



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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*and...*  
*there was once a house*

by Bill Sims

A series of articles written by Mr. Bill Sims for *The Manitoulin Expositor* concerning Saint Joseph's Hospital in Little Current, Ontario between September 25, 1945 and December 4, 1994. Wilfred A. Sims, who went by the name of Bill was a local resident of Little Current, a First World War veteran, and a regular contributor to *The Manitoulin Expositor*. His boyhood home was the original St. Joseph's Hospital.

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*and...*

*there was once a house.*

by Bill Sims



# Sandfield summer: Bill Sims reflects on the role of his old home

*The Manitoulin Expositor, Wednesday, August 21, 1980*

*Editors Note - This story on origins of the Manitoulin Health Centre, by Bill Sims, is Part 1 of a two part feature and will be continued next week.*

Reflections of times that were and of things to come as shown on the television in to various Sunday programs has prompted me to relate the various stages of the former St. Joseph's Hospital in town which was recently 'taken over by the Province of Ontario.

Though I was not born in the original building, but in a house now owned by the Cook family adjacent to the former curling rink on Campbell Street, my early recollections of life there remain very real in my mind. And now that I understand that the original front part of the large house is to be dismantled I think that the real architectural beauty of the beautiful house will be forever destroyed.

The two storey mansion was conceived by B. Becks who with his older son, who was also a carpenter, did most of the structural work also helped with the masonry. The foundation was created of immense two-foot blocks and was placed on gravel above the quicksand to give a good footing for the three storey building while a 40 foot high chimney erected at the rear of the building to be used for the heating plant fired by wood. Conceived as a two family residence it was built with a large double width stairs heading from the front door and divided with a wall down the centre. My earliest recollection was that it was immense and I think that my father Thomas C. Sims was, I believe, what might be called a captain of industry who believed Little Current would one day be worthy of this magnificence.



Bill Sims once lived in the building which now serves as the old portion of the Manitoulin Health Centre.

Possibly, in a way, he was right. As one of the Sims Bros, he operated a large general store where the drug store and Turners are now located. Later the Sims Bros. (Thomas and Charles) purchased timber rights near Whitefish Falls and operated them for some years, supplying all supplies for the camps and using their own tugs for transportation.

In the early 1900s there was no radio or television so each community had to make their own entertainment. The west side of the house was made so that the three rooms could be joined to form one large room. My recollection was that once a year my dad and mother put on a Grand Ball and it was necessary at that time to hire the Wikwemikong orchestra and bring them to town. I can still remember my young brother Arnold and I sneaking down the stairs so we could watch the proceedings. It usually took a week to get ready for the event since it was necessary to lay canvas over the entire surface and then have it waxed.

In that era there was no such thing as electricity so the entire house was lighted by gas which was generated by carbide in a machine located in the basement. As a boy I had one vivid recollection on how the gas was created as Arnold and I were curious

as to how we got everything lighted. We has a caretaker Jack Smith (a handyman) who worked for my father, whose job it was to look after the gas machine, this one night, evidently, there was not enough pressure to give good light throughout the house and as the party was about to get underway my dad was very angry and went down to the cellar to find out what was wrong. Jack said he could not get the drum to rise since there was not "enough" gas generated. However, he said he would look after it and to create more pressure he sat on the gas drum.

Jack then looked around and investigated to see if there was a leak. He had meanwhile got another man to help him who got the idea that if Jack would sit on the top of the drum he would locate the leak and they would then be all right. Since there was no light, the helper lit a match to see....There was a loud Boom and Jack hit the ceiling. Reminded me of the old saying (There was a man named Billy Bass who tried to make hydrogen gas. Lit a match too soon, now he's up in the moon. Silly Ass, silly ass, silly ass.)

I can't, remember just whether they held the party but I believe that by borrowing lamps and candles the party did get completed, but we had to get a new hired man.

Going back to the early 1900s I remember that since we had a two-acre lot we also had a standard bunch of kids and were never at a loss for a game of baseball, and in the winter when the back lot flooded we had a hockey rink. The front ditch would also flood and freeze and this made for an alternate rink and change of venue. The hill now that goes past the apartment was known as Shannon's Hill to distinguish it from the hill from downtown known as the Big Hill. The back lot on which the hospital was always flooding from the back street and provided us with a nice pond in which we would dig canals and do our best to entice more water on to the lot, it was really a paradise for kids with boats.

So busy were we that we would never have had time for television, or even radio. I remember creating a junior baseball team and calling them the Whiporwills. Eventually we got to be fairly good and at one time did challenge the Sheguiandah Indians; had to go out there by boat as nobody had cars or bikes. The Indians had great fun with us and one I really remember was Eli Joe. He took a great like for Herbie Hembruff (who was short and fat) and he was hard to get a ball low enough to call a strike. Disgusted, Eli Joe would then toss the ball over the palate and Herbie would blast it out of the lot.

We each paid for our own uniforms from goods bought from Oliver Vincent who operated a store now occupied by A.J.Smith. We couldn't find any opposition in town so my dad gave us free passage on the mail boat, the Bon Ami to Spanish Mills where we arranged a game to be played between trains when the Bon Ami came back from Cutler where the boat connected with the CPR for the mail. Cant just remember how the games turned out as the Spanish Mills team had a hard time to gather up 9 men.

One other time we received a challenge from Gore Bay, if we would go up there. My Uncle Charlie owned a yacht called the Mollie, and he offered to take us up for \$10 so I collected the money and I remember we played in a field that had an old barn on one corner. We had a left-handed boy, Carl Perkins, who was a real jewel; the only ball he could hit was if they threw it straight at him. We had two men on bases at the time and the Gore Bay pitcher thought he would scare the batter and made the mistake of throwing the ball straight at the batter. Result: Perky hit it right over the barn and I don't believe they ever did find the ball. Since that was the only ball we had it ended the game: probably just as well as my brother Arnold who was subject to nose bleeds, developed one and we had to take time out to get him back to full strength. However, we did get back home sometime that night so it was voted a successful trip.

My school days at the old Public School were, to me, a real trial. My mother took particular care to have my hair curled and this was a real trial until I finally persuaded her to have my hair cut - much to my Aunt Molly's dismay. I remember my final revolt saying "tut em off! Tut em off! I don't wanta be a girl!"

Later, due to the fact that I was so much smaller than others in my class at school, I was always fighting my way; even when coming home at noon. We had a couple of what might be described as bullies, who were always picking on the smaller boys. For some reason or other everyone wanted to run home to see who would get to the Fire Hall corner first. One boy who took particular delight in this type of harassment was Eddie Cook, a town boy who would run up behind his victim and jump on his back; a very dangerous operation. Fortunately, one day at noon I heard him running behind me and when he jumped on me I just humped my back and he landed on his head some five feet ahead of me. I was never troubled with him ever after; which goes to prove something .

Baseball proved to be an expensive game for my dad as we used the lot on the east side of the house and every so often some batter would break on of the four-foot windows on that side. Eventually we has to move to the west side where there were more trees for shelter and window breakage was reduced to half (which was still heavy. )

When asked, what did you do before television?" You were always able to answer "We never did have any time."

My dad had one large room on the west side of the house that he called his den in which used to entertain his many visitors and where he had a large gun case (he was continually buying guns, even having sent to England to have one made especially for him) and where he also had all the tools to load cartridges when he wanted special loads. He finally purchased an 8 gauge shotgun, having been frustrated by ducks refusing to stay in range. Since he couldn't buy shells for the huge gun, he would have to load his own.

The den was a special room and his favourite place in the house. A large couch of walnut occupied one side of the room and was a favorite place for visitors. Later, a small pool table was purchased and through we all used it a t various times I never did become a good pool player. However, it did rub off on brother Lyle and paid off for him when he went out west to teach school. He used to entice the Camrose farmers to play pool (pea pool) and managed to collect the few odd dollars and would them take me to Edmonton with him to the races (and usually won enough to pay our way back to Camrose.) so one never knows when some extra skill may come in handy.

I often wondered in a rather abstract way, how my dad managed to finance our family but we seemed to trot merrily along without a thought for the morrow. We were on our own most of the day as we had a row boat and later a canoe and were seldom home. I suppose in later years we managed on our own; though until Lyle got a job teaching at the Sucker Creek school we had no income. Turners at that time operated a large general store and I obtained a job as grocery clerk at the large sum of \$6.00 per week, so was on my own.

The big house never did seem too bid for us as we used parts of it at one time or another. The third storey was especially a real haven for us and we used it to play floor hockey with a rubber ball. Also here were tow dark rooms where Lyle developed his films as he was a camera hound. The second storey was taken up by bedrooms and used extensively.

I remember that as the girls grew older the one back room was converted into what was called the doll room where Kathleen, the younger girl, had a large bed filled with dolls of various sizes and shapes. we had a dog (wire hair) who used to snuggle in between the dolls and go to sleep. And he used to wake me I early morning to let him out at the back door.  
Sims recalls MHC home and the life within it

As we grew older my mother undertook to alter the house and as the house was not used by only one family a new staircase was added at he kitchen and one could use that without going through the front of the house. This led by steps from the kitchen to a platform with steps down the other side to the back sitting room. And a pantry also was carved out from the kitchen and hidden under the stairs.

At the time we were growing up I cannot imagine how my mother ever managed to organize the house as she also had her own cow and since there were no cars at that time she drove her own horse and buggy; many a time driving Lyle to the Sucker Creek school on stormy days.

The basement of the house was the full size with two small cellars-separate from the furnace room. Everything came in large sizes in the early 1900s and I remember in the fall watching delivery rigs bringing barrels of apples and storing them in the one cellar while the canned berries and jams were stored in the west cellar.

I remember one night hearing a noise of broken bottles coming from the cellar so Lyle and I took our shotguns and went down to see what visitor we had. We took a flashlight with us and opened the cellar door to the small cellar that housed all our fruit. We could not hear any noise, so we showed the light around the walls...and then our hair really froze! There, coming towards us, was a full-sized skunk. It had evidently broken the window and landed on the floor. Since we couldn't shoot him where he was, we hastily beat a retreat and shut the door before he could get out into the main cellar. Thankful that we had got back out that night, we decided to leave him until morning. It was a night to remember!

Early next morning Lyle and I tried to develop a strategy so we could get Mr. Skunk out of the house. Fortunately there was a trap door leading to the woodshed behind the house so before we let" the proud visitor out we put a plank down the back stairs, placed a pan of milk on the bottom step and then silently moved to the shut door and went up the steps to the kitchen in nothing flat. It wasn't too long before curious Mr. Skunk walked out and started to explore. Eventually he spied the bowl of milk and after several minutes decided to walk up the plank. It took the better part of the day before he got as far as the shed and meantime we had every door open for his majesty and it was with a sigh of relief that we watched him amble out the west door of the shed. Since we intended to let him wander as far away from the house as possible we closed all doors and said goodbye. Exit skunk. Reminded of the poem where there was a man whose soul was dead who never to himself had said "This is my home, my native land.", we were more than willing that he try some other home and native land!

The east side of the house was divided into three rooms with the kitchen at the back. The front room on this side was used only for special occasions and was called the drawing room: beautiful settees and antique chairs to match together with occasional chairs that really looked too frail to support the various ladies that were fortunate enough to be invited to visit and admire the paintings, the vases and the many other items that were kept in this beautiful setting that we kids never were allowed to touch. To me it represented an untouchable room and we were very proud of it. I remember the only time

of the year when it was used as a common room was at Christmas time when a large Christmas tree was erected and trimmed and lighted and Santa Claus had the privilege of putting our presents under the tree. We never did catch a glimpse of the Jolly Old Elf - but had to recite the whole of the "Twas the Nite Before Christmas" before we were allowed to enter the room.

**Editors note:** *This is the second of two parts on Bill Sims' reflections on the origins of the Manitoulin Health Centre. Last week he spoke of his family, friends, Little Current and his old home ...the Health Centre...where he continues this week.*

My favorite room though was the dining room that had bay windows and had a beautiful walnut and oak hardwood floor that was based on a canvas footing and laid on a 'cement base: how it was done I never did know; but to my mind it was one of the most beautiful floors I had ever seen. The large hall also a floor that consisted of hardwood blocks laid a piece at a time and must have taken weeks to be properly fitted. It confronted visitors to the large front door and was an imposing sight. I really felt badly when it was to be taken up and replaced with tile.

The kitchen was a large room and the final one on the east side and to me it seemed huge and was the home of the cook who reigned over it and kept the family out whenever she was engaged in cooking (which was most of the time).

During our formative years I always remember we had a so-called maid who; helped with the housework and tried to keep the huge floors relatively clean. There were no unions in those days and we had quite a large turnover in girls and mother was forever hitching and driving all over the island to secure replacements and' taking one or two of us along for company, I remember that we had one of the Bidwell girls (and I used the term loosely) and she used to take me out to her family's farm where I got to know farm life (I can imagine my mother giving a sigh of relief when Emma took me off her hands, even for a couple of days).

My brother Arnold (Abbie) and I lived in the shadow of Lyle as he was (he eldest and thus got a chance to attend Ridley College at St. Catherines where he contributed to their college paper and sent us copies that we greatly prized; and this I think almost amounted to a hero worship of a wonderful brother. Though, in the long run I wouldn't see that the money thus spent on his education did him much good. I suppose in a way that it was wasted. I verily believe though that he did have the ability to have gone far in any profession he would choose. He was brilliant in math and kindred topics whereas I was rather slow. I remember hearing part of a conversation between my mother and father in which my father said " He would have made a great politician except for the fact he is too lazy. Just like the Boyles.", which my mother resented. The Boyles were the United Empire Loyalist family who were granted a hundred acres of all the best part of the Niagara peninsula and frittered it away as long as they could borrow money on the land.

