



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.



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.

**St. Joseph's General Hospital
Port Arthur, Ontario
1958**

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Sisters of St. Joseph of Sault Ste. Marie

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ST. JOSEPH'S GENERAL HOSPITAL
PORT ARTHUR, ONTARIO

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Thank you.



St. Joseph's College
ON LAKE NIPESING
NORTH BAY, ONTARIO

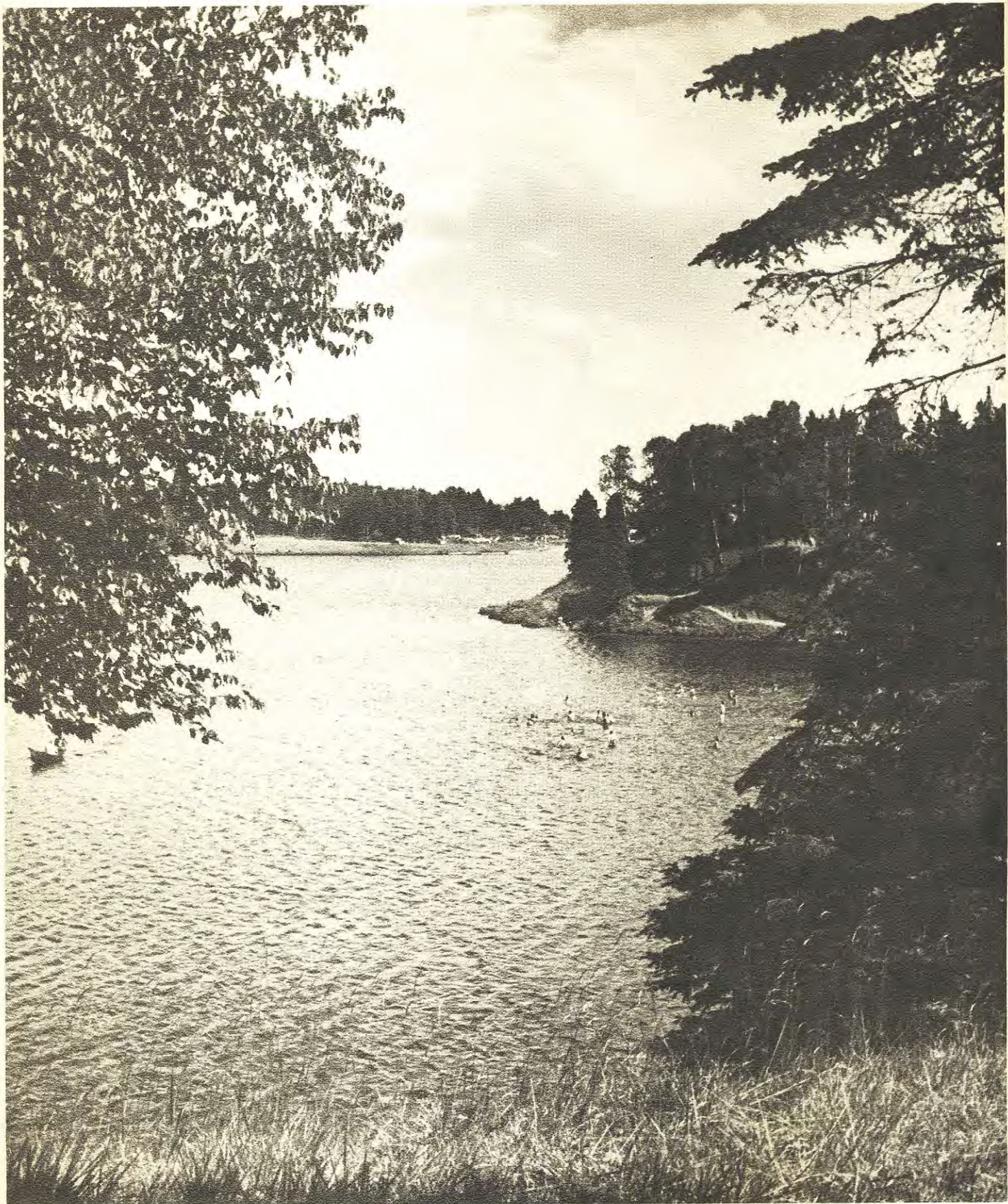
.....to the Least of these

Progress





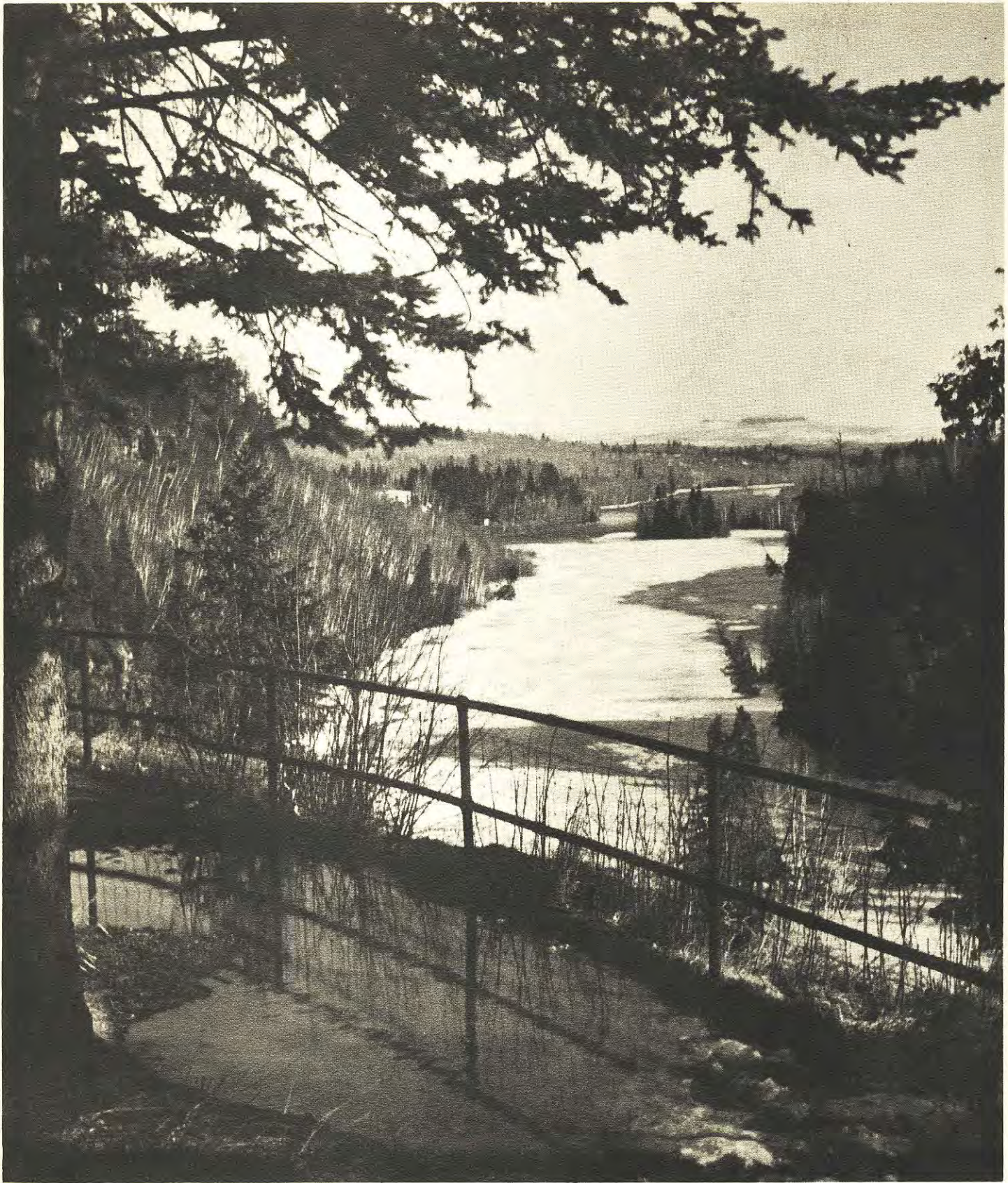
1957 . . . 1960



BOULEVARD LAKE
"In the Heart of Port Arthur"

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KAKABEKA FALLS
18 miles West of Port Arthur



Dedication

to

THE SISTERS OF ST. JOSEPH

"To the Least of these"

"Greater love than this no man hath; that a man lay down his life for his friends" (John 15/13). . . . To lay down his life—whether in the quick blast of red martyrdom, or in the slow trickling away to which St. Paul refers . . . "I will most gladly spend and be spent myself . . ." being spent, spread across the days and long nights of a lifetime. To spend and be spent in a relentless succession of single hours and single days. That is what the crest—the religious trademark—of the Sisters of St. Joseph means. And for the "least"—The newborn child grasping with velvet fingers at the brink of life. The desperately, even hopelessly ill around whom they huddle as if to ward off from the faint spark of vitality the slightest hurting breeze. The poor, who are and have the least, who gaze with wide-eyed wonder at the new experience of kindly, ministering hands and understanding hearts. To see in them all—the infant and the aged, the least and even the highest, the reflection as if in a mirror—of Christ the Elder Brother of them all . . . "YE HAVE DONE IT UNTO ME." . . . Fortifying themselves as each day dawns—with a renewal of their enlistment.

*Take and receive, O Lord my liberty,
my memory, my understanding and all
my will . . . Give me Thy love and Thy
grace and that is enough for me.*

Reverend Father R. MacGilvray, S. J.

Bishop's Message

The clergy, sisters and people of the Diocese of Fort William will assuredly join with me in expressing good wishes for the success of the 1958 Progress Edition of St. Joseph's Hospital and School of Nursing.

The issues which have appeared in previous years, have presented an interesting review of the well-occupied and happy life in training of St. Joseph's student nurses. They have no less, by implication and reference, given clear glimpses of the extensive, patient work for others carried on with professional perfection in St. Joseph's Hospital.

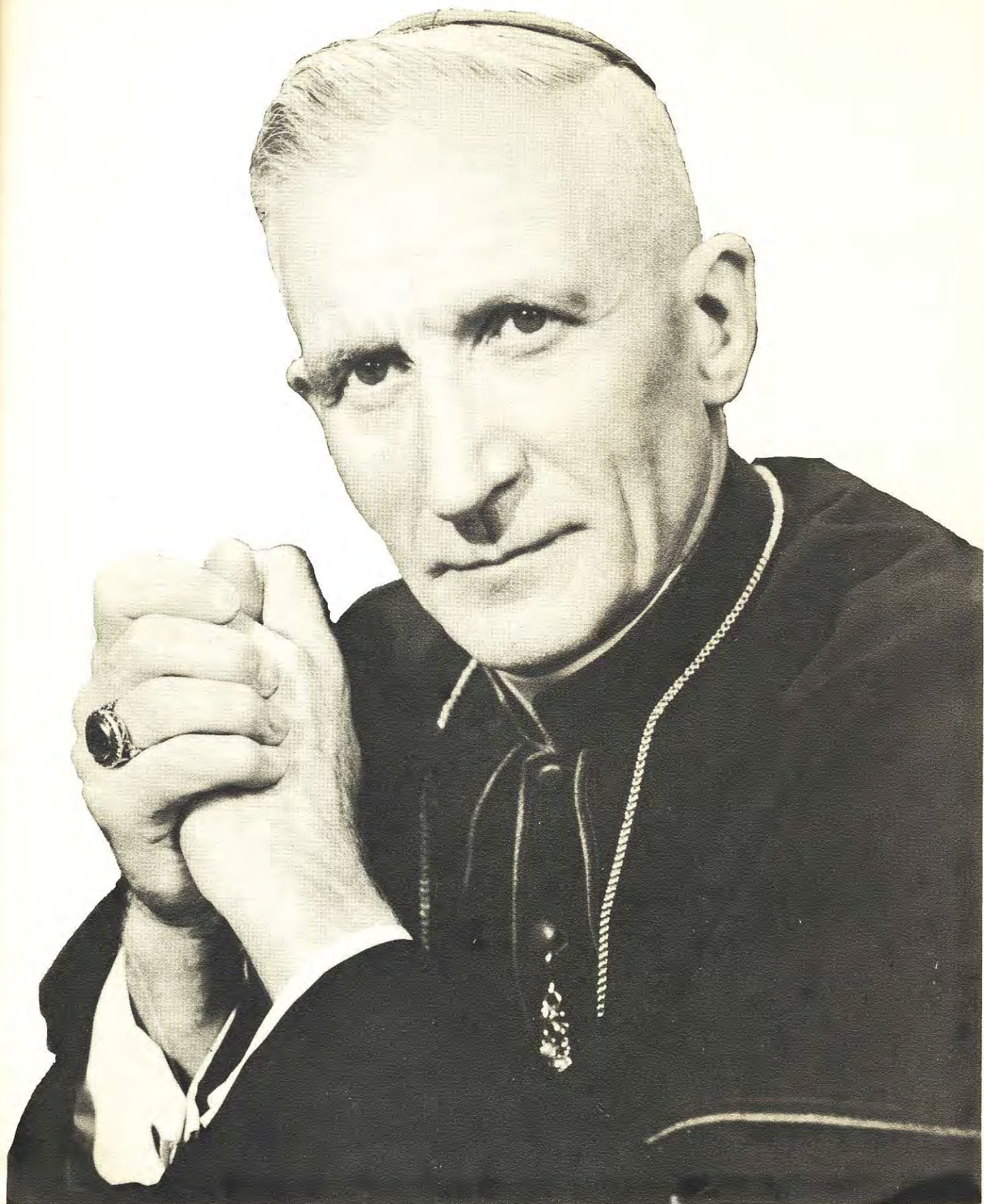
It seems very fitting to publicize in both of these aspects, the activity of a hospital, giving ever expanding service to the community. Those who look to our hospitals and their dedicated administrators, doctors, and nurses for the preservation of health should know of both the sound training and its devoted application which are the dominant notes of these institutions of public welfare.

