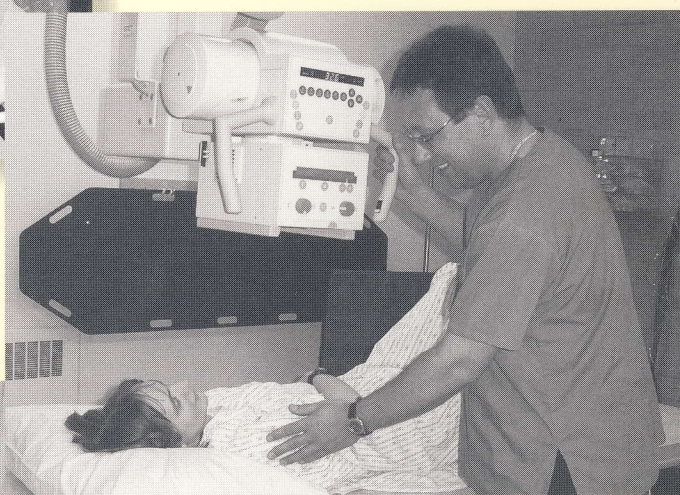
– Barbara Godberson, registered nurse at the hospital from 1954–55, 1958–1993

*"From the time that the hospital opened, people were very generous. They gave their time. They worked hard and maybe they didn't have everything they needed, but they most certainly worked hard to do the best that they could. They supported each other and affirmed each other. There was a good spirit."*

– Sister Evelyn M. Dechant (Sr. Damiana), registered nurse at the hospital from 1960–64, 1966–68

*"I was very impressed with Fort St. John hospital. I found the spirit was just great in the hospital among all the staff. They were always available when needed. It was a real pleasure to work there with those people. They appreciated the Sisters and they showed their appreciation. That spirit in the hospital in Fort St. John will always remain."*

– Sr. Pearl Oster (Sister Casilda), registered nursing assistant at the hospital from 1955–1957



*"The quality of care and compassion patients receive in a hospital this size is second to none. The ability for a hospital and its staff to deliver compassionate care is totally valued here by the patients and staff... The patients feel that care is with them. The staff are able to treat people on an individual basis.*

*"Immediate care – that's what this hospital really excels at."*

– Bev Alexander, licenced practical nurse at the hospital from 1969–1970, 1971–1997