I remember my Uncle Dick, as well, who worked in the rubber mill at Port Dalhousie who preferred that rather than the work on the farm. It was a very choice farm and was located only four miles from Port Dalhousie. After his death his sister Margaret lived alone on the farm in the huge farmhouse and I went down to see her when I was in high school at Meaford. It was a shock to me to see the run down conditions of the house as I had always understood that the Boyles were one of the elite in the Niagara peninsula. My mother would not tolerate Margaret Boyle living under such conditions and brought her back to the Big House in town, eventually financing her with chickens and erecting a hen house



for her at the back of the lot, where for years she specialized in many different breeds of hens and worked with them to get special eggs. These eggs she sold only to W.D. Ritchie a town grocer and managed to possibly bread even with buying the grain from him on her own account.

My recollection of the status of the back lot places an ice house directly to the rear of the house and the hen house adjacent to it. There were also fruit trees, cherry trees and apple trees for a small orchard as well. Later, after I took over the property, I built cement warehouse at the southeast corner of the lot and when we were in the store business we used that for heavy hardware and feed. I remember after brother Lyle got a teaching job that I planted a very successful garden and we never lacked for vegetables: this was before the First World War! After we came back I had lost my taste for gardening and did little in that line again.

My mother was in poor health when we got back from the war and never did recover her health. She had, however, saved all our war subsistence sent to her and this proved to be a start in the merchants' business. My brother Lyle had to put up the greater amount as he had a sergeants pay whereas I was but a lance corporal.

At the time we came back J.G. Sims (my fathers brother) operated a store and undertaker business in the building now operated as a laundry, and had just received word that his only son Douglas had been killed in Belgium so he decided he no longer wanted to stay in business. So Dad decided that would be a good place to start and negotiated a sale to a new firm of Sims and Company (three partners - T.C., F.L., and W.A.Sims).

I was never too enthused about the undertaking part of the business but went along hoping that nobody would die until we would get a chance to learn the business. Two weeks after we took over we received word that a Mrs. Smith had died and J. G.Sims then started to induct Lyle in the art of salesmanship. I remember he did have quite a few coffins and these had to be finished before they could be used. By today's standards they would not pass too well, but then the price was also a matter of consideration. An ordinary funeral was quoted at \$150, but in the case of Indians who supplied the box he charged \$50. for the hinges, handles, etc., so the cost of dying at that time was not unreasonable. The price of the business included a hearse and one horse with stable.

I can just recollect that Lyle made a very presentable Funeral Director and he got the first of the 'funeral over without too much fuss. Meantime I tended store and did a fair business selling high chairs and picture frames.

However we didn't stay in business too long as Dad and Uncle Jack could not agree on a settlement. Meantime Oliver Vincent who operated a general store (now occupied by A. J. Smith) wanted to sell out, so Sims and Company took over from him. It was a much nicer business to be in but profits were not so good as we had to handle a large amount of flour and sugar that entailed hard work, but you cannot have everything so we had some new headaches.

Meantime we were all domiciled in the Big House with Lyle teaching at Sucker Creek and Rita teaching at Gore Bay while my younger sister Kathleen was attending Normal school at North Bay. At that time in the early spring my mother died suddenly and later that year I took over the house, and also the relatives and friends of my sisters that seemed to think it was up to us now to entertain them free of, charge. Eventually by being tough at times we gradually cut down on the avalanche only to have

some other hangers-on take root. Eventually I got married and the whole responsibility fell on my wife, with Dad telling her she was in full charge regardless of any claim by other relatives.(ADVICE TO WOULD BE HOUSE OWNERS Do not buy a large house let the relatives sleep in tents...even if you have to buy them!)

When Lyle and Rita finally got married we soon perceived that it was impossible to carry on the entire house and for heating purposes we cut off the West side, I forgot to mention that the house was heated by hot water and this required a large amount of heat in order to get the circulation started.

When my Dad died suddenly from an attack of appendicitis and we heard that the Roman Catholics were contemplating establishing a hospital here, we got in touch with the Bishop at North Bay and immediately sent the Sisters of St. Joseph's to look over the property. At that time there was the question of power and water to consider. We had our own pump house down on the water front and for a time used a windmill to operate the pump that shoved the water to the third storey in the house where we had a forty barrel tank to supply the house with needed water. Normally this supply would last a week or ten days and chlorinated our own water (later we installed a gas engine to do the pumping so we would not be dependent on the wind.) I think at that time we were possibly the only house being supplied with water from the lake and this was a major factor in the purchase of the property. Originally I think the house was rated a twelve-room house (actually it was much more) but was and still one of the best constructed houses in town and has proved to be one of the town's best assets. Personally I still like the structure as it is, and will be sorry to see it changed even though in modern terms it may not suit the powers that be.

# St. Joseph's Hospital in Little Current opens to the public

*The Manitoulin Expositor, September 25, 1945*

**Little Current, Sept 25.** - The long-delayed opening of the new St. Joseph's Hospital in Little Current became a reality on Thursday when the building was officially opened to the public. The chapel in the new hospital on the upper floor for the Sisters of St. Joseph was blessed and dedicated by His Excellency Bishop R. H. Dignan, of North Bay, at 9 o'clock in the morning and dinner was served to a large number of the visiting clergy from the Sault, Blind River, Killarney, Sudbury and Wikwemikong at noon. A social reception was held from 3 o'clock in the afternoon until 6 o'clock when hundreds of visitors from the town and district and from the various towns and cities were shown through the new hospital and the building officially opened to the public.

Rev. Father M. J. Kelly, of town, acted as chairman for the occasion and introduced the various speakers. His Excellency Bishop R. H. Dignan made a short address at the reception and thanked all those who had made it possible to have this excellent institution located in what he thought was one of the finest locations in the entire North country. He was sure that the Sisters of St. Joseph who were in charge of the new hospital would do everything to merit the confidence imposed in them and that the new hospital would fulfill the hospital needs of the community. Short addresses were also given by Dr. J. O. McDonald, of Sudbury; Canon Haines and Rev. E. W. Shaw, of town, and Mr. Fabbro, the architect, of Sudbury. Mrs. E. O. Vincent was the convener of the social function and Mrs. W. J. Golden acted as hostess, being assisted by the ladies of the parish. Other visitors were Chas. Low, of Killarney, who brought a large number of visitors from the fishing village; Drs. C. R. Young and Jno. Carruthers, of town, and several of the town officials. The hospital that has a capacity of 20 beds will start operations with 10 beds due to delay in delivery of equipment.

## **Cubicles Delayed**

It is the expectation that the other 10 beds will be available in the near future. The baby cubicles have also been delayed in transit and together with the X-ray equipment will be installed in the next few weeks. Meantime, with all inside work on the building completed and in readiness, it was thought better to open the new hospital with the expectation that the balance of equipment would soon be available. The opening of the new building has at last made it possible for the realization of the dream of local citizens, that some day the town would have a hospital of its own and not be dependent on outside hospitalization, and the village Of Killarney that for many years has advocated a hospital at this "point also has seen this accomplished.

Plans were tentatively made five years ago to establish a hospital here but due to various obstacles being placed in the way the plans were for the time being laid aside. Bishop Dignan, -however, did not entirely abandon the idea and with pressure being brought to bear from both the Killarney and Little Current municipal bodies, and with the support of the local authorities. Action was started in the spring of 1944, and after much delay the consent of the provincial government was secured. The large three-storey residence of W. A. Sims on Meredith St. with the spacious grounds was inspected and an option taken on the building. However, it was not until late in August that the purchase was made and in September the first plans for the hospital taken up at Toronto. Originally it was planned to use the original building for a six-room hospital but as departmental regulations called for an almost complete remodeling of the present building this was scrapped and other plans sub-

mitted calling for an extension to the original building of some 30 feet. Delay followed delay and it was" not until late October that work finally commenced. The final plans called for raising of the back roof to make for a three-storey at the rear to connect with the new addition and the original building: also had to be raised two and a half feet to give a larger basement space, so that with the new specifications and the difficulty of working in the cold weather, the opening of the hospital was delayed from month to month. The original contractor, A. J. Coules, of Sudbury, did not complete the building but was succeeded late in the early summer by Harper & Vuori, who did the painting and decorating and sided the new building with the asbestos and brick siding, completing this part of the work in August. New steps and new drains were also laid and a complete new cement walk laid to the roadway and the entrance changed while the finishing of the interior was also completed.

The building has been completely fire proofed through and an elaborate fire alarm system - installed in every room of the large building. The basement or lower floor houses the heating plant, the laundry room (equipped with all modern equipment), the vegetable cellars and coal bins, the nurses' dining room and kitchen and the tray shelves and other apparatus necessary for the service of meals and medicines. A large dumb waiter goes from the lower floor to serve the upper floors and a laundry chute connects directly with the laundry room from all floors. Hardwood floors covered with inlaid linoleum are on all floors and the building has been entirely replastered with white walls in all the wards and other rooms. The babies' room is being equipped with the latest in cubicles and has its own refrigerator and formula room connected with the main room while the doctors' dressing rooms and wash - up rooms are on each floor. Fire protection is provided for by standard hose connections on each of the floors.

Rev. Sister St. Reginald, who is the superintendent of the new St. Joseph's Hospital, is a specialist in X-ray equipment and the assistants in the hospital will merit the highest praise for their work in the past in hospitalization, the town and district are highly honored in having the modern hospital established at this time and are to be congratulated in at last having hospital that the town and district long needed.

# Atkinson Fund gift elevator results in hospital addition

*Special to the Star (not listed what paper), date hand written in 1953*

Little Current, Aug. 10 - A grant of \$18,280 from the m Charitable Foundation for construction of an elevator at Joseph's hospital here, was announced today by Sister Rose Marie, superintendent.

Little Current, a coaling port and tourist centre of 1,500 people on the northeast corner of Manitoulin Island, was un-able to raise funds for a much-needed elevator for the three-hospital. The new water system and school wing have already loaded the municipality with a heavy debt. The town is not blessed with enough high-income families to raise the required amount through public subscription, and it seemed as though the elevator was to remain but a hope.

## **No Stretcher Trip on Steps**

The grant from The Atkinson Foundation, said Sister Rose Marie will mean that patients no longer will have to endure the suffering involved in the torturous stretcher trip upstairs and down. Although the stretcher bearers were always careful, there was the constant danger that one would stumble or fall and the patient would be further endangered.

Need for the elevator was especially demonstrated when they brought Doug Heis, star defenceman of Sheguiandah's hockey team, to hospital with a fractured back. The hospital staff had to do a lot of shuffling to get him a ground-floor room, They would have liked to put an upstairs room but back was broken in two places and the doctors couldn't risk carrying him up the stairs as they have to do with so many other patients.

In the Heis case as in other emergencies the staff appreciated the gracious and uncomplaining manner in which Doug and all the other patients accepted the very crowded conditions which frequently prevail. The Sisters and nursing staff have greatly appreciated the courtesy and cooperation at times when the best they had to offer was a bed in the corridor.

There was a lot of worry among the town's hockey fans about Doug's predicament. They knew St. Joseph's hospital hadn't an elevator and they knew its ground floor was packed with patients. But Sister Rose Marie calmed their worries. Doug Heis, she assured them, was comfortably located on the ground floor and progressing nicely.

## **Hockey Future in Balance**

Doug is a popular hero here. The fans of the juvenile hockey circuit still talk about how the 14-year-old player sparked his team through a whole season of victories without a single defeat. Badly hurt in an accident while cycling, Doug's hockey future hung in the balance. The mishap served to focus attention on the plight of the hospital without an elevator. St. Joseph's serves the major cases among both whites and Indians throughout the island and over a large mainland area. Latest word is that the hockey player is well on his way to complete recovery and may be back on the ice for at least a part of the coming season.

Encouraged by the help of The Atkinson Charitable Foundation in providing the elevator, and facing still greater demands for hospital beds, the hospital, backed by the mother house of the nursing order and with the assurance of government grant, launched into the building of a new 23-bed wing which with the new elevator is expected to one officially opened about the end of August.

Hon. McKinnon Phillips, minister of health, and C. J. Telfer, director of public and private hospitals division, Ontario department of health, have been interested and have co-operated in the building project. "Without the Foundation's generous assistance none of this needed expansion would have been possible," declared Sister Rose Marie, St. Joseph's hospital was made possible in 1944 when the 18-room three-storey mansion of the former Indian agent became available. Established by the community and operated by the Sisters of St. Joseph of Sault Ste. Marie, the building was renovated to accommodate 47 beds, including seven bassinets and eight cots. The hospital was, hardly open when patients became so numerous they were literally "hanging on the walls."

Its records show the hospital's services have been available to rich and poor over a wide area without regard to race, creed or color.

Surrounding communities have known its benefits and the names of Whitefish Falls, Gore Bay, Birch Island, Killarney, Manitowaning, Silver Water, Meldrum Bay, McKerrow, Sucker Creek, Wikwemikong and Sandfield residents are common in the list of patients.

Injured or wounded tourists and hunters have added the names of many other Ontario and U.S. centres to the list. Often the hospital has had to care for as many Indian patients as whites. It has always stood ready to serve any of the island's 8,000 white and 3,000 Indian populations.

In an area where most buildings are built of wood, the hospital's construction is considered of a particularly sturdy nature. It is covered with Insul-bric siding. Its basement includes a laundry, kitchen, boiler room and nurses' dining-room. The first floor has the administrative offices, the x-ray room, wards and laboratory. On the second floor are wards, the operating room, obstetrical wards and nursery. The third floor contains the chapel and the staff sleeping quarters, the whole is clean, airy and brightly painted.

### **Has Modern Equipment**

A visitor to the hospital will find upwards of 35 patients receiving care. The hospital is well equipped for pediatrics. It can also handle major surgery cases and those requiring oxygen tents or incubators. It has the most modern equipment for the administration of anesthetics.