If these days when education in more than one field is valuable, there is worth too, in the opportunity afforded by this book for the student nurses to develop literary talent and exercise it in print.

The excellent publication which is soon to come out for 1958 - 1959, will predict well, for the popular reception of future editions of this attractive periodical.

E. Q. Jennings,

BISHOP OF FORT WILLIAM.



MOST REVEREND E. Q. JENNINGS, D.D.

Historical Background



PRINCE ARTHUR LANDING

In 1881 a brave little band of five Sisters of St. Joseph, of Toronto, volunteered "to go up North," to undertake any work necessary for the betterment of a struggling population in the new part of Ontario in the town of Prince Arthur's Landing. This brave little pioneer Community consisted of the Superioress, Mother DePazzi and Sisters Monica, Vincent, Gertrude and Beatrice.

As the construction of the Canadian Pacific Railway was proceeding both East and West of the town, sick and wounded began to arrive at Prince Arthur's Landing, victims of Typhoid Fever and all kinds of accidents especially those resulting from dynamite explosions.

Touched with pity at the sight of misery and distress the Sisters volunteered to open a temporary ward in their little convent. The offer was gladly accepted and on February 2, 1884 there took place an event of outstanding importance, the opening of a modest hospital ward in a humble convent schoolroom.

Thus, when its need was most urgent, the first hospital work, under the direction of Sister Monica, was begun at the Head of the Lakes. The traditions that cluster round the early days of Sister Monica's generous undertaking tell of struggles endured for no mere hope of gain or applause but to help the sick and afflicted.

Though a generous heart and willing hands could do much the dire need of money soon made itself felt so, Sister Monica and her companions travelled over rough country in every possible sort of conveyance begging funds with which to carry on their work. Friends in all walks of life contributed not only by monetary means but by co-operation and moral support.

By June, 1884 the accommodation was already proving inadequate though the Hospital had already encroached more and more on the Convent and the Sisters had given up their chapel to make room for the sick. So Mother DePazzi, Superior, requested the Town Council for aid in building a proposed new Hospital on a lot obtained from the Ontario Government. A motion was passed to grant this aid to the extent of \$50.00 a month. On September 9, 1884 the corner stone of the new building, devoted to hospital purposes, was laid. The means for this had been

provided by the kind benefactors of the Sisters of St. Joseph, and almost half of the necessary sum was obtained from Toronto.

From 1885 until 1900 the two story building served as the district's only hospital. It was at this period, in 1895, that the "Ladies Aid" was organized with Mrs. Wetmore as the first President. This organization continues to render invaluable service to the hospital to this day.

In 1900 it was necessary to enlarge the hospital to take care of the increasing population and a three story wing was built to the South of the first unit to which was added a third story. In 1904-05 a large three story wing was added to the East of the original building. At this time, 1904, St. Joseph's School of Nursing was established, affording young ladies, aspiring to that profession, the opportunity to receive the necessary training at home. In 1909 the Silver Jubilee of the Hospital was celebrated.

The year 1915 saw the opening of another wing—larger and more modernly equipped and it was at that time one of the best of its kind to be found in Canada, thoroughly fire-proof, with four main floors and special department on the fifth containing the operating room, the Doctor's lecture room, emergency ward, X-ray department, Clinic laboratory, pediatric department, public wards, private rooms and sun parlours. In 1922 Doctor McEachern, Director of Hospital Standardization of Canada, placed St. Joseph's General Hospital in the list of A-1 Standard Hospitals.

Another addition to the hospital was completed in 1928 which contains public and private wards, a spacious roof garden and connected at all floors with the other parts of the building. A special diet kitchen was opened under the direction of a qualified dietitian, where all special diets are prepared. At this time a central power house and a steam laundry, which serves the institution was built.

The growing capacity of the hospital made necessary a corresponding increase in the number of nurses-in-training. To make provision for them the Neelin homestead was purchased and converted into an ideal Nurses' Home.

(Continued on Page 11)

HISTORICAL—(Continued)

Nineteen hundred and thirty-four was the fiftieth anniversary of the opening of the humble hospital ward at Prince Arthur's Landing and the Semi-Centennial Celebration took place July 1st - 4th. The installation of a new Kenotrom X-Ray unit to replace the old machine and the opening of a Massage Department with Multiple Wave Generator, the gift of the ever faithful Ladies' Aid, is a forceful reminder of the marvellous progress of fifty years. At the same time, sponsored also by this organization, was erected a simple pedestal of stone, a bronze statue of St. Joseph and a Memorial Tablet to Mother Monica who had led the way to bring relief to the suffering.

To make room for the new wing of St. Joseph's Hospital, one of the oldest buildings in Port Arthur, the Convent for the teaching Sisters of St. Joseph had to be demolished and the Sisters moved to the Conmee Residence. The demolition of the old south wing of



REVEREND MOTHER MONICA
*Foundress of St. Joseph's General
 Hospital*

To the Rev. Mother Monica,
 St. Joseph's Hospital, Port Arthur, Ontario.

Mother Monica—
 On this, the Golden Jubilee of your entrance into the service of your Church and remembering that for more than forty years of this period you have lived in Port Arthur, the City Council cannot allow the occasion to pass without an expression of its esteem and deep appreciation of the services you have rendered during these years.

Coming to what was then known as Prince Arthur's Landing, you experienced the hardships of pioneer days. You have since shared with the community its adversities and its prosperity and have seen its continuous growth from the small settlement to the Modern City.

St. Joseph's Hospital, which you were instrumental in founding in 1881, and whose affairs you have so ably directed and administered, has kept pace with the progress of the City, until to-day, with its comfortable buildings and modern equipment, it ranks with the leading Hospitals of the Dominion and will always stand as a monument to your untiring efforts and fidelity of purpose.

Your life in our midst has been one of unselfish devotion to the care of the sick and suffering, and by your thoughtfulness, your kindness and your solicitude at all times for those in distress, you have endeared yourself to the hearts of all, with whom you have come in contact.

That you may not be spared for some years in health and strength to enjoy the fruits of your labors and to receive the homage of your warm friends, is the sincere wish of our citizens.

Mayor,
 City of Port Arthur 1934.

the hospital was necessary for a bigger and better St. Joseph's Hospital.

In 1957 plans were made for a major new unit for the hospital, with five stories and provision for two more. These plans include a rehabilitation centre, an emergency department, a new surgical department with a recovery unit, up to date obstetric, pediatric, medical departments, new offices for administration, kitchen, cafeteria, and provisions for modern x-ray, and laboratory departments.

By 1960 the Sisters of St. Joseph hope the hospital will be opened and will be one of the most modern in Canada.

ACKNOWLEDGEMENT



Sisters and Staff extend their
sincere thanks to all who
co-operated in the suc-
cessful development
and publication
of this book

KAKABEKA FALLS
"Niagara of the North"



Message from
Reverend Sister M. Jovita,
Sister Superior

MY DEAR GRADUATES AND STUDENT NURSES:

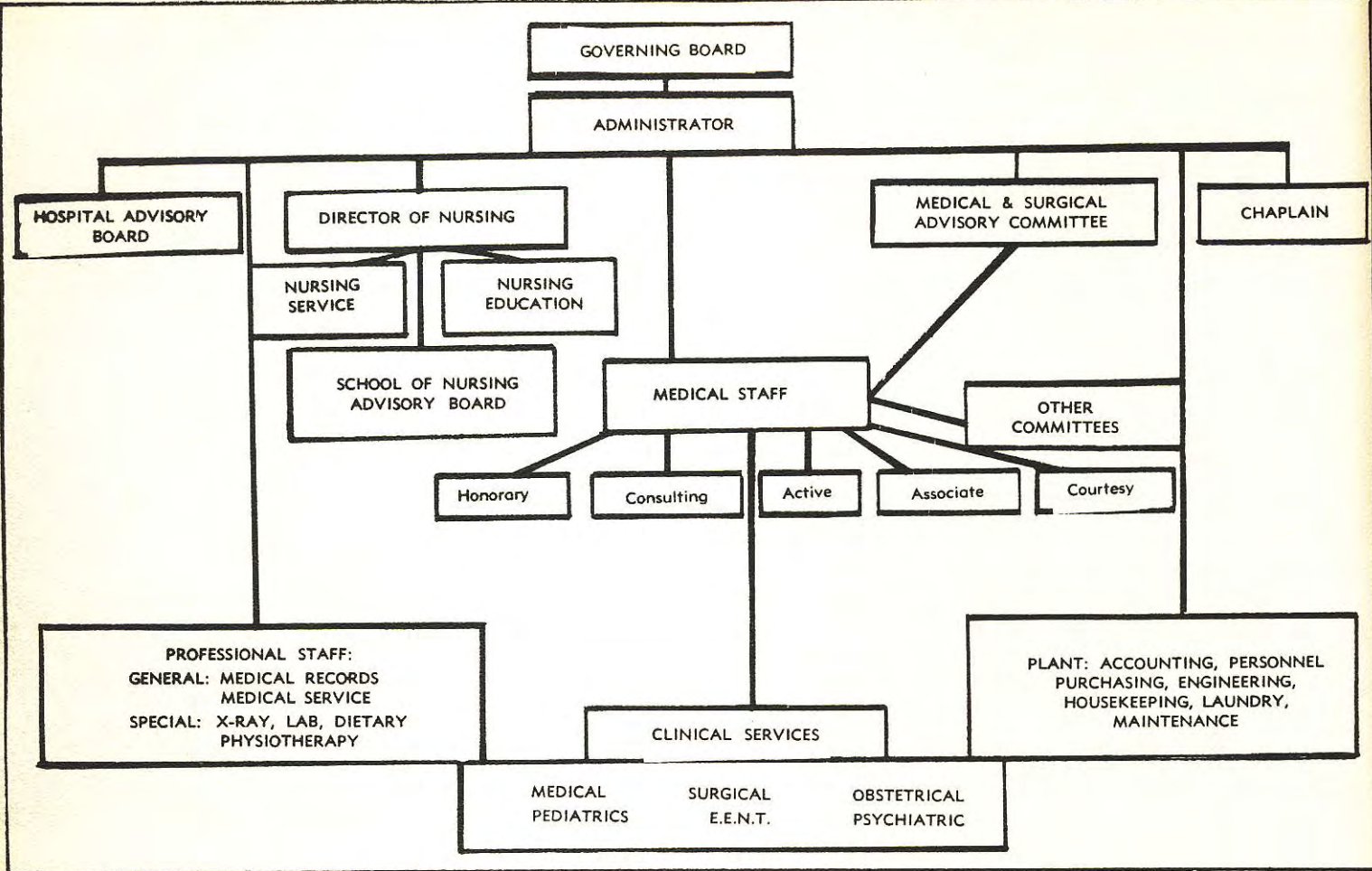
Today, you stand on the threshold of a new life. The black velvet ribbon and the gold, engraved pin, sets you apart from all those others who busily come and go in hospital corridors throughout the world. Beneath the insignia of your newly acquired office, lies a mind with which to think, a heart, whose pulse gives you life and a body, whose hands and feet carry out the dictates of these two. And into them all God has breathed a soul in His own image and Likeness.

Christ, then, is in you in a very special way, as you echo His words, "Come to Me all you that labour and are burdened and I will refresh you." It is Christ in you, speaking to your patients when you say "Come with me as I take you to the solace and security of a hospital bed; have faith in me while I cure for you; believe in my love and charity as I nurse you through your illness; let me comfort you when pain racks your body." And as you wend your weary way from room to room, through endless days or as you watch long nights by beds of suffering, remember, that Another walks and watches with you. Not very far away from the desk where you keep vigil is your Creator and your God. Approach the flickering red light near the Tabernacle and unite your heart with the Sacred Heart of Jesus. See Him in your patients, in your staff, in your physicians. Recall that He, who breathed a soul into your body, has breathed a soul of love and charity into the Hospital where you work. And the chief minister of that virtue is YOU, the Nurse.

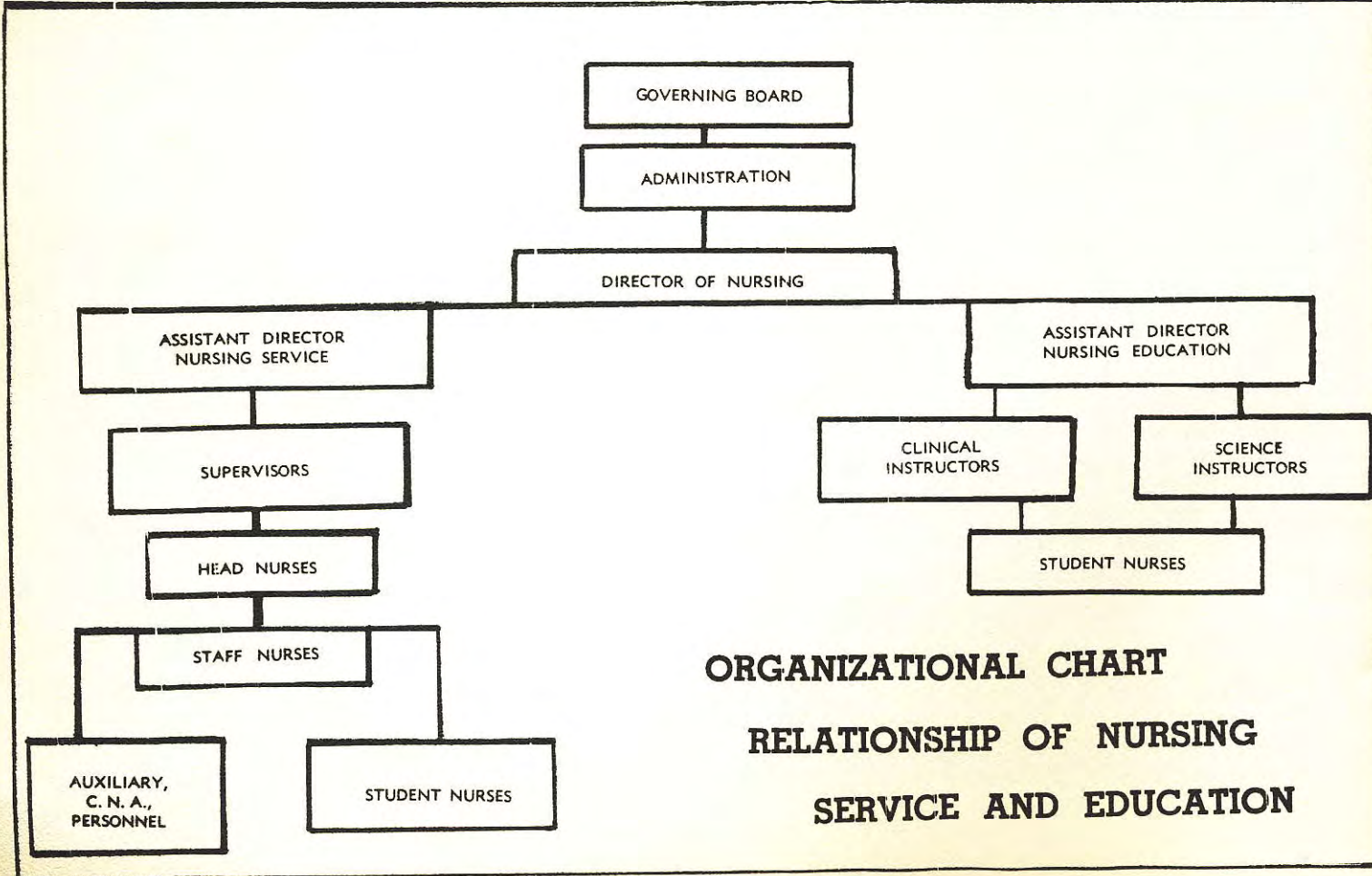
To you, my dear girls, we say "Ave," but not "Vale." We hail you, Graduates of St. Joseph's Hospital, but we do not say farewell, for you will remain in our prayers, always.

Devotedly in Christ,

Sister M. Jovita, Superior



ORGANIZATIONAL CHART OF ST. JOSEPH'S GENERAL HOSPITAL



**ORGANIZATIONAL CHART
RELATIONSHIP OF NURSING
SERVICE AND EDUCATION**



Sister M. Michaela, B. Sc. N.

Director of Nursing
St. Joseph's School of Nursing

OUR PROFESSION

Our Holy Father Pope Pius XII, in a speech to midwives, on October 29, 1951, spoke the following:

"All professions wanted by God, entails a mission, that of realizing in the domain of the field of our profession itself, the thoughts and intentions of God, the Creator and to help men understand the justice and holiness of God's plan, and the good that flows by the accomplishment of their duties."

We may ask ourselves, "what is the object of our profession"? From the earliest times, medicine has been preoccupied with the individual human being, his hopes and his fears; and the influence of the state of the human mind or bodily well-being. The common saying is "mens sana in corporo sano,"—"a sound mind in a sound body."

Our obligations are manifold and good leadership qualities is all essential to maintain the high standard of our profession.

In every sphere of our hospital work we and our co-workers may find light and guidance by studying as our model the life of Christ, who was physician, nurse and God. In Him, we find the perfect harmony of justice and charity.

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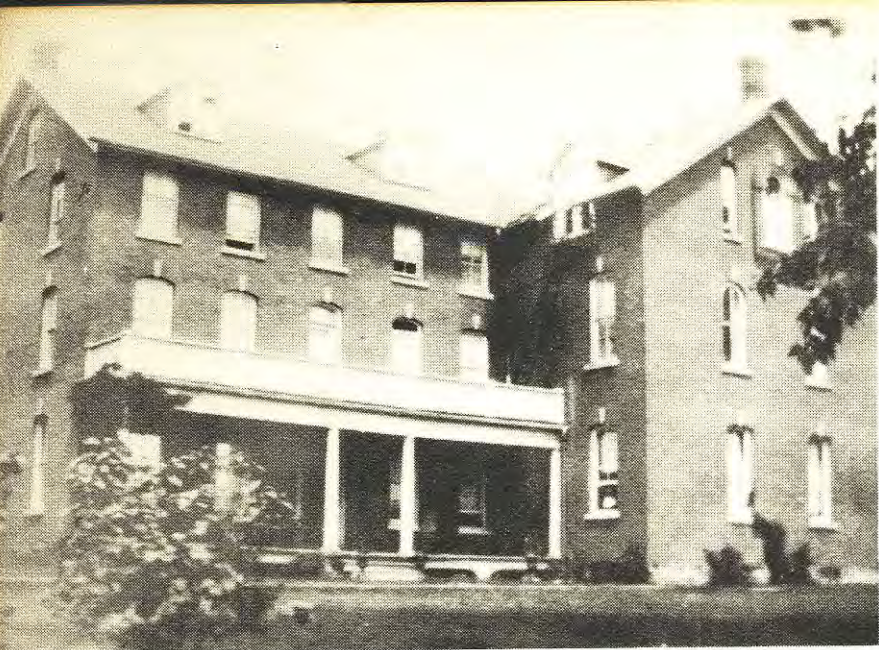
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- OST, N. A.** G.P.
- PARK, R. J. G.** Obs. & Gyn.
- REMUS, L. A.** Surg. & G.P.
- SCOTT, G. A.**
M.B., Ch. B., F.R.C.P. (Edinburgh), F.G.C.P.
- SPENCE, J. B.** Surg.
- SPROULE, J. R.**
Med. & G.P.
- HONORARY STAFF**
- EAKINS, DR. G. E.**
- BRYAN, DR. H.**
- COULSON, DR. R. B.**
- POWELL, DR. C.**

Hospital Advisory Board Members ... 1958

- | | | | | | |
|------------------|-------|--------------|-----------------------|-------|--------------|
| MR. A. C. BENTZ | - - - | Port Arthur | MR. HOWARD G. GRATTON | - - - | Port Arthur |
| MR. F. BROWN | - - - | Port Arthur | MR. WILFRED GROULX | - - - | Port Arthur |
| MR. T. P. CALLON | - - - | Port Arthur | MR. SAUL LASKIN | - - - | Port Arthur |
| MR. D. CLARK | - - - | Port Arthur | MR. T. J. McAULIFFE | - - - | Port Arthur |
| MR. DAN COUGHLAN | - - - | Port Arthur | MR. J. L. McCOMBER | - - - | Port Arthur |
| MR. G. H. CRAIG | - - - | Port Arthur | MR. FRANK O'BRIEN | - - - | Fort William |
| MR. CECIL DOYLE | - - - | Fort William | MR. J. STITT | - - - | Port Arthur |



PICTORIAL REVIEW

ST. JOSEPH'S CONVENT
ERECTED 1881—
DEMOLISHED 1957



DEMOLITION
1958

NURSES' ALUMNAE REVIEW

GRADUATING CLASS
OF 1908



In 1904 St. Joseph's School of Nursing was established and Nurses' Alumnae was founded in 1910. The membership was necessarily small in this city as the early trainees were frequently relatives of the Sisters of St. Joseph, who on graduation returned to their various homes, to practice the profession. It was felt, however, that the precepts—honour, humility, courage and service which united us all, should be maintained. During the first world war, duty disrupted alumnae activities and many of our graduates entered the services. It is recorded in the minutes of a meeting and we quote, "The entire class of 1913 and several nurses of the 1914 class who were given full credit by the Sisters, to leave training early; left today for the war areas. The books are now closed. Activities to be resumed after the war."

The termination of the war in 1918 presented yet another challenge with the advent of the influenza epidemic. We pay tribute here to the trainees and graduates who assisted in alleviating the suffering and misery caused by that civilian disaster.

In 1925 the Alumnae was re-organized under the direction of the Superintendent of Nurses with the assistance of our graduates. Our aims remained the same—to promote a spirit of unity and goodwill, and the advancement of the nursing profession. We cannot and must not forget the graduates of our Hospital, who served and are now serving, in various fields, with honour and distinction and who have always been aware of the great teaching.

Quod, Minimus, Mihi, Fecisti.

The growth of the Alumnae has been rapid, enabling the members to complete many projects, beneficial to the student body and the graduates.

—ETHEL G. GEDDES.





ST. JOSEPHS GENERAL HOSPITAL PORT ARTHUR

THE ANATOMY

The Eyes, Ears, Hands,
Heart and Soul of a

6,630 patients cared
for in 1957.



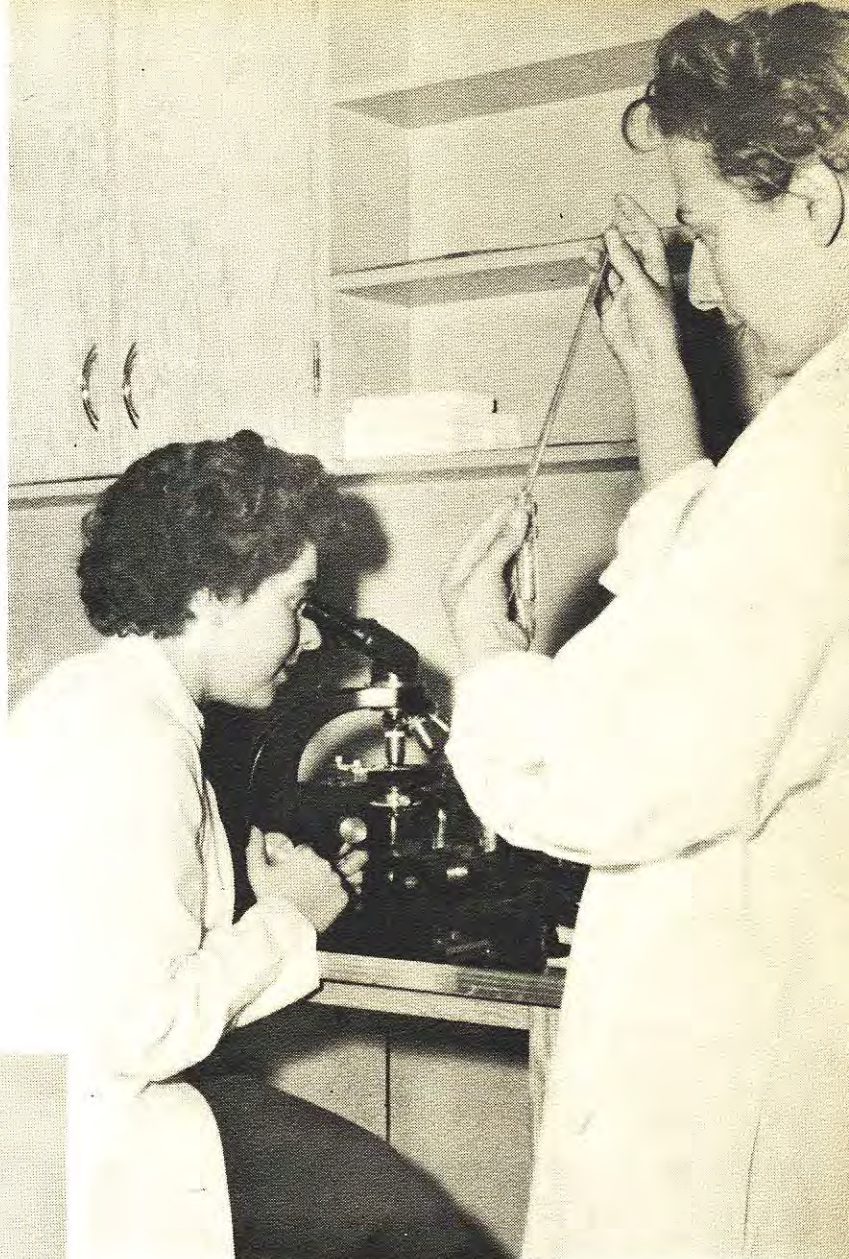
OF A HOSPITAL

hospital form a unique body which helps the sick.



The Mouth

Speaker of healing phrases, conveyor of orders, asker of questions, the hospital's mouth also is used for such specialized work as pipetting blood counts.