In point of years of service at the hospital, Dr. J. A. Henry is senior doctor of the medical staff. He came to Little Current in 1946 after serving six years with the Royal Canadian Navy. A quiet, unassuming surgeon and general practitioner, Dr. Henry is often to be found in his office until after midnight if patients are still there to be cared for.



Atkinson Foundation gift brings hospital addition

Dr. J. F. Bailey, also a surgeon and general practitioner, started his practice here in 1948; Dr. J. A. Dixon, senior in years of experience among the hospital's trio of doctors, came out of retirement to help the island.

Sister Rose Marie is assisted by Sisters Mary Grace, Eugene, Loretto, St. Stephen and St. Gregory and a lay nursing staff.

## Staff At St. Joseph's Hospital Sponsors Christmas Tea and Bazaar At L.C.



Many guests attended throughout the afternoon - in background, two nurses, Mrs. Gail Murray (left) and Mrs. Joyce James (right) are seen pouring tea.

Miss Agnes Pheasant were in charge of the bake table which featured homemade pastries, cakes, pies and candy. The table was centered with a novel green feather tree surrounded by brightly coloured costumed skaters (paper).

The kitchen staff did an excellent job of replenishing the plates of sandwiches and dainty pastries for the guest with Mrs. Irene Drolet and Mrs. Hazel (JIM) Ashley in charge of the kitchen workers, who were also members of the hospital staff.

The main tea table with its sparkling silver tea Service was highlighted with beautiful low arrangement of large yellow and white mums. The flowers were donated by MR. And Mrs. W.D.Murray of Manitoulin Gardens.

Tea was pored by staff nurses who came in relays form the hospital to take turns, pouring tea throughout the afternoon. Theses included Mrs. Gail Murray, Mrs. Joyce James, Mrs. Jean Fenton, Mrs. Jean Donaldson, Mrs. Jean Croft, Miss Joan Littlejohn, Mrs. Peggy Sagle, Mrs. Sally Williamson, Mrs. Nellie Heier and Mrs. Velma Wilkinson, who was also in charge in tickets at the door.

The tea tables were attractive with centre pieces of Yule logs, lighted candles and dainty holly wreaths Mrs. Jessie Campbell was in charge of the tea servers with staff members assisting at intervals.

Mrs. Jean Croft and Miss Joan Little john were in charge of the Bazaar table. Guest enjoyed pre-christmas shopping from the wide array of handicraft articles. Other staff members assisted.

At the close of the afternoon a draw was made for the door prize which was won by Mrs. Barbara Squires.

### Staff Dance

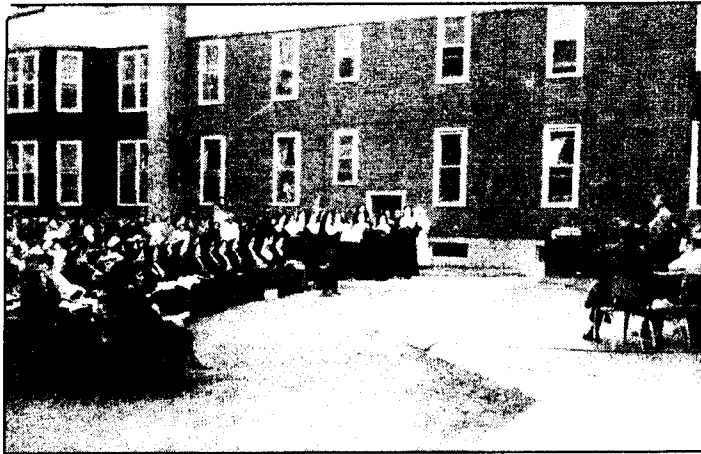
In the evening, the annual staff Christmas party was held at the Legion Hall with taped dance music supplied by Dr.J.F. Bailey. The entertainment committee consisted of Gail Murray, Linda Bowerman Michael McAnulty and Cathy Cerdawall. Gaily coloured balloons were added to the Christmas decorations for the staff party. Special invited guests for the evening were Dr. J.F. Bailey, Dr.J.A.Henry, Dr.R.Hayward and Dr. Trip.

The sparkle of bright table Yuletide decorations and the glow of candles gave a festive air to the second annual Christmas tea and bazaar at he Legion Hall on Thursday afternoon. The function was sponsored by the staff of St. Joseph's General Hospital, Little Current.

Poinsettia and holly wreaths were artistically arranged with garlands of red and green. A novel touch was a five foot replica of Santa Clause perched on the piano. Mrs. Margaret Morphet and

## Musical interludes by sisters of St. Joseph at opening

*The Manitoulin Expositor, Thursday October 27, 1966*



B. G. Turner, Chairman of Board of Directors, welcomes guests.

Mr. B.G. Turner, Chairman of the Board of Directors, of St. Joseph's Hospital, welcomed the guests on behalf of the Sisters of St. Joseph and Board of Directors. "We feel that this building is a symbol of what can be achieved when many communities join ranks in a common and worthy cause . . . . We have had fine cooperation. from all levels of government and private and commercial donors. Mr. Pearson and Mr. Farquhar have been very helpful, as have the municipal officers in this area . . . . I would like to thank the men who have served on the Board of Directors. While Mr. Spec's Building Committee have had to bear the brunt of the work, all the other members have had problems to deal with and have done so, well and cheerfully."

Mayor John Farquhar said "I am privileged to be Mayor of Little Current at this particular time when we are officially opening this valuable addition to our town ... I am proud to have been associated in even a small way with the people who have made possible this tremendous accomplishment. To chairman, Mr. Barney Turner and all the members of the hospital board who have been working with the Sisters of St. Joseph to create this new hospital, I say that you have every right to feel proud and satisfied. The people of Little Current along with all of the residents of the Manitoulin district owe you an immeasurable debt. On behalf of this town, I say "Congratulations" on a terrific job of public service.

To the Sisters of St. Joseph and the members of your staff, I extend our very best wishes as you assume the duties of administration of the new facilities that you have helped so much to make possible.

Dr. J.F. Bailey spoke on behalf of the medical staff which consists of Dr. G.R. Walker, Honourary President; Dr. J.A. Henry, President; Dr. J.F. Bailey, Vice-Pres; Dr. R. Hay ward, Dr.' J.B. McQuay, Mindemoya; Dr. F.A. Strain, Gore Bay; Dr. H.A. Van Tripp, Manitowaning .

Dr. Bailey expressed his appreciation on behalf of all physicians in the hospital; for all the modern facilities which will now be at their disposal in the new hospital; also stated that he felt the people of this area were very fortunate when the Sisters of St. Joseph originally opened a hospital here in 1945, with the present modern one resulting from their efforts.

Mrs. Mary Pinand, president of the St. Joseph's Hospital Ladies Auxiliary, spoke of their work . "We only help" she said, "but we like to think that we offer the kind of assistance which will take the sharp edge off the personal inconvenience of being in the hospital. We are proud to be represented here today and we hope to justify that pride by our continued services on behalf of the hospital and its patients"...



# New Hospital

Wide interest in the official opening and a tour of the new St. Joseph's Hospital in Little Current was shown by many Manitoulin and district residents on Tuesday afternoon October 18, 1966.

The original hospital under the Sisters of St. Joseph's was opened in 1945. Sister Rose Marie, the present administrator, was one of the original group which started the hospital. On August 4, 1965, the sod turning ceremony for the present new hospital was held.

Designed by Manfred J. May, Architect, of North Bay and constructed by M. Sullivan and Son Ltd. of Arnprior, the new building is a two storey structure with an exterior of buff colored brick. Both floors have two main corridors. The first floor has three operating rooms, one each for major, minor and emergency surgical treatment, X - ray department, laboratory, children's ward with play area patients' rooms, cafeteria kitchen and admission centres. The second floor has the maternity section patients' rooms and chapel.



Architect Manfred J. May of North Bay presents the Key of the Hospital to M. Sullivan, contractor, who then presented the key to Rev. Mother St. Edward, Mother-General, Sisters of St. Joseph.

The moving of patients and equipment from the present hospital is expected to be completed in the next few weeks. The rooms are decorated in pastel colors with harmonizing draperies and furnishings.

## Hospitals special to get grants for modernizing

*No paper given, no date given*

TORONTO (CP) - More than 190 Ontario hospitals will share in \$8,500,000 in special grants announced by Premier Frost in his budget speech in the Ontario legislature. The grants, designed to enable hospitals to modernize facilities and equipment, will be paid at once.

Hospitals which have not received a capital grant since April 1, 1947, will receive \$400 a bed. Hospitals which have been voted grants in the last six years will get \$100 a bed.

The older hospitals are in the greatest need of capital repairs and renovations," the premier said. "They will obtain the greater part of the assistance, but we are also recognizing the requirements of newer hospital units .

"We do not . . . propose to tie the hands of the hospital boards, and they will be allowed as wide a latitude as possible."

The special grants will not affect any arrangements now in effect between the government and individual hospitals.

Included in the list of grants in; the budget appendix are Sudbury St. Joseph's Hospital, \$86,400; Sudbury General, \$25,300; Sudbury Memorial, \$18,700, and in the district, Blind River St. Joseph's, \$13,600; Chapleau Lady Minto, \$11,200; Espanola General, \$5,600; Little Current St. Joseph's, \$8,400; Mattawa General, \$12,400; Thessalon Red Cross, \$5,600.

# August sod turning ceremony for St. Joseph's hospital

*Handwritten 1965*

On Wednesday, August 4th at four o'clock in the afternoon, official sod turning Manitoulin's new St. Joseph's Hospital will take place in Little Current.

Mayors, reeves and other officials of all Manitoulin municipalities are being invited to take part in this historic event and the general public is very welcome.

Actual construction commenced June 28th and work is progressing on the foundations and sewer hook-up.

The 57-bed hospital is scheduled for completion by 1967.

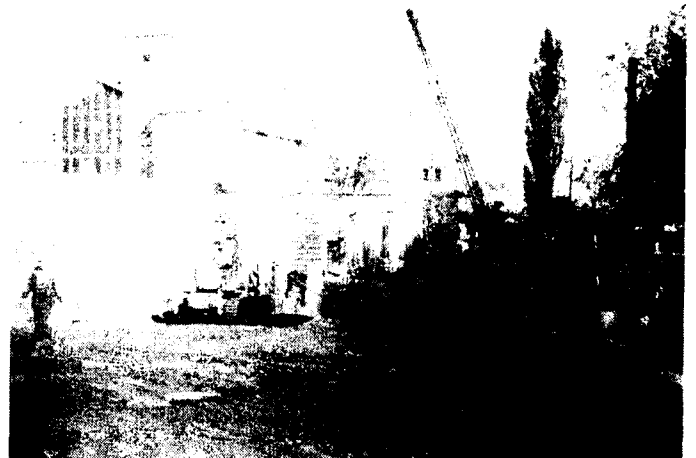
## Special grants to new St. Joseph's hospital

*The Manitoulin Expositor, Thursday, October 13, 1966*

Mr. B. G. Turner, Chairman of the Board of Directors of St. Joseph's General Hospital in Little Current announced to-day receipt of two special grants to the Hospital. The Department of National Health and Welfare recently forwarded a cheque in the amount of \$150,000.00 as a special contribution to the building fund on behalf of the Indian population in the area. Since the closing of the nursing unit at Manitowaning, the patient load has had to be carried by the Hospital here.

At the same time the hospital also received a cheque for \$31,000.00 from the Crosley foundation in memory of Mr. Powel Crosley. This latter donation is earmarked to cover the cost of equipping the Laboratory, a much needed and valuable addition to the patient services available at this Hospital.

### Construction On St. Joseph's Hospital



Evidence of progress in the construction of the new St. Joseph's Hospital, at Little Current, can be seen in the photo above. The sod turning ceremony for the new hospital was held in August, 1965. Included among those present were Manford May, Architect for the building and M. Sullivan of Sullivan Construction Co. It is expected the new hospital will be completed in 1967.