The Ear

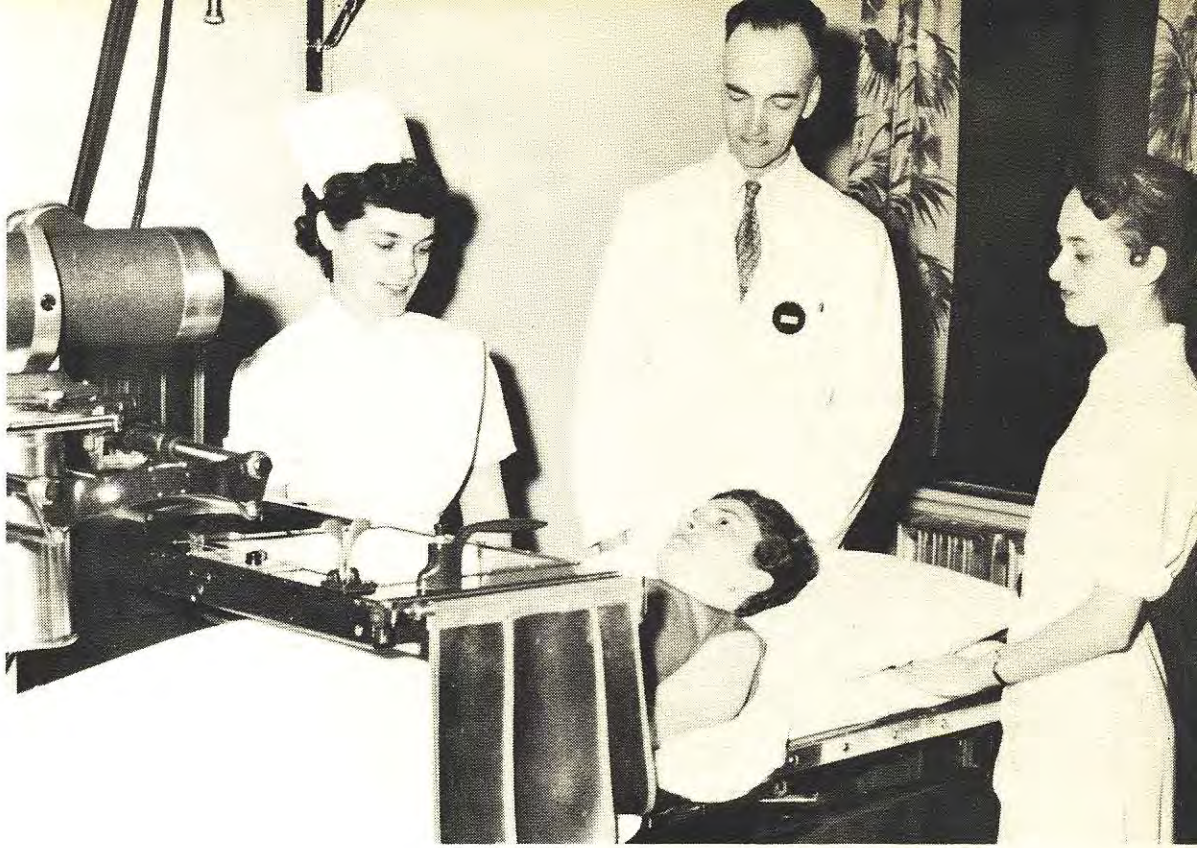
Through its sensitive ears, tuned to the life of the community, the hospital eavesdrops on the flutter of the human heart via the stethoscope, listens to the story of an illness and takes the emergency telephone calls that mean the arrival of another patient.

THE
HAND



Life and comfort come from the touch of the hospital's hand. The surgeon's hand, soaped, scrubbed, powdered and gloved is an important tool of the diagnostician; the anaesthetist's hand, testing the oxygen supply, approximate the rhythm of breathing; the nurses' hand, with sensitive fingers, takes the pulse beat of the patient.





RADIOLOGY

Radiology is that branch of medicine which uses certain forms of radiant energy to diagnose and treat disease. Radiant energy includes: X-rays, radium, and man made radioactive substances known as the "Atomic Medicines."

The radiologist can help a patient in two ways—first by more accurate diagnosis of many disorders through the use of x-rays—and second by treatment of many conditions.

By careful study of the body's inner structures the x-ray examination can be considered the "detective" in medicine. Nearly every organ in the human body may be explored by x-rays.

The radiologists are vital members of the modern medical team—in both diagnosis and therapy.



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THE EYE

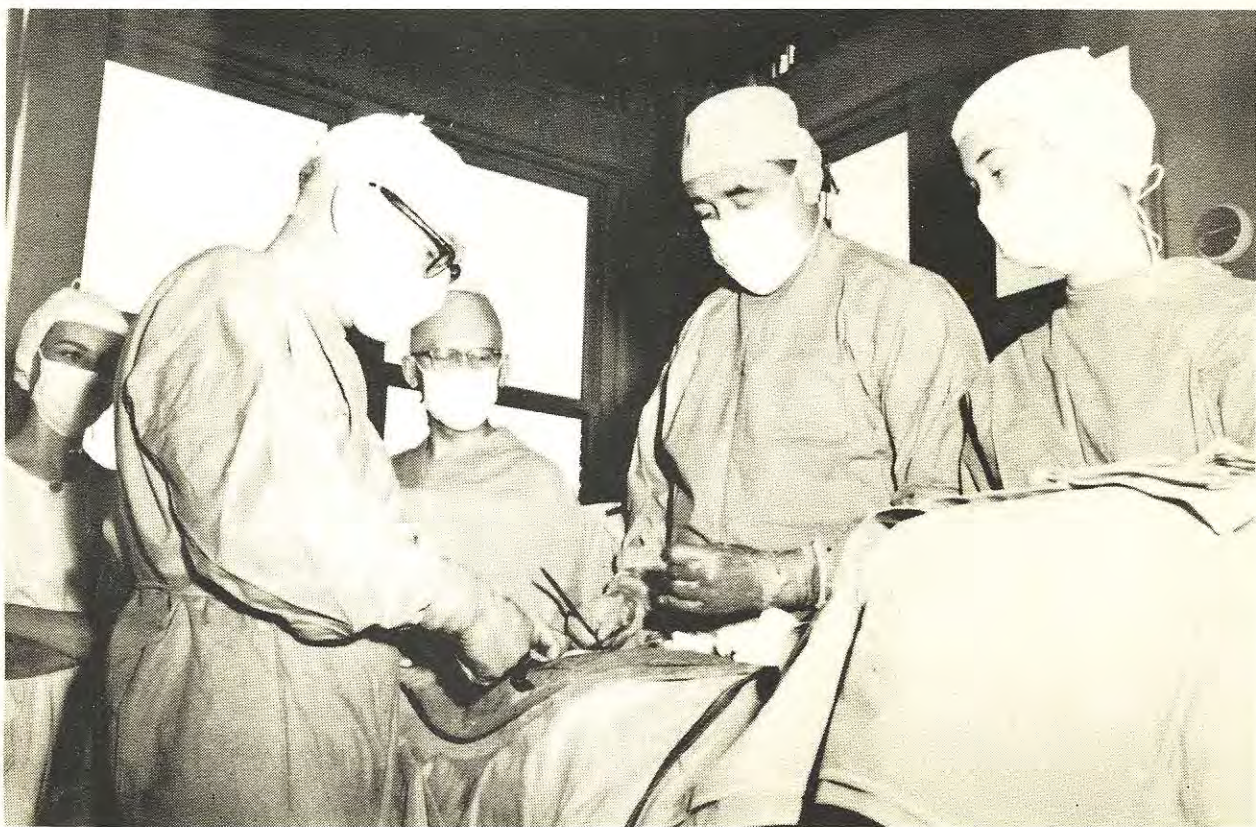
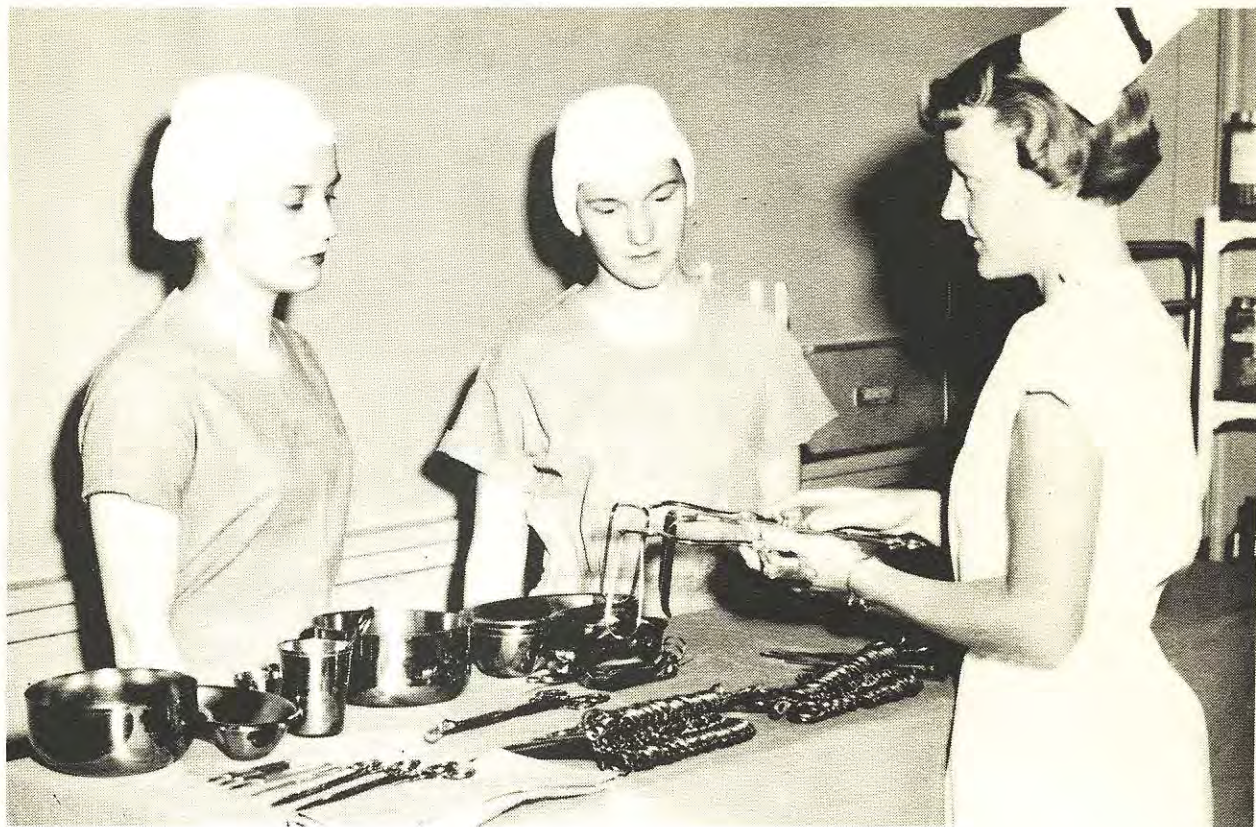
The restless curious eye, alerted to its work by microscopic signs — the colour of the skin, the twitching of a nerve — guides hand in its work. Every glance directs the work of the doctors' and nurses' hands, the eye guides the job of curing in a number of other ways. Also by a slight movement of its own muscle or expression, it will bring to a wondering patient the signs of compassion, cheerfulness and reassurance.



OPERATING ROOM

Many individuals in the hospital who rarely enter an operating room, may contribute much to the smooth and successful handling of operative patients. Teamwork is essential in safeguarding the patient; teamwork of those who care for him before the operation; those who do blood groupings and other important laboratory procedures; those who transport him to and from the operating room; and those who care for him during the post-operative period.

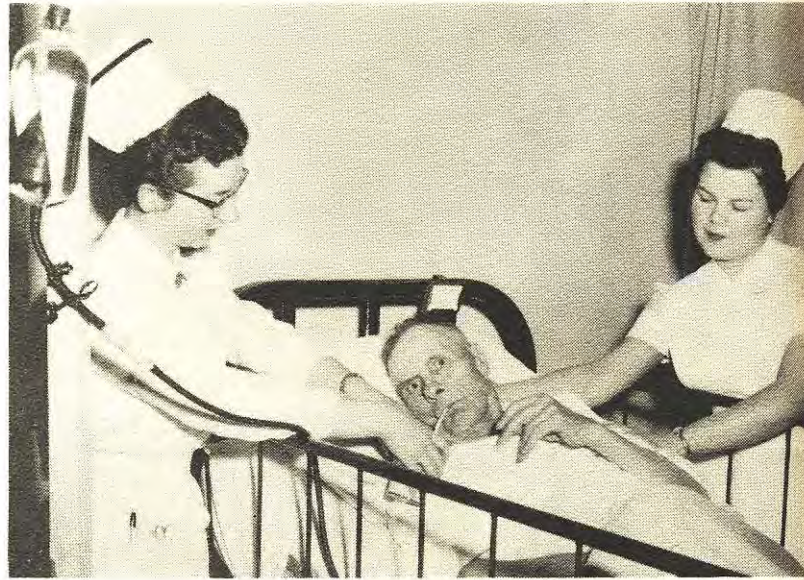
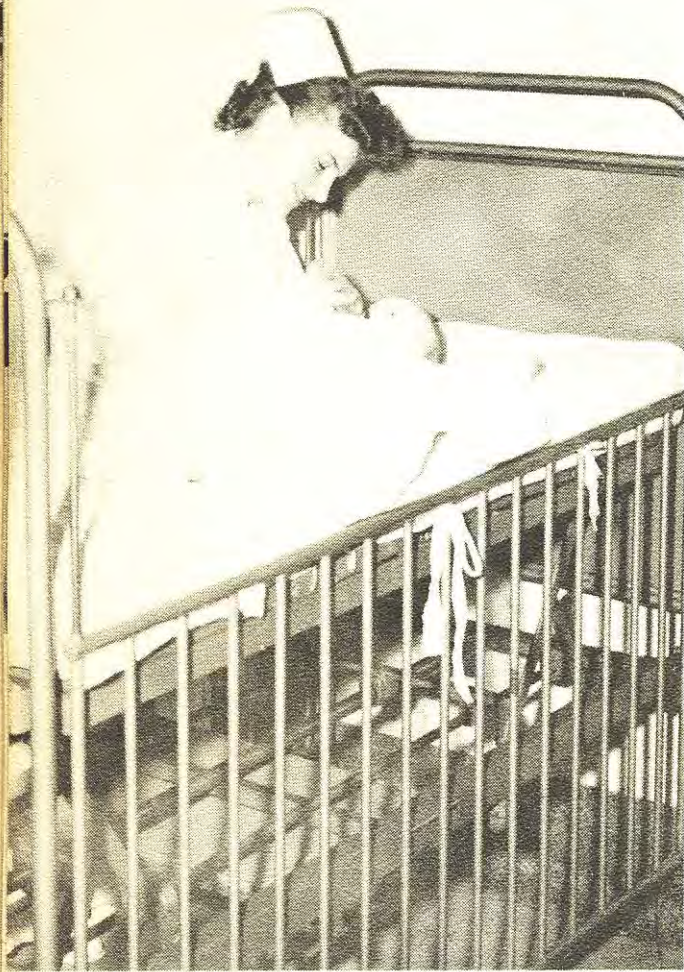
The purpose in perfecting every detail of surgical technique is to insure that the patients under treatment may have every chance to overcome the disease or injury with which they are afflicted. From the moment the operation is decided upon, every phase of the caring for the patient, every detail, no matter how small, becomes of greatest importance.



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THE HEART

The beat of life, for young and old comes from the hospital's heart. Everyone has a sad story or needs some small attention.

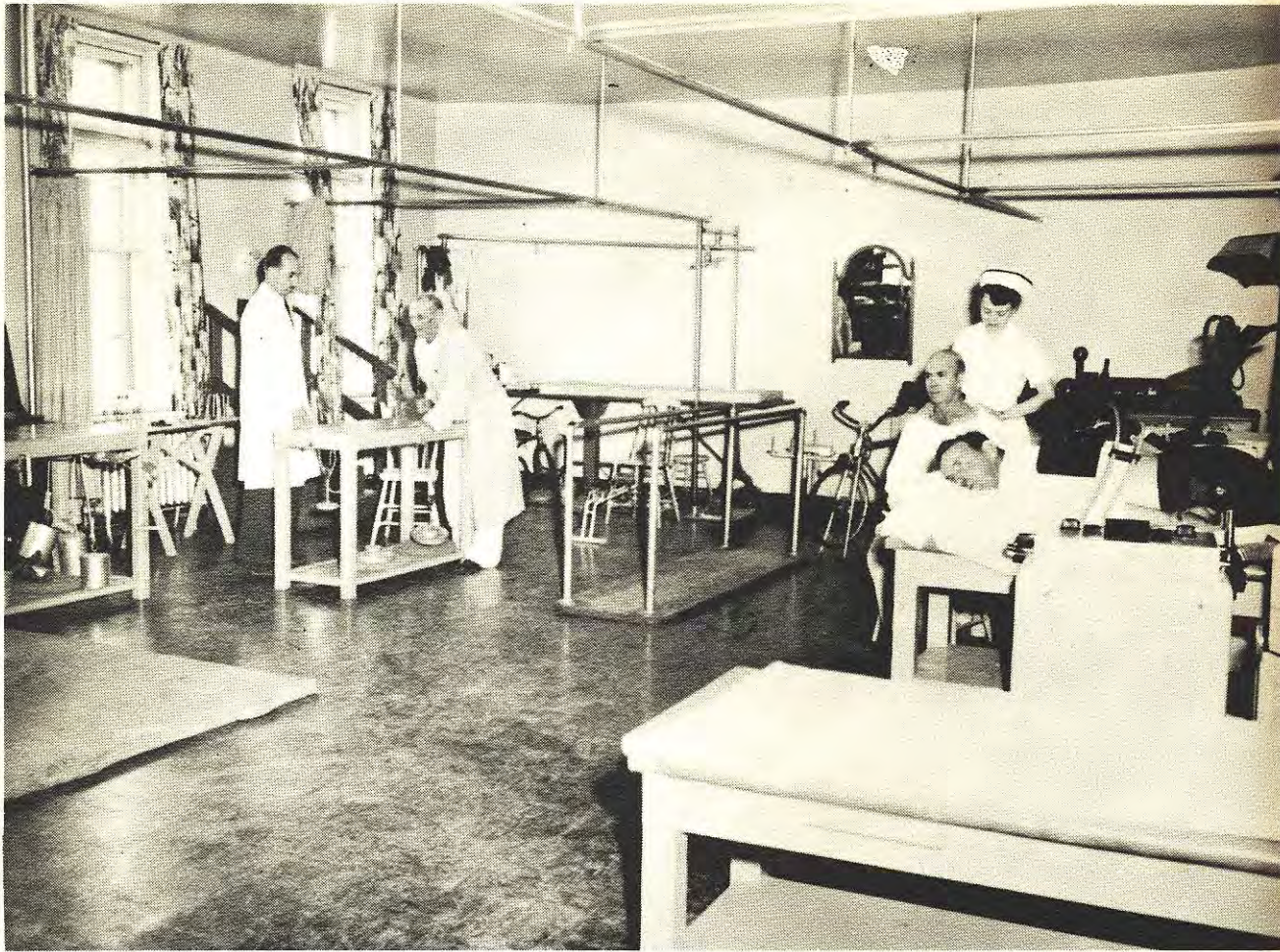


**SISTER DYMUNA
PAYS A FRIENDLY
CALL . . .**

THE SOUL



The life force of a hospital comes from its soul. As Holy Communion is brought each morning to the sick—or in emergencies to the dying, the candles and bell are visible signs to the patients and hospital team that they are all united in the Divine Soul whose mystical suffering they share.



REHABILITATION

of Our Patients

The goal of rehabilitation is to achieve the maximal function and adjustment of the individual and to prepare him physically, mentally, socially and vocationally for the fullest possible life compatible with his abilities and disabilities.

Rehabilitation has become an accepted part of the scheme of life for the physically handicapped person, it is slowly replacing the concept of dependency with that of activity in which the remaining powers of the physically handicapped person are developed to the maximum.

This development and adaptation is carried out by medical and non-medical measures, the former termed "Physical Restoration." This includes adequate examination and diagnosis; medical and surgical measures when indicated. Physical therapy, physical conditioning; occupational therapy; orthotics and prosthetics.

Non-medical measures embrace vocational guidance, training and placement. These include all the psychological technics for measuring the individual's aptitude, intelligence and interests, evaluation of his skills and experience, and preparation of a plan for future activity which will make the greatest use of his talents while respecting always the social and physical limitation of his defects.

REHABILITATION OF OUR PATIENTS—(Continued)

Vocational guidance includes academic education on all levels, as well as commercial, trade and other technical training necessary to prepare the physically handicapped person for work.

Thus it can be seen that rehabilitation is not just another hospital service but a community service which concerns everyone. Large urban rehabilitation centres are necessary but are not enough. The community rehabilitation service must make the fullest use of all its existing facilities. It must be a programme of integration and duplication must be avoided.

The Hospital's place in this service is the Physical Restoration programme. The Sisters of St. Joseph's General Hospital are giving a lead in this direction in the building of a Rehabilitation Unit. However, the success of such a venture will largely depend on how successfully the non-medical services are integrated in this Rehabilitation programme.

Most authorities agree that the medical men must take the lead in the community to integrate these services, and of course, it is obvious that medical men must direct the physical restoration programme.

The important part for all of us to remember is that it takes the team approach to successfully operate a community rehabilitation service. It is the responsibility of Patient, Physician, Hospital Staff, Labour Management and the community to see that those members of the community who are in need of help are not relegated to a useless life in hospitals, back rooms and garrets.

The challenge is here, the methods are known, it remains for us all to play a part in the preservation of human rights.

Each year medical science advances are made that prevent death but leave the individual disabled. Each represents a precious human life saved and no one would ever consider the cost of saving human life, but it raises the question of whether the society that can save a life can also, through rehabilitation, give that life dignity, purpose and meaning.

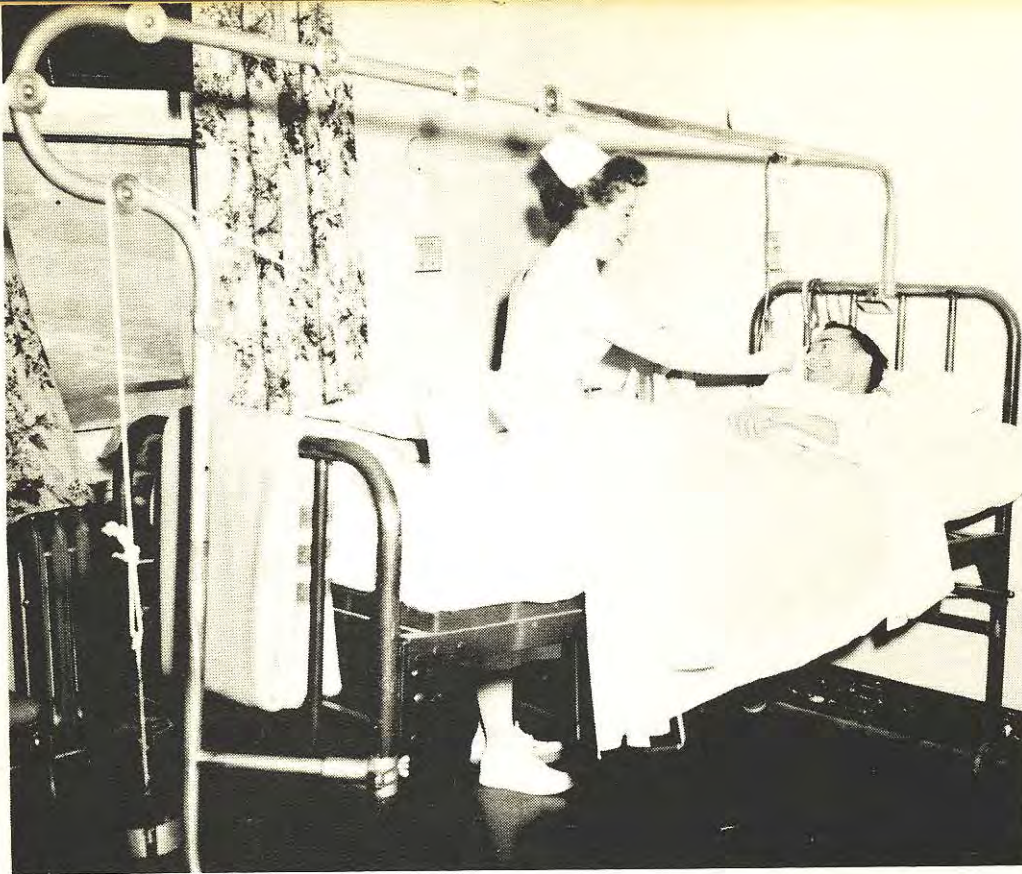




MEDICAL . . . SURGICAL NURSING—(Continued)

never cease, and, in general, the value of each successful accomplishment is immediately obvious.

Up to the nineteenth century, tradition had a strong influence and a restricting effect on progress, the general practitioner treated all ills. There were few who limited their practice to surgery and almost none who limited their field to specialized types of surgery. However, following the industrial revolution, tradition relaxed, and the more highly skilled tasks necessary to operate machinery introduced specialization. A parallel in the medical field was the rise of the specialist. If a person had difficulty with his ear, he went to an ear specialist. Now we are living in an age in which we are seeing a return in the professions to the more desirable middle course. Our emphasis today, is not on the ear as such, but on the person who has an ear problem. In surgical nursing our concern is not the appendectomy but the patient who has undergone surgery for appendicitis. It is recognized that the care of the surgical lesion is only a part of the patient as a whole; the important thing is to rehabilitate the patient and return him to his home a healthy, happy, economically competent member of society.



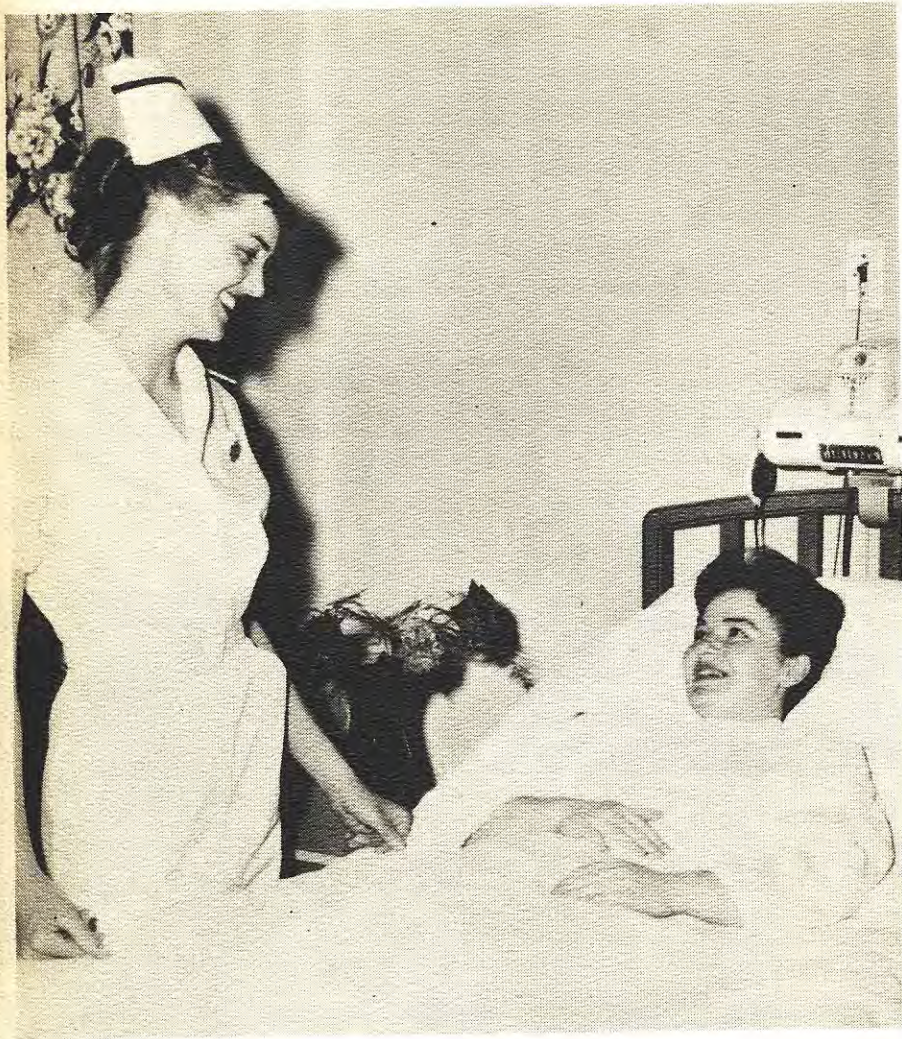
CENTRAL SUPPLY DEPARTMENT

Supplies used on the floors for the care and treatment of patients, apart from medicine, resolve themselves into two classes; those in constant daily use and those used occasionally. To keep these up to standard, in quantity and quality is the major purpose of this department.