The official opening of the Hospital will take place on October 18 at 3p.m. The public throughout the area is most welcome at this ceremony. Tours of the new building will be available for those interested immediately after

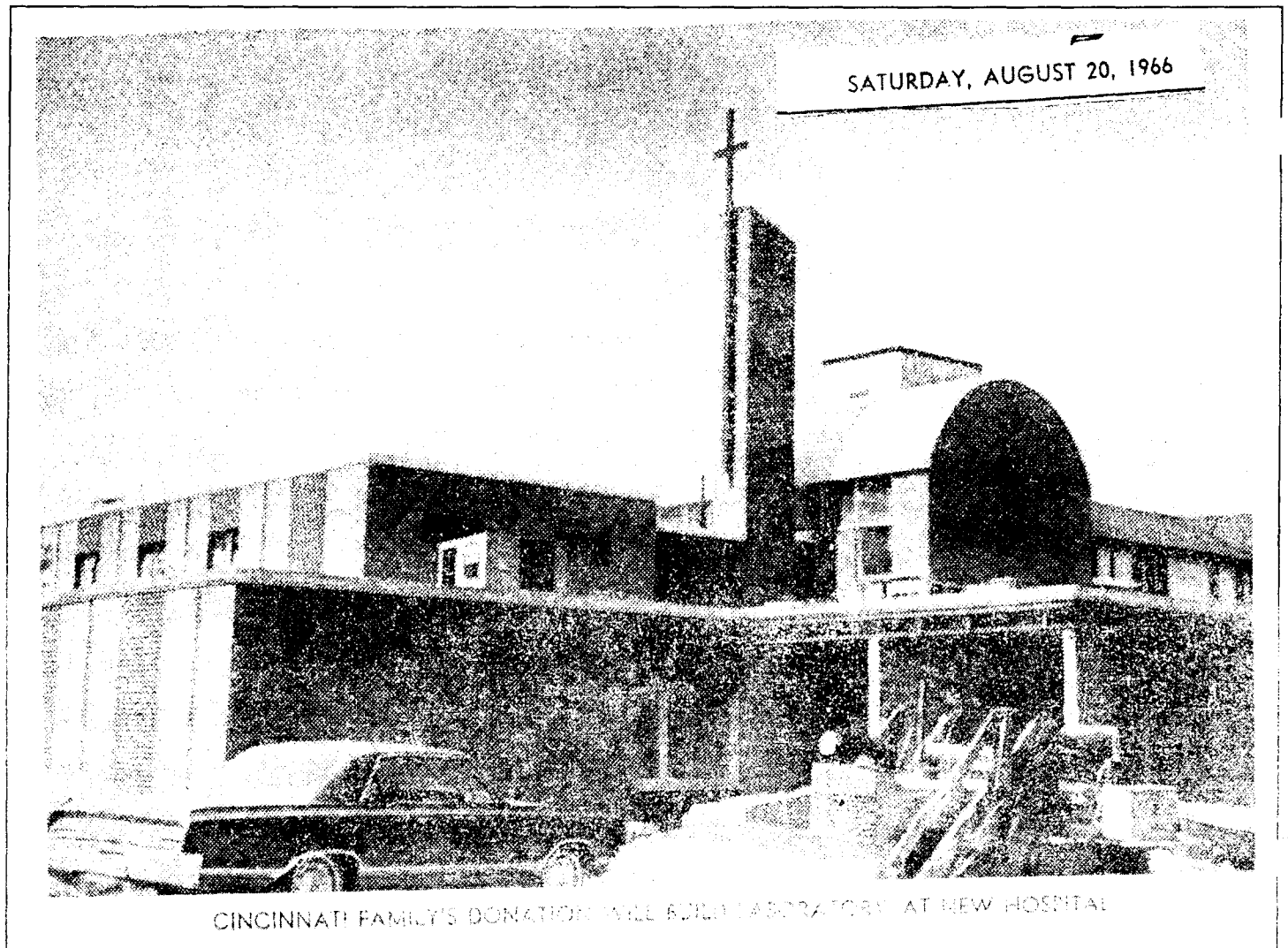
## Former Manitoulin vacationer's gift boon to hospital at Little Current

*Saturday, August 20, 1966, no paper given*

LITTLE CURRENT - B.G. Turner, "Chairman of the board of St. Joseph's Hospital, announced this week that a substantial grant has been made to the hospital by the Crosley Foundation. The foundation was set up by the late Powell Crosley of Cincinnati, Ohio. Crosley was a regular summer resident of the Island for many years prior to his death. His daughter, Mrs. Stanley Kess, and her family still vacation at the family residence at McGregor Bay each summer.

The grant, made in memory, of Mr. Crosley, is to be used to completely equip the laboratory in the hospital which is now under construction. The laboratory will be known as the Powell Crosley Memorial Laboratory. The grant will assure that the laboratory will have the best equipment available. It will make it possible to run a large range of tests. For many years a patient's stay at the hospital has often been prolonged by the waiting for results of tests that had to be sent to Sudbury or North Bay. In most, if not all cases this delay will now be removed.

Peter O'Brien, who has come to Little Current directly from Ireland, will be in charge of the new laboratory. O'Brien is a graduate technologist of the Institute of Medical Laboratory Technology, London, Eng.



Turner commented that many donations 'have been made to the new hospital by summer residents over the past year, and stated that the degree of support for the building project from this sector of the population that the hospital serves, has been most gratifying.

The new St Joseph's General Hospital now nearing completion m will have accommodation for 57 patients in private, semi-private and four -bed ward rooms a 15 - bed section of the second floor is designed for long-stay patients. Special patient facilities are made available in this section and include hand rails along the corridors to assist the movement of ambulatory patients.

The children's ward is located on the ground floor and includes a play area. This floor will also house the operating and X-ray rooms, admission and emergency treatment centres as well as several patient rooms,. Each floor has a central nursing station opening onto the main corridors .

Turner also announced that the completion date for the new building was not yet certain but he feels that patients will most probably be transferred to the new building early in October.

The official sod turning for the new hospital tool place on August 4,1965, and work on the structure continued throughout the winter season. General contractors are M. Sullivan and Son Construction Company of Arnprior.

### **Additional \$150,000**

The Prime Minister has announced that an additional federal grant of \$150,000 has been made to St. Joseph's General Hospital in Little Current. This special grant is given by the department of national health and welfare on 'behalf of the Indian population on Manitoulin Island.

In 1961, the national health and welfare nursing station on Manitoulin Island was closed. Since that time, St. Joseph's General Hospital has absorbed the patient load formerly carried by the federal hospital.

This grant, along with federal-provincial hospital grants totaling more than \$500,000 will assist in expanding the present hospital facilities.

# Hold opening ceremonies at St. Joseph's hospital

The Manitoulin Expositor, Thursday, October 20, 1966

## Administrator Cuts Ribbon At Opening of New Hospital



Sister Rose Marie of St. Joseph Hospital

Sister Rose Marie, Hospital Administrator, cut the ribbon to mark the official opening. Presentation of the key was made by M. Sullivan, contractor, to M. J. May, Architect and then to Rev. Mother St. Edward. Rev. D.J. Hourigan introduced the guest speaker, Bishop Carter; appreciation by Canon D. H. Dixon. Musical interludes were provided by the Sisters of St. Joseph; Tour of the Hospital and refreshments concluded the ceremonies.

Construction of the modern, fifty-seven bed hospital began in late June, 1965. The original St. Joseph's opened its doors in, 1945 to serve the needs of the Island.

Ceremonies will take place on the grounds in front of the main entrance, weather permitting. In case of inclement weather proceedings will move to the cafeteria.

The public is invited to attend and tours will be arranged that anyone who wishes may inspect the entire building.

Ladies of the Hospital Auxiliary will serve refreshments.

Invitations have been sent to Prime Minister Pearson, Mr. Stan Farquhar, MPP, Dr. Dymmond, Ontario Minister of Health, representatives of Ontario Hospital Services Commission, Ontario Hospital Association, Department of Citizenship and Immigration, and the reeves and mayors of district municipalities.

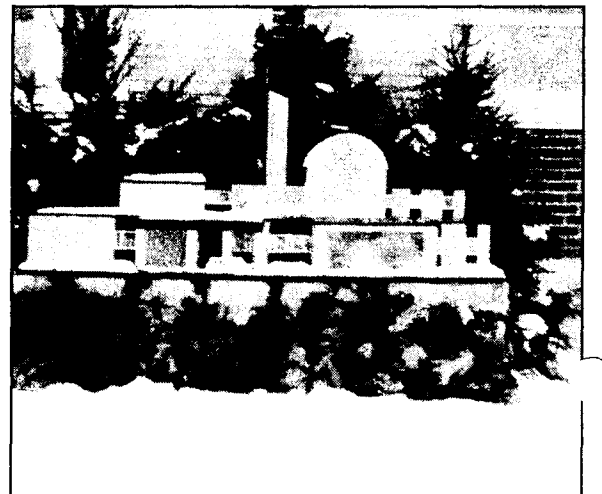


Dr. J. F. Bailey expresses thanks for new hospital.

M. Woods of Gore Bay; Chief Wakegijig of Wikwemikong; Dr. J.F. Bailey, Medical staff; Mrs. Mary Pinand Pres. Ladies' Auxiliary.



Official opening ceremonies for the new St. Joseph's Hospital in Little Current took place on the grounds in front of the main entrance on Tuesday afternoon, October 18th. The invocation was given by His Excellency, Most Reverend Alexander Carter, D.D., Bishop of Saint Ste. Marie. Mr. B.G. Turner, chairman of the Board of Directors presided over the impressive opening ceremonies. Mr. Albert Rolston, vice-chairman introduced the platform guests who included: Mayor John Farquhar of Little Current; Maynard Lubrak of North Bay, Veteran Affairs; Stan Farquhar, M.P.P.; Ray Jessup, Director, Ont. Hospitals; Mayor



# **New fire alarm shown at St. Joseph's hospital**

*Handwritten date 1966, no paper given*

A new, automatic fire alarm system reaching every section of St. Joseph's Hospital was demonstrated yesterday by George H. Carson, president of the company which installed the system.

As student nurses, sisters, Fire Chief John Hamilton, Chief of Police Earl Knight and others looked on, Mr. Carson dropped a lighted match into a pan of wood alcohol. Within a few minutes and before the fire had a chance to gain any serious headway, the alarm sounded and the location of the blaze was indicated on the annunciator in the main office. At the same instant, alarm bells sounded on every floor in the nurses' residence, which will be the signal for nurses to report to assigned places in the hospital. The nurses are at present receiving fire drill instructions.

## **Favorable Comment;**

Efficiency of the system drew favorable comments from those present. This last word in fire protection was decided upon after hospital officials carefully studied the problem that might occur in removing helpless patients from a burning building.

From attic to basement in the main section of the building, which is not entirely fireproof, as are the newer wings of the hospital, detectors are installed in halls, cupboards, rooms, linen closets, storerooms, carpenter shop and other places which constitute possible fire hazards. Each unit is set to react when a certain temperature has been reached.

## **Set to Operate**

In most cases, Mr. Carson says, the fire stats are set to operate when the temperature of the room reaches 140 degrees but exceptions are made in the attic and boiler room where the unit sets the alarm working at a temperature of 190 degrees in order to avoid any needless alarms.

Fire alarm boxes are located on each floor through which the alarm may be registered, in case a fire has been discovered before it has produced the temperature necessary to set off the automatic signal.

Mr. Carson conducted those present through the building to explain how the system worked. He stated that the detectors reset automatically after sounding the alarm, and that any interference with the wiring or other parts of the system are immediately registered on the annunciator.

# Nuns leave St. Joseph's after long, dedicated work

*The Manitoulin Expositor, June 22, 1977*

## **By Yury Tarnavskij**

Although the Sisters of St. Joseph will retain ownership of St. Joseph's General Hospital in Little Current until the end of March 1978, the two sisters from the Order that are presently on the hospital's staff will be terminating their service here at the end of the month, and St. Joseph's will be without Nursing Sisters for the first time since 1944.

Alec Browne, administrator of the hospital, said June 30 is the last day of work at St. Joseph's for the two sisters. Sister Mary O'Neill, coordinator of pastoral care and Sister Emer Kelly, a registered nurse will be leaving St. Joseph's Hospital that day, as their services are needed elsewhere, explained Mr. Browne.

The Sisters of St. Joseph's founded the hospital in Little Current in 1944 and it was officially opened in 1945. As well as running the administration of the hospital, the Sisters have performed the other functions required of a hospital staff. They worked as registered nurses, registered nursing assistants, in the dietary area, in pastoral care, in the laboratory as technicians, in pharmacy, on medical records, in personnel, in admitting and in various clerical positions.

Over the years, due to diminishing numbers of girls entering the Order, the positions previously held by the Sisters were being filled by lay people, explained Mr. Browne.

The original hospital opened in 1945 was W.A. Sims' house which was taken over by the Sisters, said Mr. Browne. It was gradually expanded with the building of additions, one in 1953 and the new wing in 1966

The Sisters originally lived in the hospital on the third and fourth floors. Now this area is used for the store-room, boardroom and offices. The two remaining Sisters on the hospital staff presently live in a residence across from the hospital's parking lot with two other Sisters from the Order who previously worked in the hospital and now work in pastoral care in West Bay.

Until 1966, the Sisters ran the hospital's administration themselves and had a lay Board acting in an advisory capacity, went on Mr. Browne. At that time, the administrator, the director of nursing, the director of dietary, the director of business and the office manager were all Sisters. In 1966 the bylaw was changed giving the lay Board the free powers of running the hospital on a day to day basis, explained Mr. Browne. The Sisters retained a veto power, but it was never exercised. The latest major change occurred in January 1976, when Mr. Browne took over the position of administrator.

When the Sisters changed the bylaw in 1966, they gave the Board the power to run the hospital under the provisions of the Public Hospitals Act and the regulations under that act, pointed out Mr. Browne. "The only time the Sisters would have been involved was if the Board would have embarked on a major project such as the building of an addition," said Mr. Browne.

When the hospital is handed over by the Sisters of St. Joseph's next year, there will be no change apart from ownership, stated Mr. Browne. "The Sisters have a certain equity which has to be repaid, and this will probably be taken care of by the Ministry of Health," said Mr. Browne. The change in ownership was originally planned for the end of this year, but was moved back to the end of March 1978 to coincide with the ending of the hospital's fiscal year. This was agreed upon by the Sisters and the Board to avoid the expenses and time involved in having two audits, said Mr. Browne.

"We try to live within the philosophy of the Sisters of St. Joseph's. Their philosophy is to treat a patient as a person and as an interesting case. They treat people with respect, dignity and kindness and the hospital will continue to function with this spirit," said Mr. Browne.

"Since 1945, a lot of dedicated service has been provided by the Sisters not only for Little Current, but for the whole Island. The philosophy they lived by will carry on. There is nothing more depressing for a patient than being treated as an interesting case and having the personal side neglected," pointed out Mr. Browne.

"As far as the public is concerned there will be no change. The hospital will change its name, but it is yet to be determined. Hopefully, it will give an indication of the area served. There's a lot more than just the residents of Little Current, that are served by it", stated Mr. Browne.

"We're going to miss the Sisters," Mr. Browne said. "They do bring a definite atmosphere to a hospital. Fortunately our staff has become imbued with the spirit and at this hospital it's the care of the patient that comes first," said Mr. Browne.

The Order operates five other hospitals in Northern Ontario, in Thunder Bay, Elliot Lake, Blind River, Sudbury and North Bay. The decision to hand over the ownership of St. Joseph's Hospital in Little Current was first announced this year in early February. The reason given was the Order was not able to fill the positions of administrator and director of nursing from among its Sister members.

## **Hospital Auxiliary sponsors wind-up bridge party**

*The Manitoulin Expositor, May 1967*

*Members of St. Joseph's Hospital assisting at Party from left:*  
Mrs. Rachel Charete, president;  
Mrs. Velma Wilkinson, vice-president;  
Mrs. Marion Henry, secretary;  
Mrs. Joanne Bousquet,  
Mrs. Donna Corbierre,  
Mrs. Rosemary Eagleson,  
Mrs. Mary Ferguson,  
Mrs. Gen Barone,  
Mrs. Irene Bousquet.



The close of the marathon bridge tournament which was sponsored by St. Joseph's Hospital Auxiliary from October to April was marked by a wind-up party for all players at St. Bernard's Hall on Wednesday evening April 26th.

Prizes were presented to partners winning highest and second highest scores during the season. First prize winners were Mrs Ann Conlon and Mrs Rena Skippen. Second prize winners were Mrs Audie Wardrop and N Nellie Alston.

A sumptuous buffet lunch at close of evening's bridge was arranged by members of auxiliary.

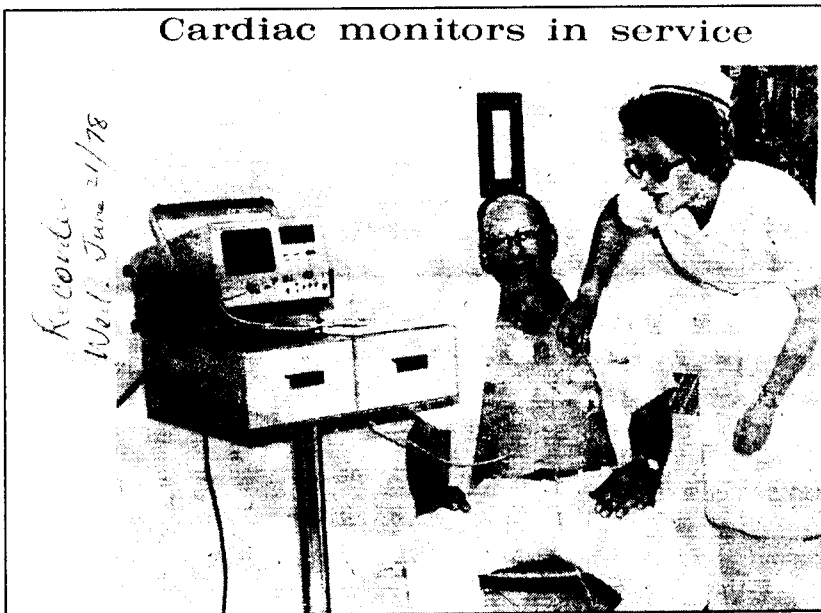


*The Manitoulin Expositor, October 21, 1981*

Charlotte Dunlop was the lucky winner of the quilt raffled off at the Manitoulin Centennial Manor Auxiliary Tea. Lou Hembruff embroidered the prize.



### Cardiac monitors in service



**ANYTHING TO HELP OUT** Allen Bailey (above), an orderly at St. Joseph's Hospital in Little Current, lends the use of his heart beat for in-service training on newly purchased cardiac monitoring equipment. Bailey is connected to a bedside monitor purchased by the hospital through public donations. Lou Addison, head nurse of medicine \ surgery, re-adjusts electrode lead. Below, (not shown) Bill Gailitis, of Electronics for Medicine, Mississauga, conducts in-service training. Here, he is see explaining how the central monitor located at the nursing station, works The hospital has purchased two bedside monitors, the central monitor and associated equipment, and a portable defibrillator are cost of about \$24,000, including installation. Funds raised above the required sum will be Placed in a trust fund for purchase of other cardiac equipment.

# Supervisor of ambulance service

*The Manitoulin Expositor, Thursday, March 28, 1968*

**by Evelyn Tracy**

A well known Little Current man, Mr. Jim Still, is the subject for our feature story this week. As of Monday, March 25th, he became Supervisor of Ambulance Services for St. Joseph's Hospital, Little Current, covering this part of the Manitoulin Island. He will be responsible for staffing and maintenance of the ambulance at all times.

Jim Still was born in Oakville; when he was two weeks old he moved with his parents, to Mimico, where they lived until 1947, when they moved to Little Current. He received his education in Mimico and in Little Current. On September 22nd, 1954, he married the former Stella Moore, and they have four children. Paula, 12, is in Grade 6 and Dawn, 9, is in Grade 4. Their twins, Jamie and Kimberley, better known as Jim and Kim, are four and a half years of age.

Jim is a qualified Paratrooper, and served for three years with the First Battalion Royal Canadian Regiment. This included service in Korea in 1952, and part of 1953.

"I have worked for 12 years in my father's Garage," he told us. He also worked in the former Western Tire Store in Little Current; for Farquhar's Dairy in 1957, and has been with Imperial Oil for the last three years. During the last seven years, in his off duty hours, Jim has driven an ambulance, which makes him familiar with the procedure required, and gives him some idea of his work ahead, although, it will include much more than just being a driver.

Jim Still is President of the Royal Canadian Legion. His favourite hobbies are fishing and hunting, and he plays hockey and baseball on occasion.

On April 22nd, Mr. Still will be going to Camp Borden to take a special course for Ambulance Attendants. Two of the Hospital's present staff, Forest and Allan Bailey, already have taken this course, and will be on staff under Mr. Still's supervision.



Jim Still And Sister Beatrice, Administrator At St. Joseph's Hospital.

We certainly wish you well, Jim, in your new position.

# St. Joseph's hospital gets accredited again

*The Manitoulin Expositor, Wednesday August 24, 1977*

**LITTLE Current:** St. Joseph's. Hospital was recently awarded a full three-year accreditation for the third Straight time evidence the hospital is mainlining its outstanding or excelling all standards.

Alec Browne, hospital administrator, told the Expositor the three year accreditation is the highest award a hospital can receive, adding the fact the hospital maintained the accreditation consistently since 1971 speaks well for medical staff St. Joseph's.

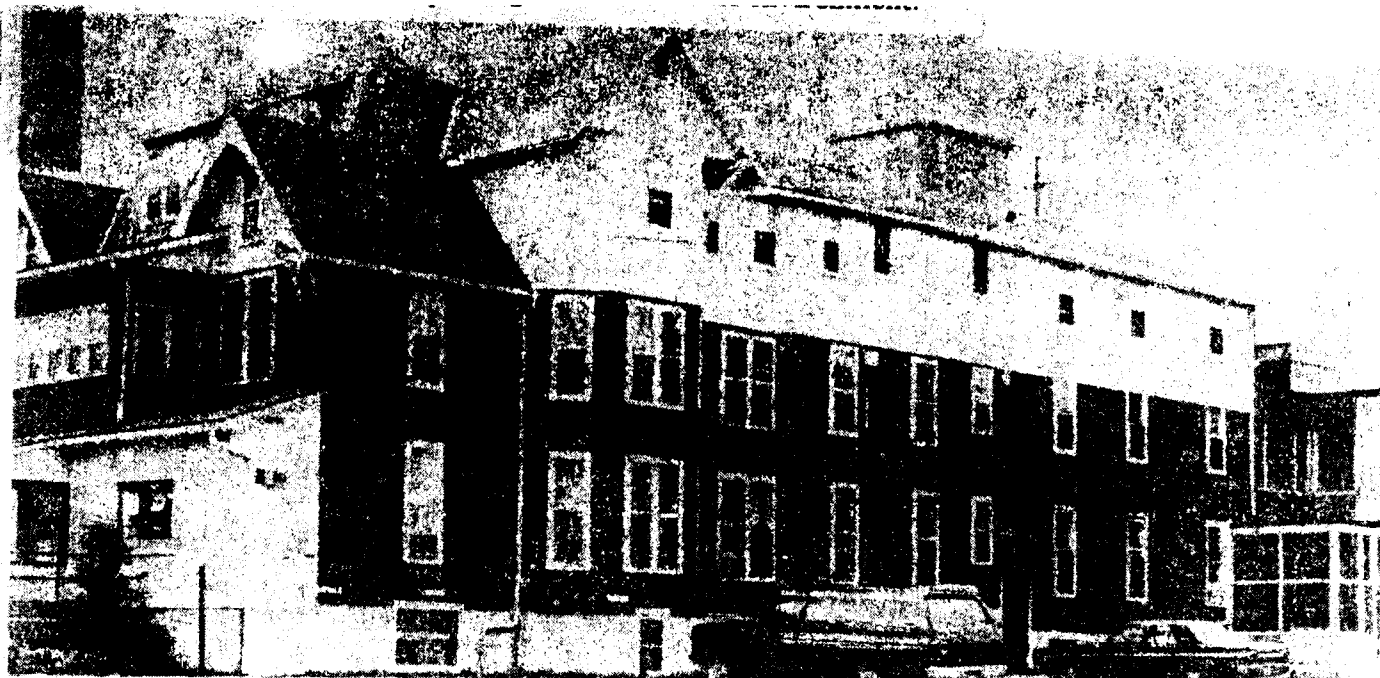
Mr Browne said the responsibility of accrediting hospitals belongs to the Canadian Council on Hospital Accreditation (CCHA) It is a voluntary program harming the encouragement of good quality standards for the care of patience as its ultimate aim.

By participating in the program a hospital given the people in the community the assurance it is providing them with a high standard of care he explained. The hospitals are examined b surveyors who are or have been senior people and are measured by a set of standards, which are Canada wide.

"We may know we give a high standard of care, but we submit ourselves to outside people who never saw the hospital before and they compare it to the standards." Said Mr. Browne.

There are three categories of accreditation. The provisional accreditation is given to those hospitals that just meet the standards in enough areas to be accredited; the award is far one year.

The two-year accreditation is given to hospitals, which meet all or most standards. It is becoming more common these days as progress is rapid and one of the most important requirements is to improve. The hospitals when could do better with respect to certain standards receive the two year award



St. Joseph's Hospital, Little Current.

The three-year accreditation is generally reserved for the more outstanding hospitals.

Mr. Browne said one of the significant factors responsible for the hospital's high award is the structured medical audit program at St Joseph's. It is a peer review performed by the medical staff in regard to patient care.

The doctors set up a set of criteria, which have to be met in the medical charts. If the criteria are not met, the doctor has to satisfy his colleagues as to his reasons for not meeting them. If the criteria need to be amended, this is also done. Mr. Browne said the peer review is one of the programs stressed by the council.

If a hospital is standing still and has not followed up in the recommendations given at the previous survey or has not made other improvements, it is unlikely to receive a three year accreditation. Mr. Browne said hospitals can always find room for improvements, it is unlikely to receive a three year accreditation. Mr. Browne said hospitals can always find room for improvement and it must be done to maintain the high standards it possesses.

In the survey, the standards applied to the hospital depend on the hospital's function in the community. The criteria depend on the facilities and medical staff, explained Mr. Browne.

St Joseph's was surveyed July 17 and received accreditation on August 4.

Mr. Browne said the staff deserved the award and added "if the people see the certificate they know immediately they will get good care in a safe environment"

# People

*The Manitoulin Expositor, Thursday, February 8 1973*

At once a diplomat, disciplinarian, Businesswoman, Missionary, Sports Enthusiast and Social Worker, Sister Marjorie Shannon is officially known as the Administrator of the St. Joseph's Hospital, Little Current.

As a rule hospital offices are drab, antiseptic functional, retreats, ready to be turned to other service should there be a reorganization or other need for the space; Saint Joe's is no different except that on entering Sister Marjorie's office you know immediately the occupant is someone with varied interests. Directly behind the desk is an oil painting of a Northern Ontario Lake; to the left is a picture of Jesus Christ and on the right a massive Air Canada travel poster depicting a winter ski scene in Banff, Alberta.



As it turns out the walls are not a bad introduction to the 'Captain of the team' as Sister Marjorie describes herself. Secretary Treasurer of the Little Current Ski Club Sister claims "After I went to the University of Western Ontario and I didn't want to go back to Southern Ontario. I like the country - its more rugged - there are more things to do outdoors."

It was in her first year in Northern Ontario (North Bay) that Sister Marjorie made the decision to join the order; and dedicated her life not only to nursing but to religious life. "I chose to join a religious community with other woman who are interested in serving God and serving people. The prayer life gives you more time to help people, had I just remained a nurse I could look after the sick but my interests would be more divided - there would be many other things to do. If I'd stayed outside the order I probably would have followed the same career but have gotten married. I think nursing is a vocation just the same as your dedication to religious life. It's an altruistic service-oriented thing. In both cases you are interested in people - in dedicating your self to the cause of people who are suffering."

Sister Marjorie came to Little Current in 1969 to become administrator of a hospital for the first time. Her curriculum vita reads as if she had been training for the position since she left high school. With experience in practical nursing, teaching, supervision (as Director of Nursing Education and Director of nursing Services at various institutions) sister has plenty of experience to offer to which she also adds a Bachelor of Science degree and a M.A. in Sociology.

Still there was an adjustment in moving from heading a particular department to being responsible for all departments in the hospital. Most of Sister-Marjorie's time is spent planning for the future and coordinating programs and departments.

To be the chief executive running an institution, daily coping with life and death situations is challenging enough at the best of times. Sister Marjorie not only holds a position of social import but maintains that position with a social context; more specifically a religious framework which imposes its own restrictions and standards.

Daily spiritual priorities, rational organization decisions and the painful everyday realities of life which gravitate to social institutions, must be reconciled.

Abortions, family planning, pastoral care, and social problems of every dimension are a part of life for those people who work in hospitals.

"If you're not going to do abortions then you have to help the person somehow, so it would be in the area of family planning . This is an individual conscience matter. The Holy Father says no but when you come down through the bishops to the parish priest then the attitude is different. I think the changes the church has gone through have been good. I think its much more flexible and much more open to the people who go to it now. I was drawn to the other church - the rigid one - but I've come with the new."