A graduate nurse, because she understands the principles of sterilization, and the importance of asepsis, is the supervisor. Specially trained personnel and students make up the staff.

The student nurse is assigned to the supply room as part of her training. Here, she receives intensive instruction in the principles of sterilization and in the care, use and value of special equipment, which makes her better equipped to meet the needs of her patient.





ADMINISTRATION

Medicine may be defined as "a drug used to prevent, treat, or cure a disease."

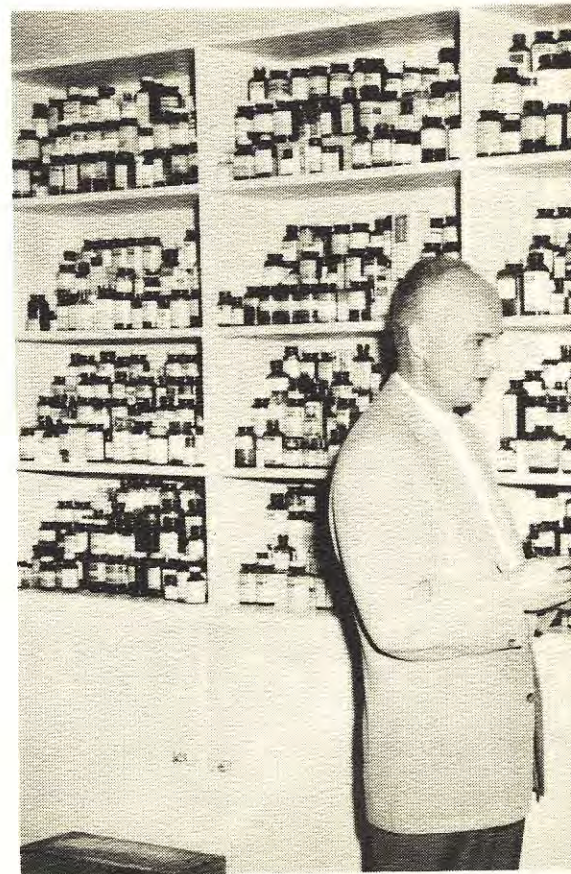
The administration of medicines is an important feature of the practise of medicine and a grave responsibility is entrusted to the nurse when given the duty of carrying out the orders prescribed by the doctor.

Four chief purposes of administering medicine to a patient — to

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WARD ROUNDS

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OF MEDICATION

help diagnose disease, treat the disease, to cure the disease and to prevent disease.

While a doctor prescribes the drug, the dose, method of administration, and the number of times to be given, the nurse is expected to carry out the orders promptly, with meticulous accuracy and in the manner that will produce the best results.



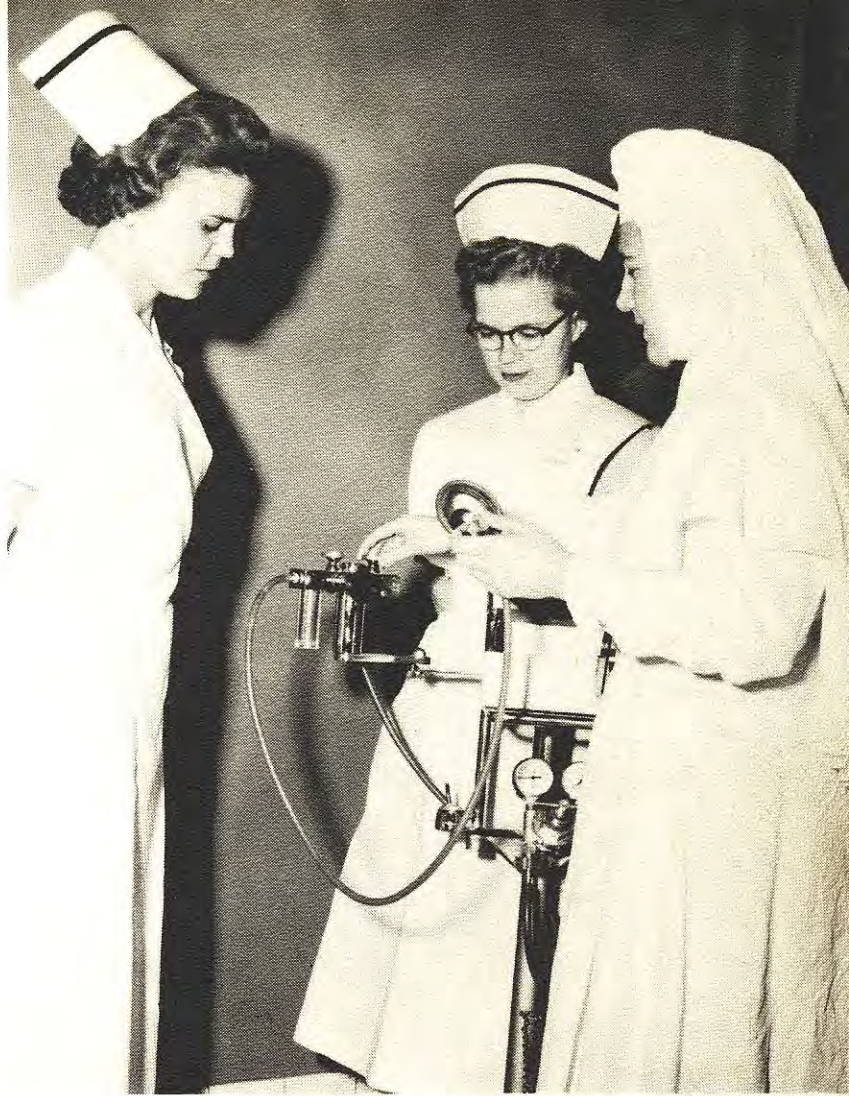
PHARMACOLOGY

Pharmacology is the study of the effects of drugs upon living organisms. The theory and facts concerning medicines and drugs are correlated with the practice of drug administration.



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MATERNAL AND INFANT CARE

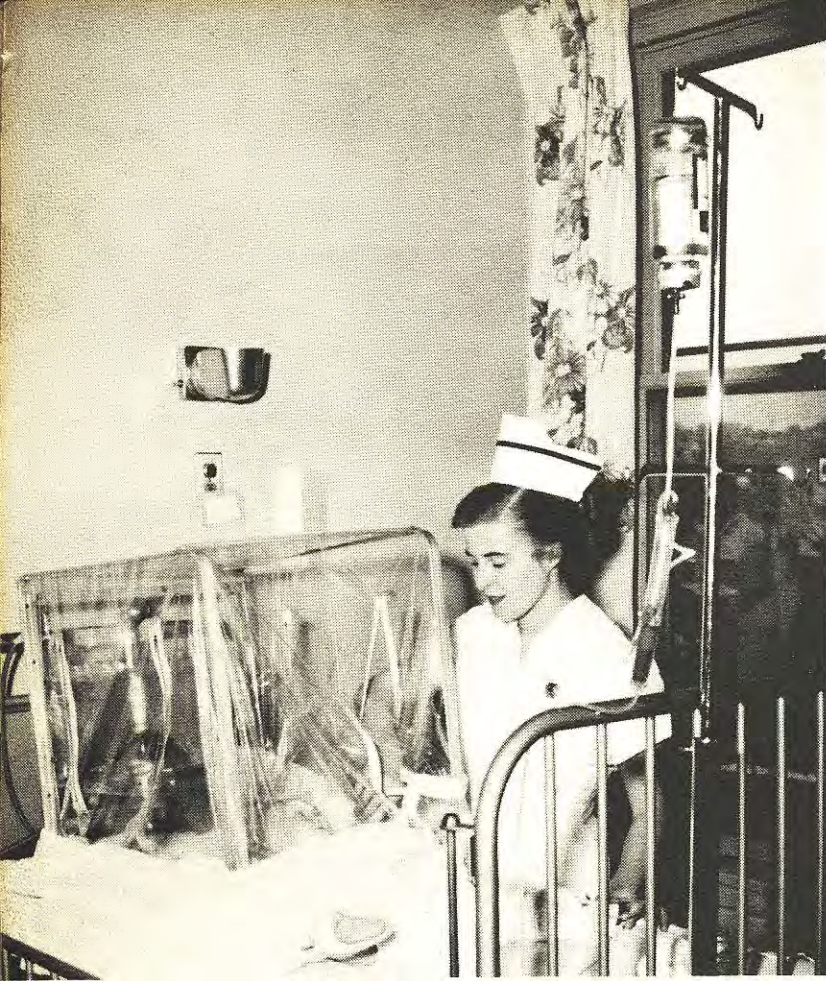


The whole idea seems incredible to the new Mother, that the future destiny of this squirming bundle rests on her and her husband. They are the guardians of the life which they have created together.

It is our responsibility therefore, as Doctors and Nurses working together, to aid in making the birth of the baby a safe and satisfying experience. As stated by one Mother, "the birth of our baby was one of the most wholesome and enriching experiences of my life." It is a challenge for the Nurse caring for the Mother in labor, to put into practice all her skills and knowledge.

Hospitalization after the birth of a baby, should be a restful and enlightened period for the Mother. During this time she is enabled to meet her own spiritual, physical and emotional needs of the future, as well as those of her baby and family at home. This is necessary for a happy, healthy family life. It is accomplished in the hospital by demonstrations, classes and informal bedside chats. In our community, the Public Health Nurse visits the Mothers (patients) in the hospital, giving them needed assistance, and prepares them for her visit when they return home.

By our combined efforts, we hope to impart knowledge that will make a health conscious community.



PAEDIATRIC DEPARTMENT

The paediatric department is a self-satisfying bedlam of little people—little people who experience the impact of hospitalization, the new and frightful experience, and frustrations which accompany it.

The paediatric nurse must have complete knowledge of the growth, development and guidance of children. Alertness and the ability to anticipate the needs of a child, along with tenderness and understanding, is the criterion of a good paediatric nurse.

CONSTANT



Ward Administration and Supervision

The philosophy of supervision is based on democracy and growth.

Democracy, having common aims which all know and all seek to realize, is animated by a spirit of co-operation and teamwork.

Growth is education for both supervisors and co-workers, supervised through improvement, development and increased initiative.

The function and duties of the supervisors and head nurses are many, and entail a great deal of responsibility towards the patient, the hospital, the staff, and the nursing school.

The administration is reflected in better nursing service for the patient and a more effective programme of education for the student.



VIGIL



• • • HOSPITAL ADMINISTRATION

With the rapidly extending field of hospital service and the advances of medicine, hospital administration is growing more complex.

The twentieth century hospital must keep pace with the social and scientific progress of civilization. In fulfilling its duty the hospital must use the arts and crafts required in business organizations which are applicable to its own administration.

This applies to all hospitals regardless of size or of the degree to which their work may be limited. The situation is further complicated by the fact that in no other business is economy so essential, yet this economy can never be carried to such lengths as will lessen efficiency or affect the good care of our patient.

.....
Lines of
Communication
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MAINTENANCE

To keep the building, its furnishings, and its surroundings in good condition at all times, is the purpose and aim of this department. The carpenter is the first essential mechanic to be considered. His duties in repairing and keeping the building and equipment in good condition are undoubtedly well-recognized. The painter is vitally necessary to the hospital. Modern medical science recognizes that attractive surroundings have a therapeutic effect on the patient.

The maintenance of the grounds depends entirely on the location of the hospital and the extent to which the grounds are landscaped. Lawns, shrubs, and flowers require expert care and warrants the employment of an experienced man.



..... NUTRITIONAL

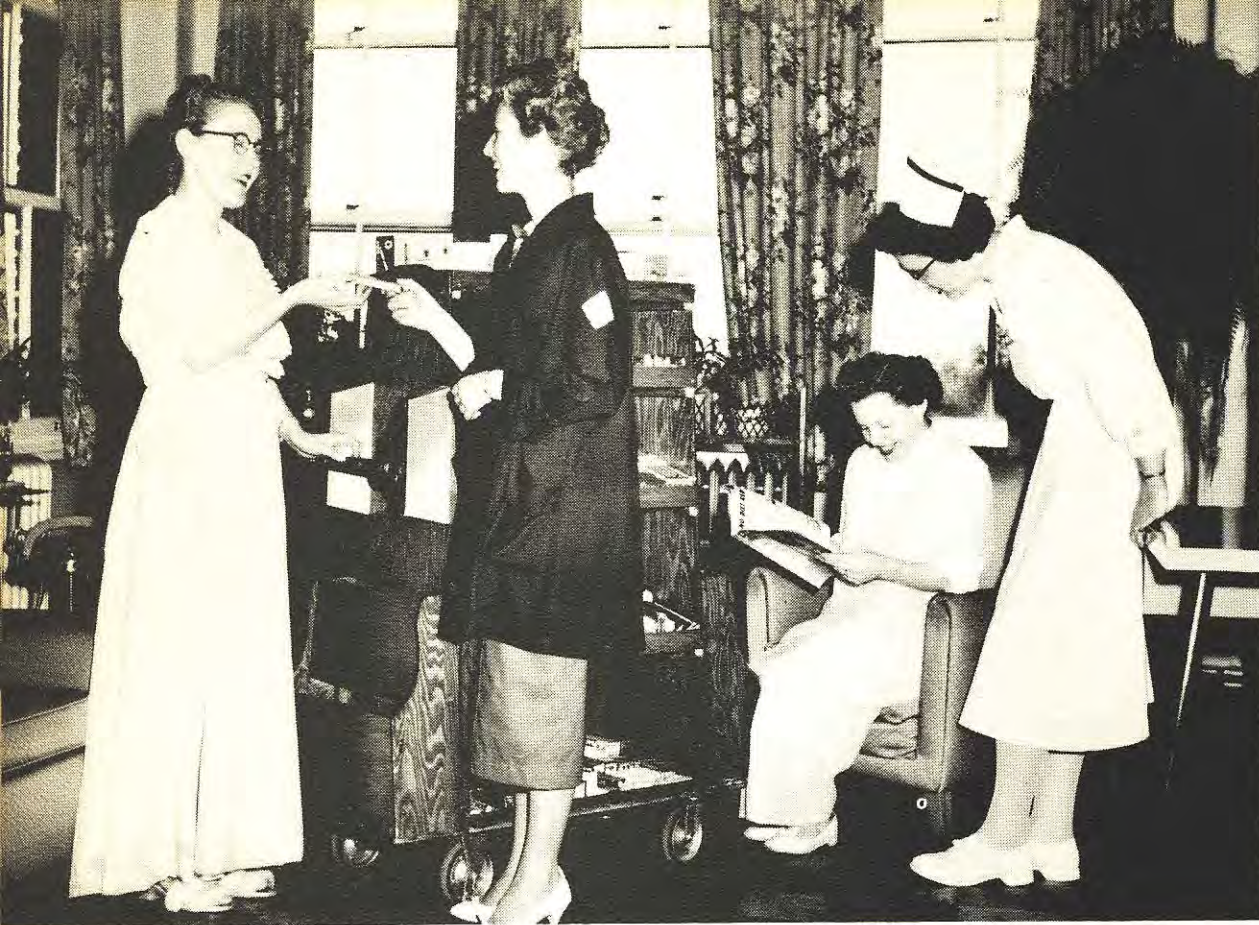


VALUES



When people congregate in numbers, food service, no matter how simple, must be organized and planned if all are to be adequately fed. In hospitals, where most patients must be served in bed and where all are abnormal in health and require special consideration to their diet, the necessity for organization and planning is even greater. Special study must be given to selecting, preparing and serving food.