Sister feels the issue of celibacy is one of individual conscience (if you go back to the apostles time Peter was married) although she figures I think a man needs a woman to look after him - I'm not against marriage - most men and women are happier married - a woman can get along much better that a man can if his wife dies."

Not all of life's questions are so heavy. Sister Marjorie was not disappointed when the church modified the traditional habit and permitted nuns to wear sports clothing. As the reforms were ushered in Sister Marjorie decided to take up skiing; not that she couldn't ski before but ...

"Well, before we could go skiing it was kind of hard with the long habit and your veil flying in the wind."

So if the ice ever goes away you'll be sure to see Sister daring the ol' Little Current Ski hill to throw out her worst moguls - sans habit.

OTHER highlights of the Opening

Thursday, November 24, 1966

## Moving Day at St. Joseph



Mrs. Cecilia Sims of Manitowaning was the first patient to be moved to the new hospital on moving day, November 16th. Although the hospital was officially opened in the latter part of October and some facilities have been in use since that time the patients remained in the former hospital until last week. Mrs. Sims is shown with Sister Monica the admitting officer at St. Joseph's.



FIRST MALE PATIENTS TO BE MOVED TO THE NEW HOSPITAL AT ST. JOSEPH'S

The first male patients to be moved to the new hospital at St. Joseph's were Dr. J. J. ... and ...



Second baby at the new hospital arrived at 2:45 A.M. on November 19th, 1966. A son of Dr. ... Mrs. Ronald Holmes of Chicago and his wife, the nurse, Mrs. Betty Beange.

## New Arrivals at Hospital



The first baby born in the new hospital arrived at 12:45 P.M. on November 18th, 1966. A son of Dr. ... Mrs. David Mishibinyas of Murray Hill. The attending physician was Dr. R. Hayward. Shown with the new arrival is nurse Miss Joan Littlejohn.

# 'Lilly Pad' tops new hospital

*The Manitoulin Expositor, Wednesday, October 10, 1984*

LITTLE CURRENT-The most noteworthy renovation to the new Manitoulin Health Centre is not inside the building at all, but above it. That's the helicopter landing pad, nicknamed the "Lilly pad" after hospital administrator G.N. Lilly.

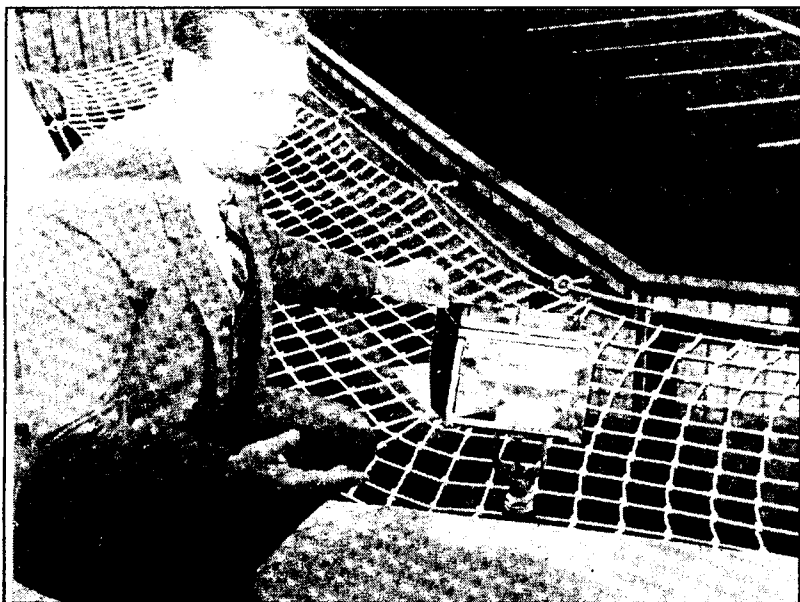
Mr. Lilly is proud of the pad despite its nickname, as well he might be. The circular landing stage is even more advanced than the helipad at Toronto's Sick Kids Hospital. The Manitoulin Health Centre and the giant Toronto institution are the only hospitals in Ontario with helicopter landing areas.

The Lilly pad is a great cement disk almost 60 metres in diameter perched atop the health centre's north wing. It is more advanced than the Sick Kids helipad in that it is a separate structure on its own-not just building top section that takes helicopters. The Lilly Pad stands above the actual building, supported by separate pillars.



Manitoulin Health Centre Administrator P. N. Lilly enjoys the view from the centre of the helipad named in his honour.

The pad is surrounded by a net strong enough to catch errant helicopters. The deck slopes inward to a drain at its centre to ensure that any gas released in an accident will run down into a special holding tank buried below. There are two exit and entry ways for speed and secure movement between the pad and the building.



Currently, helicopter-borne patients are transshipped on a hill overlooking town near the swing bridge. Landing or loading emergency patients directly on the hospital pad will save precious time and eliminate another stage in moving the patient.

The helipad should be operational by next month, Mr. Lilly said. The hospital is awaiting the arrival of a water pump that has been back-ordered by the supplier.

The Lilly pad costs about \$385,000, its namesake said, but people will know the price tag is worthwhile, "as soon as we save a patient with it."

Mr. Lilly points out helicopter landing lights



# Community bids farewell to Bob and Kitty Sookochoff

*The Manitoulin Expositor, Wednesday, November 12, 1986*

LITTLE CURRENT—The community gathered Saturday to pay a fond and light-hearted tribute to Dr. Bob and Kitty Sookochoff and family. About 250 people contributed to a grand pot-luck supper at the Little Current-Rowland Recreation Centre as a send-off event before the popular family re-locates to a new medical practice in rural Minnesota.

Master of ceremonies Dr. Roy Jeffery reviewed Bob's contribution as a member of the community. This included: acting as chief-of staff at Manitoulin Health Centre; involvement with the Manitoulin Awareness group; a member of the "Save Baie Fine" campaign; an active member of the Algoma-Manitoulin Nuclear Awareness (AMNA) organization; participation with Kitty in the "Shadow Project" last year marking the fortieth anniversary of the nuclear explosion of Hiroshima; Bob has been involved in the group "Physicians for Social Responsibility" and has promoted its aims among his colleagues; he had been involved with the Manitoulin Ski Club since its inception, and was active last year



Birch Island chief Leona Nahwegahbow centre, presents Dr. Bob and Kitty Sookochoff with a memento of the band's affection for them. The presentation was made at the community reception in the Sookochoff's honour Saturday evening in Little Current.

in the cross-country ski club. Dr. Jeffery credited having an active cross country ski club last year as influencing in the decision to fund the building of the Manitoulin Ski Club.

Dr. Jeffery went on to credit Kitty Sookochoff for her involvement with last winter's "Youth for Peace and Justice" tour that brought young people from war-torn nations to talk to Island youth, for her activity in the Haven House support group; for her involvement with the La Leche League and for her work with the Children's Aid Society of Sudbury and Manitoulin both as a case worker and a foster home finder.

"And not least," Dr. Jeffery concluded, "is Kitty the mother of three and the community psychotherapist".

"The purpose of this evening," Dr. Jeffery went on, "is to say thanks to Bob and Kitty for spending a part of their lives with us." Bob replied with some amusing anecdotes from his time on the Island and as a part of the Little Current Clinic, and added that "we've enjoyed our time on the Island and we're leaving with gratitude to Islanders.

# Doc' Henry, you will be missed

*The Manitoulin Expositor, Wednesday, September 26, 1984*

**By John Morrissey**

**LITTLE CURRENT** - It was standing room only in the Little Current United Church Hall Saturday afternoon as over 250 friends and former patients gathered to pay tribute to Dr. J.A. Henry. The event was a "come and go" tea party in honour of the good doctor's retirement after 38 years of service to the people of Manitoulin.

The atmosphere was warm and nostalgic as Genevieve (Gen) Baron and Joey Hanson reminisced about their working years with Dr. Henry, and as gifts were presented to both Mrs. Hanson and the doctor. "I may not be able to put a name on each face, but I can come up with a diagnosis," Mrs. Baron said at the beginning of her witty and sensitive remarks. She worked as Dr. Henry's receptionist for the first seven years of his practice in Little Current. Mrs. Baron won frequent and appreciative laughter with her anecdotes about working with the guest of honour when he was "the new blond-haired boy in town", "There were four things he always hated," she said, "getting up in the morning, answering the phone, signing his name and going to bed at night."

Her recollection of the division of labor between doctor and receptionist was also a hit. The doctor got to examine the patients once they were out of their newfangled skin-tight Playtex girdles, she said, but the receptionist had to get them back into the girdles-a much more formidable task.

Mrs. Baron ended on a more serious and heartfelt note, saying goodbye was originally used by the early Christians as "God be with you". "So for everyone assembled here and myself," she said to the doctor, "I say God be with you."

Next came Manitoulin Health Centre building services director Jeff Marshall, who presented Joey Hanson with two gifts from the hospital staff - a disc camera and a beautiful mohair throw. Mrs. Hanson is active in and a president of the Manitoulin Health Centre Auxiliary, and she worked for 19 years as Dr. Henry's receptionist.

Mrs. Hanson took the floor, gave thanks and accepted an ovation. Then she presented gifts from the hospital, the town and the Henry family to the doctor himself. The health centre and towns peoples gifts were a set of luggage and a burgundy coloured reclining easy chair. And from family and friends came a pair of ship's instruments - a barometer and a captain's clock in nautical brass.

Dr. Henry, obviously moved by his friends' and neighbours' fond attention, had little more to say than "thank you very much" and "I need a cigar" as he tried the new chair on for size.

The doctor's son, Greg Henry, who along with sisters Lauren and Lisa, thought of holding a tribute party for their father, thanked everyone for coming and offered his own thoughts on the special feeling shown by the community; his father and Mrs. Hanson, he said, had contributed much to the human dimension of medicine during their careers. Once the speeches were over, everyone settled into the business of taking family photographs and paying personal respects to the honoured guests. Greg, Lisa, Lauren Henry were all pleased by the success of the afternoon. "We came up with the idea and the town took over," said Lauren, looking around the hall as tea and baking were dispensed from trestle tables at the side of the hall.

Dr. Henry himself had agreed it was all a bit overwhelming, but he was calm and self-possessed throughout. "I sure had a lot of cameras pointed at me today," he said as he drew on his cigar. "Got a lot of loot, too." He shook his head gently and regarded his cigar.

Dr. Henry's modesty belied a long and distinguished career. During the war he served four years with Royal Navy as a surgeon in the Mediterranean, the middle East and England. He came to Little Current in 1946, and soon earned a reputation as a skilled diagnostician. Guests at the party exchanged stories of his skill and judiciousness in diagnosis, treatment and referral.

Dr. Henry will be staying in Little Current, though he says he may travel a bit as well.

# Sun Shines on Hospital's Opening

*The Manitoulin Expositor, October 19, 1984*

After threatening skies forced organizers to set up indoors for their official opening at the Manitoulin Health Centre last Friday, it was indeed a welcome relief when the sun changed everyone's plans. A bright autumn sun warmed the backs of dignitaries gathered on the platform in the parking lot and a large crowd assembled to celebrate the completion of the health complex.



*Dr. J.A. Henry was honoured for 38 years of service to the people of Manitoulin Island during the official opening of a new wing at the Manitoulin Health Centre. He was presented with a provincial plaque expressing gratitude for his decision to health care over the years.*

Mayor Gerald Timmermans of Little Current addressed the audience first. He expressed his council's gratitude for "this excellent health care complex" that provides access to health care professionals to meet virtually every need. He stressed the importance of the heliport that has been added and pointed out that the medical facilities are a "vital feature" in the tourist related economy of his town and the Island as a whole. Many vacationers take the availability of health care into consideration when planning their trips, he emphasized.

Mayor Timmermans also reminded the people that the hospital is a key employer in the community and as such plays a significant role in the local economy. He went on to thank the ministry of health, MPP John Lane, Steve Fletcher chairman of the board, and Newton Lilly, the executive director for their hard work in realizing the dream of expanded facilities. In closing, the mayor drew attention to the contribution of Island artist Ivan Wheale whose reproductions have benefited the hospital in its fund raising campaign for the new wing.



*Dr. J.B. McQuay received a tribute during the opening ceremonies of the Manitoulin Health Centre recently. He was commended for 37 years of service to the citizens of Manitoulin Island.*

The next speaker was Don Ridley who brought the congratulation; the Ministry of Northern Affairs. He was followed by MPP John Lane who declared it "a red letter day" for Manitoulin and stressed that "It's everybody's health centre." He paid tribute to the health care professionals who serve the people of Manitoulin and in particular paid homage to Dr. J. Henry. He brought a gift for doctor "to tell him how much love him."

Steve Fletcher, chairman of the hospital board took the podium to inform those assembled that the health centre and the Mindemoya hospital have received accreditation for another three years He attributed this accomplishment in part to the efforts of Mrs. Virginia Fowlie, Director of Nursing.

In a moving moment Mrs. Fowlie accompanied by Head Nurse Lou Addison, came forward to accept the gift of appreciation form the board and management.

### **Doctors honoured at hospital ceremony**

Three doctors with a combined total of 111 years of service to Manitoulin Island were honoured in a special tribute October 19 in Little Current. Plaques of appreciation were presented to the three veteran medical professionals during the official opening ceremonies for a new wing at the Manitoulin Health Centre.

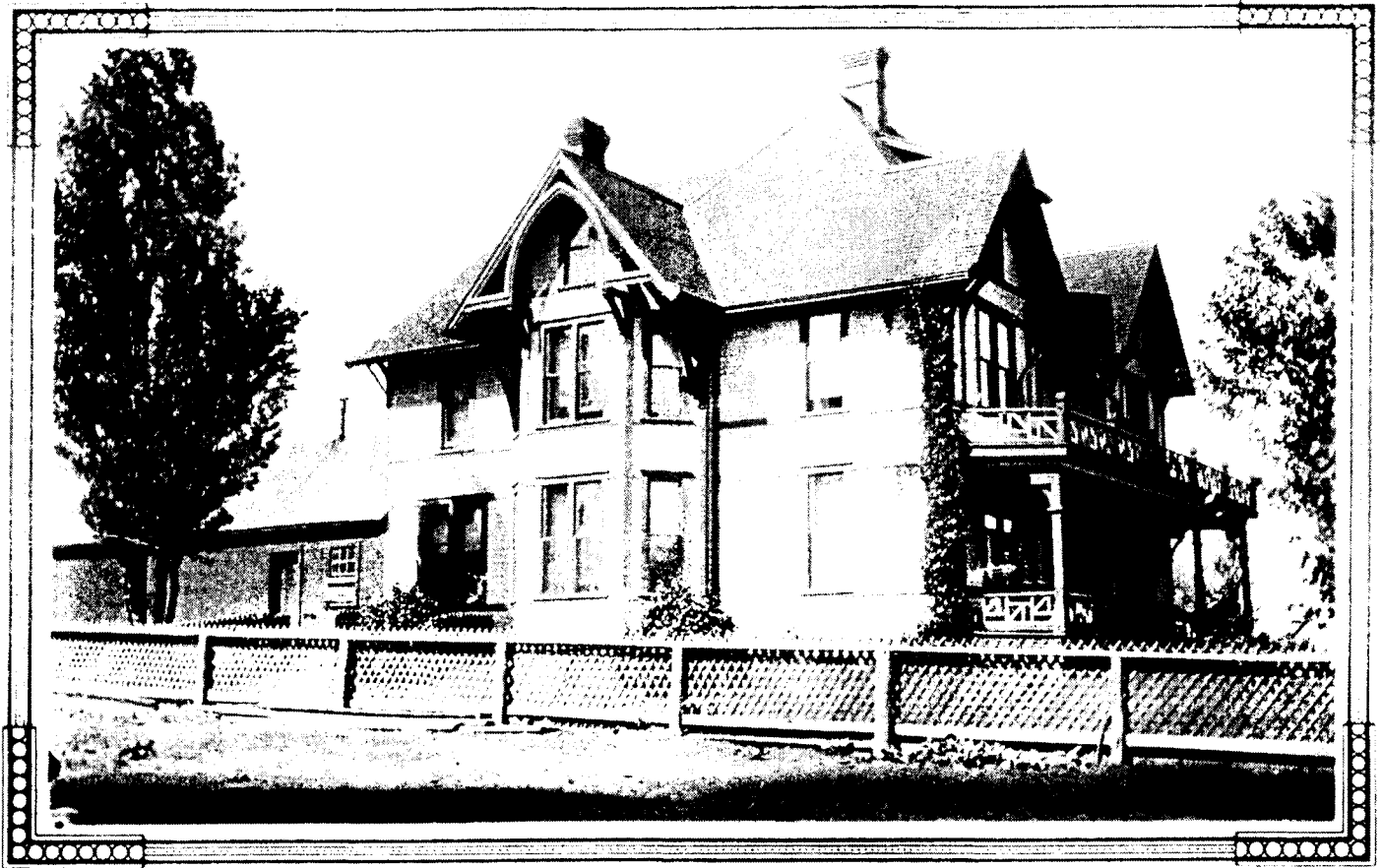
Singled out for praise for his 38 years of service to Island residents was Dr. J.A. Henry who received a hearty round of applause from the large crowd at the outdoor ceremony. Algoma/Manitoulin MPP John Lane paid tribute to Dr. Henry's dedication and presented him with a gift on behalf of the premier. Joey Hanson, Dr. Henry's secretary was at his side to share a few words about her employer's service to the community.

The contribution of Dr. Jack Mcquay was also recognized from the platform. Dr. Jack was commended for his 37 years of patient care on Manitoulin and long time associate Zella McCutcheon was there to make the presentation.

Although Dr. J.F. Bailey could not be present for the occasion, a plaque was presented to him as a token of appreciation for 36 years of service. John Lane thanked Dr. Bailey for his hard work in bringing homes for the aged to the area and explained that a medical convention in Toronto kept the doctor from being there in person. Accepting the citation on his behalf was Marian Henry.



An even more public and lasting memorial for Dr. J.A. Henry was announced by Steve Fletcher, chairman of the Board of Directors. He told the audience gathered in the parking lot on the health complex that the new library would be dedicated to Dr. Henry. And he held up a plaque with the official inscription for all to enjoy.



"Maplehurst" as W.A Sims remembers it.

This home was built by Thos. C. Sims (who was the 1st mayo of Little Current)

## Eulogy for a home

*The Manitoulin Expositor, Wednesday, March 21, 1984*

**By W.A. 'Bill' Sims**

Though I realize that sooner or later my beautiful former home would one day be reduced to rubble and my only remembrance of same would be from pictures taken from time to time of this once magnificent home, when the inevitable happened and I learned that the wreckers were already starting work and the old residence would soon be but a memory, I still could not attend at the site since this would only open old wounds and make things much harder to bear.

Fortunately, my granddaughter Shelley Pearen Fulton had to do the watching for me and she took the snaps showing the disintegration of the superb wooden walls and the heavy stone basement. The attached photos illustrate just what happened.

To those who are old enough to remember the stories in the Third Book, when I went to school, will possibly recall the story of The White Ship that was the pride of the English King in that era that sailed for France with the Prince and some four hundred nobles for a gala journey. When still some miles from its destination, the ship suddenly struck a rock and the merriment and the happiness was suddenly stilled. The Captain gave the word to abandon the sinking ship. From all that princely crowd

there was only one saved-the cabin boy-who had to convey the word to the King that everyone was lost. It was a sad day for England and never afterwards was the king seen to smile.

I feel that I have the same reaction now that my truly beautiful home has become a lost entity which nothing can replace. But such is progress and though it is hard to contemplate, one can only go along with the inevitable, and at some stage one can only say a prayer of thankfulness that no one was hurt at the property. "The world changes, making way for new, and God fulfills Himself in many ways. Lest one good custom should corrupt the world." So be it. And take a look at the pictures that illustrate just what that means to you.

I remember even the story in the Third Book about The Wreck of The Hesperous and I really felt so sorry for the poor little daughter that died lashed to the mast. Sometimes it doesn't pay to be too sentimental. Or, we might take the cynical way of the world and "Do unto others as they would do unto you, but do it first".

I once had one of my friendly neighbours say to me, "What's it like to live in a big house?" That, my friends, is something for which I cannot find an answer. But how be I give you some idea of the day-to-day proceedings as perceived by me?

To begin with (examine the photo of the house), originally it was a double house for two families. My dad's family (three boys and (two girls) and my Uncle Charles' family (two girls). This applied for the greater part of six years until Uncle Charles obtained he position of Indian Agent and lad to move to Manitowaning.

The house was then renovated and the two staircases merged into one with beautiful wide steps and walnut railings (modeled after the Italian era style). At the time of the conversation from a double to a single house, my mother, with the help of a local carpenter Mr. Becks, decided to do away with the outside stairs leading to the third storey and insert a triangular airway that would lead directly from the kitchen to the third storey without disturbing the west wing of the house. Three steps led to a 4 x 4 platform to form the base for the stairway and later an additional four steps led to the back sitting. It was a really remarkable job (done without the help of an architect).

I remember my mother was a lover of flowers and she had several fern stands to get the southern exposure.

I can remember that about this time, my Dad was seldom home as he was interested in the timber business at Whitefish Falls and a large retail store.

The result was that my mother took full charge of all the house details and altered the house to the last detail. I believe she would have made an ideal architect or house planner. How she ever accomplished all the various chores and found time to milk her cow, drive her horse to be shod and managed to keep the housemaids busy would I think have her added as one of the seven wonders of the known world. How too often do too few get due credit. Many times it happens that the evil that men do lives after them, but the good is oft interred in their bones. May I, in this eulogy, salute and carry to my own undeserving reward the thanks that my mother did not live to see the destruction of her beautiful home, the pride of her too short a life.

And now to return to the everyday life that once went on and the manner of same, and a short description of what the house contained and what use had been made of the many rooms and where they were situated.

The first floor (on the east side) consisted, for the first part of the century (when the house was converted to a single family) of a front room, known as the drawing room in which my mother kept her most prized possessions, her own charcoal drawings and paintings, a beautiful whatnot (which I still retain) with its many very valuable souvenirs; her special chairs and settees and many fine china vases. It was a room kept especially for visitors so us kids were not allowed there unless on certain occasions, which were all too few. I remember even then that the drapes were something special being satin and silk. All in all, it was a beautiful room and used only by the gentry. The floor (as I recall) was fine polished oak, and not like the other rooms on the first floor.

The second room where the bay windows were located was the dining room, and had a special oak tile flooring that came in mahogany and oak patterns and was glued down to a hardwood floor, and made for a very distinctive pattern.

The dining room had a handsome oak sideboard, some 8' in length, with mirror and sidedoors in which to place the tablecloths, while six solid oak chairs and an armchair were located at the centre oak table. It was an ideal dining room for the seven members of the family and the maid waited on the family from her kitchen domain. In the early nineties, there was no electricity supplied and all meals were cooked on a large range with oven and hot water tank attached. In later years, electric stoves and refrigerators were installed to solve the ice problem. A summer kitchen was attached to the south end of the house as shown in photo, and in the early 1900s there was a large ice house for use by the house and the boat.

At the west end of the large two-acre lot was a barn-garage. Taken all in all, it was a nice set-up except for the high upkeep. We were fortunate that it was possible to hire women for the domestic duties and my mother employed one wonderful woman, Josie Jocko, who stayed with us for many years and was a real all-round help. In later years, we also were fortunate in having Sam Owl of Sucker Creek act as chore boy, fireman and gardner. Our large house was also the mecca for any Christmas or New Year's parties and my dad used to hire the orchestra from Wikwemikong to supply the music. They were really something and us kids enjoyed them.

Do you know it is awfully nice to be a member of a large family where it is possible to be able to fight without even leaving the house? I do really pity a one and only child. Think of the fun he is missing. I verily believe the ideal family should consist of two boys and three girls so they could always have an argument without half trying.

And who knows, it teaches independence. Also, I do not agree that the eldest should have priority. I never had and I find that I am all the better for having come up the hard way, though very few believe that. Present-day children as "How did you ever get along without a TV?" My reply to that would be "You never miss what you never had."

Adverting to the status of rooms at the large house, I have already related to the various rooms on the main floor and advised as to the fact that the two staircases that led to the second floor when it was a two-family house were dismantled and a main six-foot wide new staircase with mahogany and oak



railings led to the second floor. The bedroom, located on the second floor at the east side, was the parents' bedroom and the large bedroom immediately behind this room (with bay windows) was occupied by my two brothers and myself (with three bedsteads) of equal size, two dressers and several chairs, all located in this large bedroom as was also a main closet where we kept our clothes. To me, as a kid, it seemed tremendous in size after what before we had to make shift with very limited accommodation. The last bedroom on the south was a combination girl's bedroom and bathroom (once we had succeeded in getting lake water). Located at the end of the large staircase was also the toilet room and this eventually was fitted with basins, toilet bowls, mirrors and other accessories and proved to be the busiest room in the house. To obtain water from the lake it was necessary to dig a six-foot deep trench down the lane and at that time it was all done by manual labour as there was no machinery other than hand operated shovels. A right-of-way had also to be obtained so the trench crossed what was then the Vincent property, where the Provincial Police building now stands. I can vaguely remember my Dad saying what great difficulties he had to overcome to get a trench across the Water Street road to lead to the lake, and it took several weeks to get the trench down to the water and through the water lot owned by Sims Bros.

Meantime, galvanized pipe was being laid in the trench so that the line could be completed before frost and snow of the oncoming fall season. Fortunately, my father and his brother Charles were the owners of a number of tugs operating out of Whitefish Falls so the engineers had sufficient knowledge as to how it would be possible to pump the water from the lake to the big house located on Meredith Street.

Since there was no electricity available in town at that time (other than that generated by the Red Mill for the half dozen arch lights that illuminated the main street by a special arrangement with the town), a problem then arose as to how water could be pumped some thousand feet and then transferred to the third storey of the house where a hundred gallon tank lined with sheet metal had been erected.

Eventually, wind was the answer, and a windmill some thirty to forty feet high was erected. The windmill was then connected to a pump that pushed the water through the pipe and after several attempts the operation was accomplished and water slowly filled the large tank on the third floor. The only problem then was a matter of weather and some two years later a gasoline motor was obtained which proved to be the answer. Before that time my brother and I used to have to take turns sometimes in the middle of the night turning on the windmill when a good breeze would wake us. One wonders now just how it was possible to be able to obtain the simple necessities of life, namely, light and water.

The matter of functioning for a party when the illumination was only by candlelight or oil lamps was a problem, solved by the invention of gas lamps generated by a machine operated with carbide that produced a terrific smell until the machine was perfected. I remember my brother Lyle was nominated by my Dad to clean out the trays and had to lug the heavy zinc trays up the back stairs and outside so they could be cleaned and got ready for the next night's use. Just at that time, I was glad to relinquish any claim to being an older brother.

After trying out two of the gas machines it was apparent that there was not enough gas generated to light the entire house so a new machine had to be obtained, and therein lies a tale.