Hospital food service is indeed a specialty. Although hospital diets are classed as general and special, all should be regarded as being special, inasmuch as the various groups to whom they are served are either suffering changes in their physical conditions or are working under abnormal or extraordinary circumstances. The patient, whether bed-ridden or convalescent, requires special and scientific dieting. The employee, regardless of status, works under a mental and physical strain and therefore, must be given the benefit of careful, scientific food service. Thus, whether dealing with the special or general patient, or with the employee, consideration is given to the food so that its ingredients will meet the metabolic demands of the body and build the necessary resistance to the disease.



LADIES AUXILIARY

Members call daily to help meet the patients needs.

JUNIOR VOLUNTEER PROGRAMME

The purpose of this programme is to acquaint the highschool student with the hospital environment and the life of the student nurse, in order to motivate and encourage the student to choose nursing as her vocation. It serves to bridge the gap between highschool and student days.

The work of the volunteer is limited—observation is her main concern. She is considered a perspective candidate for the nursing profession.





A TRIBUTE TO OUR LONG TERM EMPLOYEES

OFFICE
MRS. K. OULLETTE
MISS E. TAYLOR

CLEANERS
MR. D. KOSTIUK
LABORATORY
MRS. C. BANASAK

KITCHEN
MR. C. JASPER (BAKER)
See page 44.

LAUNDRY
MISS D. LAVOIE
MISS S. WALERIUS
(Missing in photo.)

X-RAY
DR. W. A. HARGAN
(Missing in photo.)

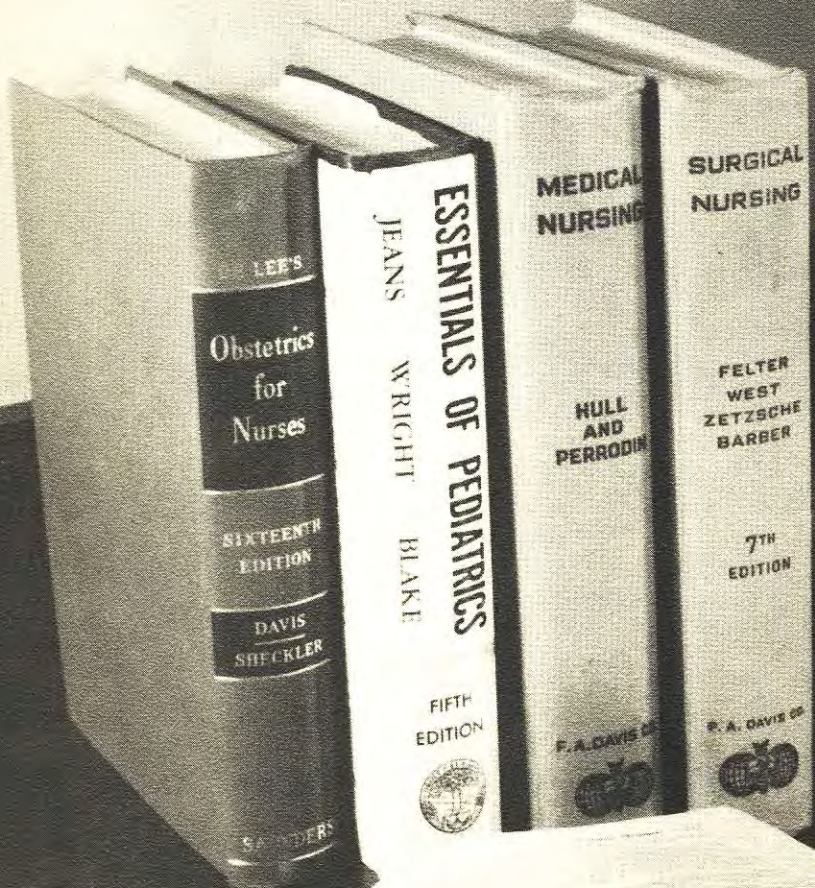
ENGINEERS
MR. J. ENSTROM
See page 42.
MR. J. FLYNN
See page 42.

PHYSIOTHERAPY
MR. A. TATLOW
GRADUATE NURSES
MISS C. KELLY
See page 39.
MISS M. McEWEN
MRS. G. PHILLIPS
MRS. C. GUERARD

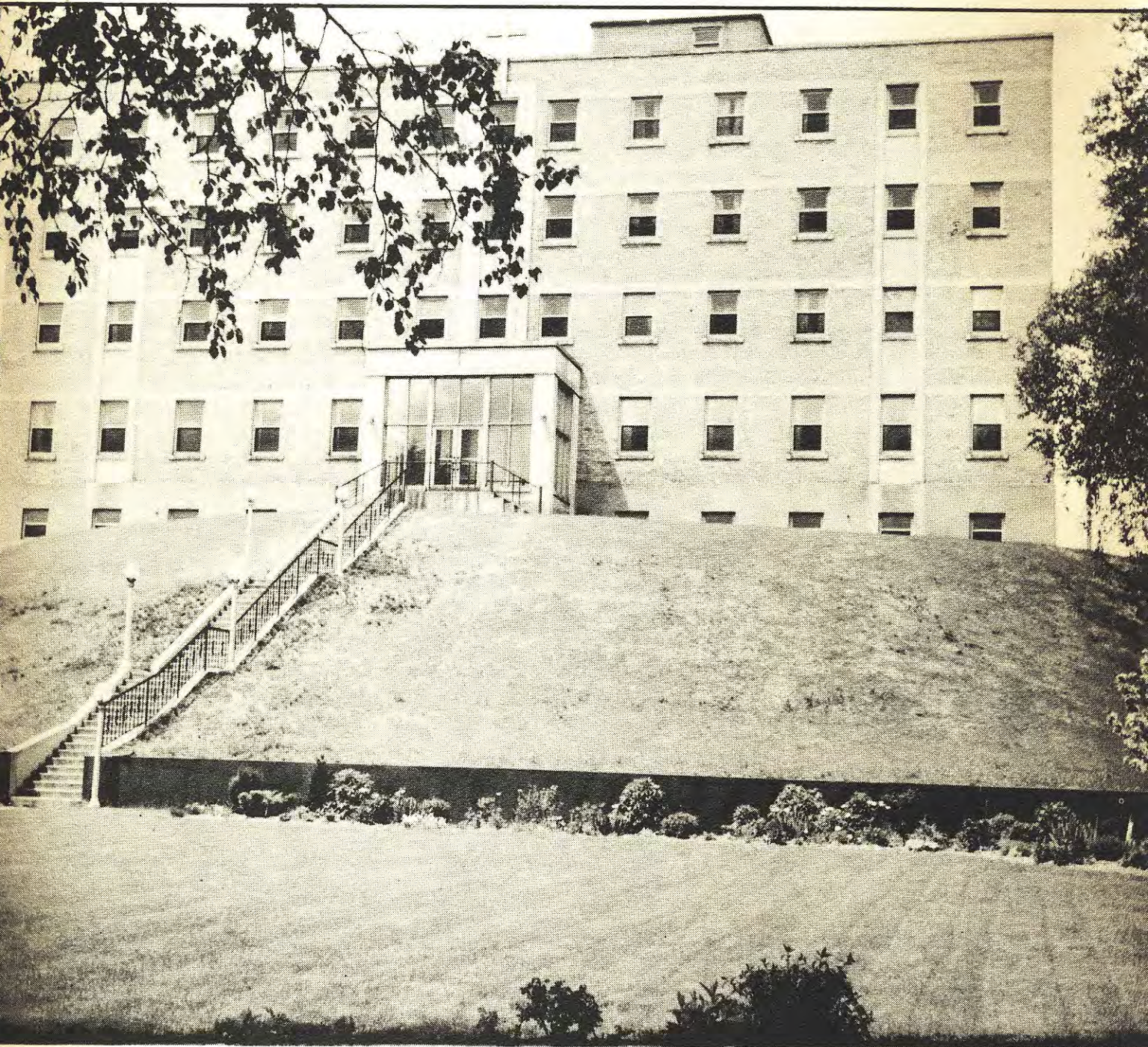


HOUSEKEEPING

The housekeeping department has two main functions, namely, to keep the building clean and to control the linen supply. These are duties which are of primary importance to the comfort and safety of the patient.



School of Nursing



St. Joseph's General Hospital
Port Arthur, Ontario

ADMISSION REQUIREMENTS

Alumnae Association

The Alumnae Association was established in 1907. Monthly meetings are held through which the members are kept in touch with all movements and advances made in the profession.

Financial Aids

Bursary Fund—applications are made through the School of Nursing.

Objectives of the School

The general aim of the school of Nursing is to educate young women through the practice of moral virtues as preparation for their life here on earth and as a guide along the Road of Christ's true followers, to eternal life.

The specific aims of the educational programme are to prepare nurses who recognize the fundamental needs of a person, sick or well, and how to apply her knowledge in meeting the nursing needs of a person and the community.

General Information

The minimum educational requirement is a Secondary School Graduation Diploma of the Ontario Department of Education with study in Grade 12 Chemistry and either Grade 12 Physics or Grade 13 Botany or Zoology, or equivalent qualifications as determined by the Minister of Education. If the applicant resides in another province of Canada qualifications for entrance to a university that is a member of the National Conference of Canadian Universities and standing in science equivalent to that stated above.

Prospective students must be at least 17 years of age, except in the case of an applicant who holds the secondary school honour graduation diploma in addition to the educational requirements as specified herein. It is strongly recommended that each applicant come to the school for a personal interview, if distance permits. Application forms will be sent on request and should be filled out and submitted as promptly as possible. Classes are admitted once yearly, in the Fall.

The connection of the student with the School may be terminated at any time for inefficiency, misconduct, poor class work or a generally unsatisfactory record.

Health Programme

Applicants must present a record of complete physical examination; dental certificate; certification of immunization against small pox, diphtheria, and poliomyelitis. A complete physical examination is given each year.

Course of Studies

The curriculum of the school has been arranged in a system of block lectures. Periods of classroom lectures alternate with ward experience throughout the three-year course. Clinical instruction given by doctors and clinical instructors carry on an active clinical programme throughout the entire period of the student's education.

Affiliation

Experience in Tuberculosis Nursing and Psychiatric Nursing is obtained through affiliation with the Fort William Sanatorium and the Ontario Hospital, in Port Arthur. This experience is not compulsory and is decided upon by the Director and the School of Nursing Faculty.

Expenses and Remuneration

Tuition Fee—1st year	\$75.00
2nd year	\$50.00

The tuition fees are used to help defray the cost of books and uniforms which are provided by the school.

There is no allowance for the first 24 months. At present, for the last 12 months, there is an allowance of \$70.00 per month. Students receive full maintenance during the three-year period.

Instruction relative to the ordering of uniforms will be sent to each applicant after she is accepted.

Examinations

Examinations are held at the completion of a block of lectures. The pass mark in written examinations is 60% and 75% in practical examinations. Students are permitted to write supplemental examinations.

A fee of \$1.00 will be charged for each supplemental examination written.

Student Activities

The Sodality of the Blessed Virgin Mary and the Student's Council plan varied social and athletic activities each year. A three-day spiritual retreat for nurses is conducted each year.

Illness

Students, when ill, are cared for in the infirmary or in the hospital under the supervision of the School Physician. Hospitalization costs during the preclinical period are met by the individual student. Ordinary drugs and medications are provided free of charge. Special prescription and expensive medications are not provided free to the students. The students are allowed two weeks sick leave, during the three-year period.

WORDS
OF



WELCOME
TO OUR
NEW
STUDENT



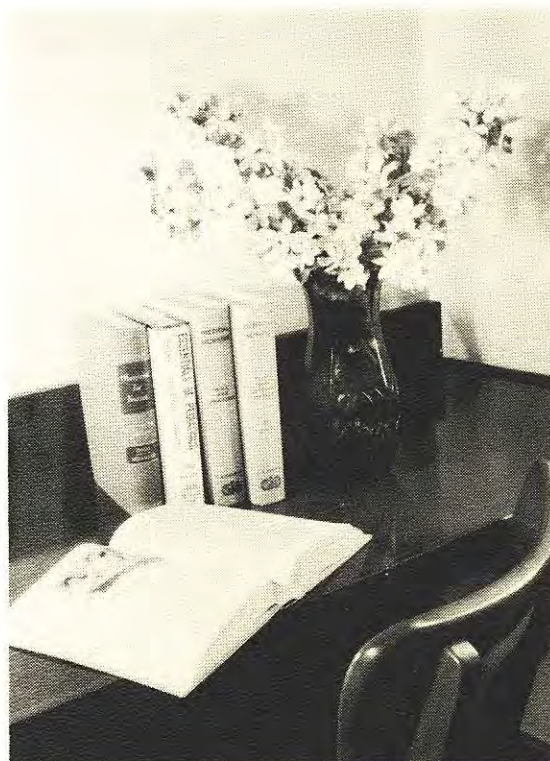
ROOM

ACCOMODATION

There is accommodation for 108 students in 15 double rooms and 78 single rooms.

Each bedroom contains all modern furniture, including a combination desk and vanity dresser, reading and desk for lamps, two comfortable chairs, sink facilities and a large clothes cupboard.

BOOKS OF KNOWLEDGE





Seated left to right—V. Weston, Mrs. C. Hagger, J. Slivinski, S. Dusang
discussing an Organizational Chart.

MEMBERS OF THE NURSING SCHOOL FACULTY

REVEREND SISTER M. MICHAELA, B. SC.N.	- - - - -	Director of Nursing
REVEREND SISTER FIDELIS, REG. N.	- - - - -	Clinical Supervisor Obstetrics
REVEREND SISTER MONICA MARIE, REG. N.	- - - - -	Operating Room Supervisor
MRS. C. HAGGER, REG. N.	- - - - -	Assistant Director of Nursing Service
MISS V. WESTON, REG. N.	- - - - -	Public Health Nurse
MISS JANET SLIVINSKI, REG. N.	- - - - -	Assistant Director of Nursing Education and Clinical Supervisor Paediatrics
MISS S. A. WRAY, REG. N.	- - - - -	Science Instructor and Clinical Supervisor Medical - Surgical Nursing
MISS A. HARRISON, REG. N.	- - - - -	Nursing Arts Instructor
MISS S. DUSANG, REG. N.	- - - - -	Clinical Instructor—Medical and Surgical Nursing
Recently appointed—Sister St. Michael, Clinical Instructor, and Mrs. R. Corby.		



NURSING EDUCATION . . .

Our curriculum is based on our School of Nursing objectives:

1. To encourage and guide each student in attaining maximum personal and professional growth by utilizing her abilities and opportunities to the fullest extent.
2. To help the student understand her own needs, physical, emotional, and spiritual, so that she may be better equipped to meet the patient's needs.
3. To prepare the student, by careful correlation of theory and practice, to give intelligent and effective nursing care in all types of illness.
4. To give the student an added opportunity of utilizing her knowledge and experience gained through affiliation with other hospitals by planning these early in her course of nursing.
5. To enable the student to acquire the technical skills and knowledge which are necessary to the graduate nurse of today

The student receives concentrated theory in the first two years followed by an internship year; throughout the three years the students are under supervision.

Emphasis is placed on total nursing care. Students receive experience in all nursing departments; medical, surgical, obstetrics, pediatrics, and affiliation in psychiatric and tuberculosis nursing.

Students receive lectures in the classroom and ward situations with stress being placed on ward teaching in all services. Ward clinics are held throughout the week for all classes. Planning is necessary to avoid repetition of material.

The guidance program is that the School of Nursing Faculty assumes a dual responsibility: one of these is directed toward helping the student become a worthy member of the nursing profession and the other toward helping her make a satisfactory personal adjustment. It is realized that intellectual ability and professional skills, important though they are, will not inevitably produce a happy, well adjusted nurse. Counselling is considered a basic part of the guidance program and a normal part of each teacher's responsibility. Aspects of counselling which are emphasized include those related to educational, personal and vocational problems.

People in every walk of life are looking at Nursing Educational Programs and evaluating the effects it will have on the community. People realize that it is the concern of the community to ensure a high standard of nursing. It must maintain from tradition all that made nursing great, yet constantly seek new ways of improvement and adapting to the changing needs of the community.

.....
AN
ART
AND
A



SCIENCE





In this photo, the nursing arts instructor, using Mrs. Chase, the school dummy as her patient, demonstrates to a pre-clinical student, the procedure for administering a hypodermic injection.





ONTARIO HOSPITAL—PORT ARTHUR

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PSYCHIATRIC NURSING

Psychiatric Nursing is an integral part of all nursing. It is recognized that patients who are suffering from physical pain or discomfort are also under some emotional distress. A nurse should be able to recognize and meet this patient's need.

The basis of all nursing is kindness. To a very ill patient it is the little kindnesses that mean so much. A smile can make a day brighter. An encouraging or reassuring word

can help the patient to bear pain. A kind deed ever so small can make a patient's day worth living. A nurses' interest and sympathy can give a patient the will to live.

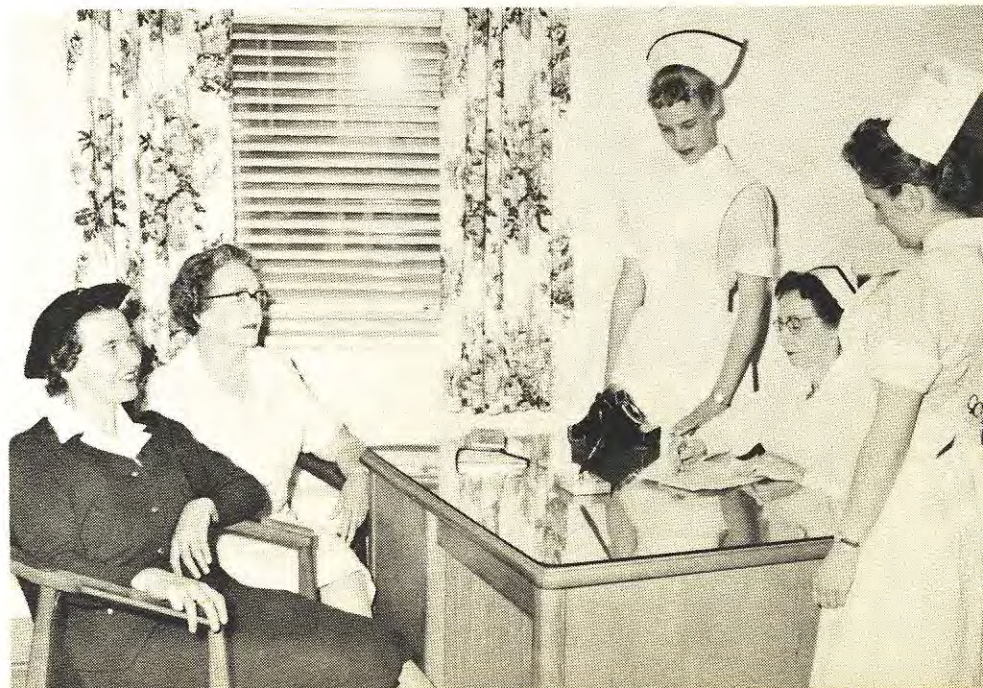
The nurse is also a teacher. The patient looks to her for an understanding and a tangible strength which is greater than his own. He uses her as a "mental crutch" until he is able to walk by himself. She teaches him by word and deed how to control his anxiety and fear.

Personal development provides the background for the psychiatric aspects of nursing. The more fields a nurse can explore, such as music, art, literature, sports, etc., the better she is able to enter into the life of a patient.

COMMUNITY HEALTH

The picture taken in the Health Office of St. Joseph's residence shows our Public Health nurse, the supervisors from the Port Arthur and District Health Unit, and the Victorian Order of Nurses, interviewing two students after affiliation with their services.

Curriculum includes field trips to the different Community Services, also lectures, by department heads of the Community Welfare resources. This is to further the student's knowledge and acquaint her with the facilities which are available in the district for the rehabilitation of their patients.



Rehabilitation of the Tuberculosis Patient

Rehabilitation? What's that? Well, let me define it. It is learning to live and work with what you have left after an illness or accident.

You are told you have T.B.—tuberculosis. Your reaction? Certainly you're shocked. You say, "Me! Tuberculosis! Oh, I couldn't; not healthy little ol' me. Imagine someone telling me that I have to remain in a sanatorium for twelve to eighteen months. What about my job? My family? My life? What will I do?"

Here is where rehabilitation enters the picture. You, in a way, are disabled. You are a different person, insofar as you must alter your life to care for your health. We, in rehabilitation attempt as a team, to help the individual in this problem.

The minute you enter the sanatorium the rehabilitation program begins. You have to adjust your life to the life in a sanatorium; the hours of rest, a period of complete bed rest - maybe three to six months. If your case is one of spinal tuberculosis, maybe to a life on a stryker frame. "What is that?" you say. Well it is a type of bed, made of steel, which maintains your spine rigidly, so as to prevent further damage to your vertebrae. It is easily turned to give you a change of position; to enable you to eat, read, write, etc. Your next step is learning cough and sputum technique. What's that? You will be taught how to cough, to use your wipes and sputum box, and how to properly dispose of them to prevent infection of others.

Next in line is your privileges. Grade "O" is complete bed rest; Grade "I" is bed rest; Grade "II" is up in a chair once daily; Grade "III"—up to the bathroom; Grade "IV" walking-out exercises. When you reach Grade II you are usually allowed O.T. (occupational therapy)—in plain language, a hobby or schooling. In this step of rehabilitation, you, yourself, decide if you want to make your stay in sanatorium an enjoyable and a profitable one.

If you are a man, you can take school work—book-keeping, high school, other correspondence courses, or leathercraft, painting, weaving, woodcraft and many other crafts. If you are a woman, you can also better your education, learn crafts such as knitting, crotchet-

ing, punch work, petit point, sewing. In the sewing you can learn to remake clothes for yourself and your family. Yes; a term in the sanatorium can prove very profitable for your future life if you use your time in a constructive way. This occupational therapy will direct your mind from worry and restlessness which hinders your cure.

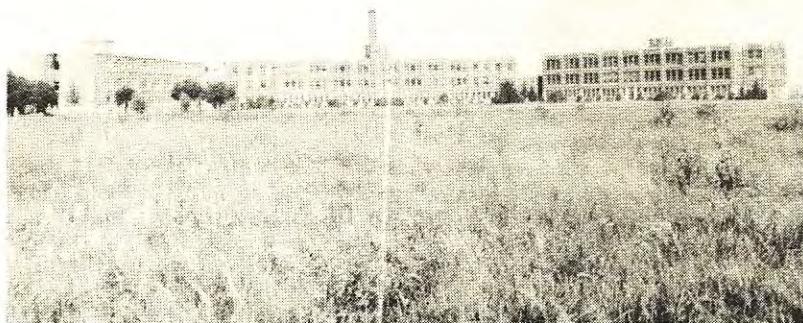
"Well, you say, 'that's rehabilitation within the sanatorium. What about when I leave? Will I be able to get my old job or will I have to search for a new one?'" Vocational rehabilitation here enters the picture. This department is concerned with employment problems.

You may be disabled to a point where your old job is too strenuous, therefore, this team tries to find you a job within your physical ability. If you have been learning a new trade, they will direct you to different companies with references. All in all, they do everything possible to help you get re-employed.

That's the job aspect. But what about family life? You will be

taught techniques to use to prevent reinfection. You must maintain a good diet; get plenty of rest and watch your health.

To sum up—Rehabilitation is learning to live with your problems. It means a return to family or other good living arrangements, stable work, and in the end, personal satisfaction. What you are able to do with the help others give means success or failure or your rehabilitation. It is up to you, the patient, if you want to get well and remain well.



M. Cano

Student Nurse



WORLD SODALITY DAY

The celebration of World Sodality Day is an annual event, sponsored by the Student Nurses' Sodality, a religious society, dedicated to the Mother of God.

The ceremony consists of the Crowning of Our Lady, the reception of new sodalists into the organization, and the installation of newly-elected officers.

The Sodality sponsors many activities during the year, such as a retreat, a living rosary, the observance of special feast days, etc., and plays a very important role in the spiritual life of the student nurse.

CAPPING





I am taught to give spiritual care to the sick and the dying—
to see Christ in my patient.

My Sodality Motto "To Jesus Through Mary" is to study Our Lord's life, try to be more like Him in my daily life as a nurse. "Amen, I say to you, as long as you have done it to Me, the least, My brethren, you did it to Me."

I pray, Dear Lord, place Your wounded hand upon my head and give me strength. At my hour of death may I be granted a place beside Our Lady, Your Blessed Mother to serve Thee as She did.—A Sodalist.

SODALITY





RECREATION





SHAMROCK FROLICS.....







DRAMA





INTERMEDIATES



SENIORS



E. Montgomery



L. Dykeman



E. Farrant



M.L. Moynahan



M. Gelforster



F. Gregurich

Graduates of 1957



S. Nusang



B. Harquail



E. Caron



H. Harrison



ST JOSEPHS GENERAL HOSPITAL PORT ARTHUR



P. Usano



S. Gullet



L. Brown



H. Metail



F. Brassard

Graduates



H. Christie
Toronto, Ont.



E. Mucras
Port Arthur



W. Coulter
Windsor, Ont.



C. Quinn
St. William



R. Cavoie
Saran Day, Ont.



L. Gaudreau
St. William



E. Scott
St. William



L. LaHaye
Norman, Ct.

St. Joseph's General Hospital



1920

1884

1958-60

Port Arthur, Ont.



R. Ondusko
Sarnia, Ont.



R. Gidycz
St. William



G. Rumber
St. William



L. Callan
St. William



H. Grunichuk
Niagara, Sask.



H. Rowden
Winnipeg, Man.



D. Kanda
Schreiber, Ont.



E. Hennich
St. William



C. Wellman
Schreiber, Ont.



M. Doss
Schreiber, Ont.



N. Brunella
Madison, Ont.

1958



N. Denham
Foleyet, Ont.

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