We had a man of all work at the time, Jack Smith, who lived next door and had a rather roving commission working on the tugs and at the general store that was part of the Sims Bros. Organization. So

when one night the gas was low and the jets would only make a low glow and, as a party was to be held, they sent for Jack and he and another helper went down to the basement to see what was wrong with the gas pressure. The bell on the machine did not seem to have sufficient pressure, so Jack decided he would sit on it and create the extra pressure so the gas would fill the pipes and light the various rooms. However, when it was conveyed to him that there had been no improvement, they again decided to exert more pressure on the bell and see if this would get results, so Jack proposed to the other help that he should sit on the drum. But when the other man refused, Jack said he would do it himself. But when the bell still did not rise, the helper said it was too dark, so he lit a match to see what was the matter. And all at...once there was a great boom that shook the entire house and Jack hit the ceiling, but still no lights. The result was my Dad sent a telegram the next day for an improved machine and the party had to be postponed to a somewhat later date. Eventually John Deigle built a power station at Whitefish Falls and then sold power to the town. Later this was taken over by Hydro and the town returned to normal. Who was it that said that we should return to the good old days?

I am still not sure whether the ceiling or Jack's head sustained the worst of the explosion. Possibly, there is still a bump in the kitchen floor. It's funny, but kids at that time did not pay any attention to the names of the various streets but rather designated them by the hills. What is now Meredith Street was known to us as Shannons Hill, since the house where Norman Smith now lives was owned by a Bob Shannon who eventually went out West, while the hill that led to the downtown area was known as the Big Hill.

In the early 1900s, there were few houses erected with the only one known to us kids was that owned by George Bradburn (a distant relative of the Turners). At that time there was a large pond located near the house where in the winter we would go to play hockey and in the summer to sail boats. Mrs. Bradburn and her husband were great lovers of kids (not having any of their own) and used to treat us with cookies when we were through playing on the pond, so that was one of my best recollections of the early days. Later when the town was expanding, Sam Hillman erected two large houses and sold them to the LaPointes who were fishermen based in town. These houses together with what is now known as the Bennett house, altered the commons on which we used to play baseball and football. Eventually, the town produced some really good players.

I remember especially how all types and conditions of men contributed to athletics. Dr. John Carruthers specialized as a baseball pitcher while the other resident doctor, Doctor McDonald, was an avid soccer player. Even the bank managers and their staffs competed for openings in both teams and every night in the summer could be seen some hundreds of residents at the Big Hill grounds cheering on their favourites.

Later, just before the start for the first world war, we teenagers took over and formed our own teams and though it could not be classed as first class ball, it developed into real rivalry and many of my old baseball team were among the first contingent to go overseas. At that time it seemed like an adventure and appealed to all teenagers. Little did we know just what we were getting into (eventually I left town when my big brother Lyle decided to go west as he had heard that wages paid to school teachers there were double to what he earned teaching at Sucker Creek-and this proved to be true) and led me to quit my clerk's job at \$6 a week and strike out for the west.

Eventually I enrolled in the Normal School at Camrose in Alberta and that winter obtained a teaching job at a farm settlement six miles from Camrose at a magnificent salary of \$60 per month. But I digress

from my story about the big house though I did miss it whenever I had time to think about it, which was very seldom as teaching is a full-time job in a one-room school.

One thing Alberta had going for it was the fact that you could buy a wagon load of semi-bituminous coal for \$2, so the school was really warm with the stove furnace, and little smoke or ashes. So sometimes there are compensations.

Since teaching can be boring even in the best of times, when war was declared everyone decided that this was the way to see the world, and the streets were full of soldiers. Early in August when we were on our holidays, my brother phoned me from where he had been teaching to tell me he had enlisted in the 63rd Edmonton Battalion. It hit me with quite a shock as I decided I did not want to stay in Alberta if he was leaving. He and his chum Jim Lang from Vegreville both decided to join at the same time. That left me out on a limb as when I applied for the 63rd Battalion I was informed that the battalion was all filled and they were not accepting any more recruits. At this time a new battalion, the 51st Battalion, was being formed and with the aid of a doctor who had once lived at Little Current, I was accepted for the 51st Edmonton Battalion.

As luck would have it we were assigned to a new brick building on First Street in Edmonton that had just been completed and while my brother Lyle was living in the cattle barns that had been assigned, I was in a steam-heated barracks. Just how lucky can one get?

It is still a long story as to how I eventually returned home, but I have now to take you back to the 1900s, and resume where I had left off on the recreation phase of my hometown. When I was a teenager I can remember the number of lofty things I was going to do other than just plod along without any objective. At one time I remember I organized a baseball team and called them the Whipporwills and it was each and everyone for himself.

At that time, Oliver Vincent operated a general store that offered everything that we needed and by pooling our resources, we accumulated enough money to purchase some twenty yards of maroon cloth out of which each one on the team must make his own uniform. Quite a task.

Most of the kids got their mothers to make their suits as most mothers were used to making their own kids' clothes and we managed to secure large red let-all, it was a unique project and how we managed to outfit the team was a real problem as most of the mothers had their own ideas as to what would pass as a uniform.

Meantime, we practiced on the Big Hill in our regular clothes and developed some real players. Eventually we decided to try and obtain games and to sport our new uniforms and the Sheguiandah Indians who already sported a couple of teams, said they would play us if we would go out to their diamond located on a sand lot near the school on Sheguiandah Bay. The Indians had their own superb pitcher named Eli Joe and he took the game as a big joke. It was kids playing grown men. However, we had planned our own strategy as we had two kids slightly over four feet tall that were programmed to make the pitcher throw strikes or they wouldn't swing at the ball. Result was that Eli Joe could not get the ball over the plate in the strike zone so our first batter, Herb Hembruff, drew a walk. Bedaw McGovern was also short and was the next batter, and by this time Eli Joe was really frustrated and decided he would just toss the ball to the batter who promptly walloped it out past the outfielder. Both runners scored. Eventually, we scored another run and ended the innings ahead 3-0 and

then played deep to catch any long flies, and eventually held the Sheguiandah team down to two runs and won the game.

I neglected to tell you how we managed to get to the Indians' baseball diamond, but this was accomplished by hiring my Uncle Charlie to take the team down in his thirty-foot yacht the Amigo for some \$4 cash.

This was the first game played on an outside field and I later persuaded my father to let me take the team to Spanish Mills one Sunday where I had arranged for them to play beyond the lumber yards. I cannot remember just how the game turned out, but \*we were treated royally by the storekeeper to soft drinks and sandwiches and the Bon Ami picked us up on the way back and landed us back at the town dock as conquering heroes. The kids were really thrilled.

After this successful venture I managed to get the Indians at Kennebutch, a mile from Cutler station, to play us a short game as the mail boat had to leave shortly after the westbound train came with the mail. So our fame spread before us and we were one proud bunch.

Later I remember we challenged the Gore Bay ball team to a game and for \$10 my Uncle Charlie took us on the Amigo to Gore Bay through the Kagawong Channel on a trip that took over two hours, but it was an experienced team and they really loved it. I think I remember that day as one of the highlights of my teenage life.

My younger brother Arnold was our first baseman and a really good player but subject to nosebleeds at the most crucial times. That some time proved a (Continued from Page 5) problem and delayed the game until we had to adjourn the game until the bleeding stopped-at the local hotel.

We had one left-hander on the team playing at third base who had only one ball that he was able to hit, and that one was when the pitcher threw the ball directly at him. His first time at bat with two men on bases was a ball thrown directly at Walter Perkins and he promptly swatted it over the barn in the infield and the game was over, as they didn't have another ball to substitute.

So, we won the game and everyone was happy and we were ready to go home and Uncle Charlie was wonderfully pleased to be able to return before dark. But it still was a wonderful experience to think we won. Now do you not wonder why we did not miss television or radio?

We just didn't have the time. The only disastrous part of the baseball season was when we got too lazy to walk up the Big Hill to play and decided it was much easier to have the diamond in the side lot on the east side of the house. After a few games there my dad decided it was too expensive replacing the big windows that were being shattered so when he finally got home one weekend and surveyed the damage, we decided to try the west side of the house as there were a couple of poplar trees that provided some protection for the windows.

But even this did not suffice and none of the team had any money to replace the large windows that persisted in getting in the way. So ended that era...

Anyway, it was a beautiful house and we finally decided it was much too nice to be desecrated and so went my baseball dreams where I had high hopes of once becoming a famous pitcher, and eventually

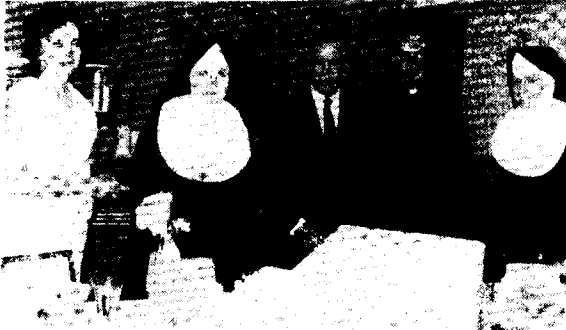
ruined the pitching fingers on my hand trying to catch an outdrop from a high school kid since I wasn't convinced that he could throw an outdrop until one of my fingers got in the way. So I continue to believe that good pitchers are born, not made.

Compare the snaps that my granddaughter took of the wreckers dismantling the house, with the original snap of the house at the time it was sold to the Sisters of St. Joseph and you must might agree with me that sometimes progress can be anything but beautiful.

# Farewell Dinner

Thursday, August 10, 1967

## Farewell Dinner Held For Hospital Administrator



FROM LEFT TO RIGHT: MRS. RACHELLE CHARETTE, PRESIDENT OF ST. JOSEPH'S HOSPITAL AUXILIARY; SISTER ROSE MARIE, SHOWN WITH BOUQUET OF RED ROSES PRESENTED BY MRS. CHARETTE ON BEHALF OF THE AUXILIARY; ALBERT ROLSTON, CHAIRMAN OF THE HOSPITAL BOARD; FR. D.J. HORTON, S.J., SISTER MARY GRACE, OF THE SISTERS OF ST. JOSEPH AT LITTLE CURRENT; OTHER HEAD TABLE GUESTS (NOT SHOWN) WAS B.G. TURNER WHO PRESENTED A GIFT OF A MATCHING SET OF CHARCOAL GREY LUGGAGE ON BEHALF OF THE BOARD OF DIRECTORS.

Sister Rose Marie, administrator of St. Joseph's General Hospital in Little Current, was guest of honour at a farewell dinner party held Thursday, August 3rd at the hospital cafeteria. Sister Rose Marie will be going to St. Joseph's Hospital in Blind River.

Floral centerpieces of pink shaded carnations and pure white dahlias created a charming setting for the dinner guests who were members of the medical staff and their wives; members of the Board of Directors and their wives and the Hospital Auxiliary and their husbands.

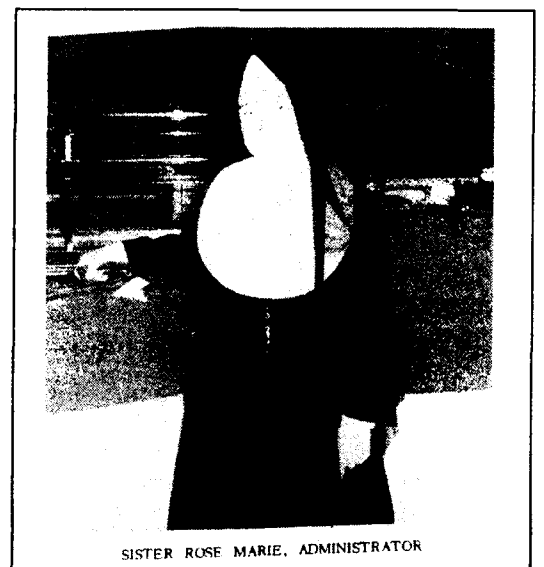
Mr. Rolston, on behalf of the Hospital Board, paid tribute to Sister Rose Marie as administrator at St. Joseph's Hospital in Little Current and expressed the hope that she would be happy in her future work. He read a letter

from Reverend Sister Edwards of the order of St. Joseph advising the Board of the new assignment of Sister Rose Marie and advising that the new administrator would be Sister Beatrice of Port Arthur. Rev. Sister Edwards said in part, " We are deeply grateful for the support and guidance you have given to Sister Rose Marie and it is our hope the same guidance will be given to Sister Beatrice. " Mr. B. G. Turner, past president of the Board of Directors, presented a gift of a matching set of luggage to Sister Rose Marie. He said " This is not a cheerful duty ..... we have a remarkable regard for Sister Rose Marie; her efforts on behalf of the hospital to provide facilities in a community of this size have been monumental. This gift is a token of our esteem and affection and we pledge our continued support to Sister Beatrice. "

Mrs. Rachel Charette, on behalf of the Hospital Auxiliary, expressed regret on the coming departure and expressed thanks to Sister Rose Marie and Sister Mary Grace for their many efforts on behalf of the auxiliary.

A touch of sadness prevailed as Sister Rose Marie expressed her thanks for the gifts and the delicious dinner. This was lightened a little when Mr. Turner remarked that " The luggage was not really for going away with, but for returning with. "

Those attending the dinner in addition to the head table guests were: Dr. and Mrs. J. A. Henry, Dr. and Mrs. R. Hayward, Dr. and Mrs. D. Stephen, Mrs. B. G. Turner, Mrs. Albert Rolston, Mr. and Mrs. Keith Patterson, Romeo Charette, Mr. and Mrs. Cameron Spec, Mr. and Mrs. Leland Lowrie, Mr. and Mrs. James Bousquet, Mr. and Mrs. Austin Bateman, Cecil Valiquette, Mrs. Louis Barone, Mrs. W. Glennie, Mrs. Grant Turner, Mrs. Elmer Vincent, Ursula Roszel, Mrs. Edith Summers, Mrs. Ed Kift, Mrs. Mary Larouche, Joyce



SISTER ROSE MARIE, ADMINISTRATOR

## City woman dies in crash

A collision involving two cars and a tractor - trailer at the French River Bridge on Highway 69 left a Sudbury woman dead Friday.

Provincial police at Noelville said Elizabeth DeMarco 25, of 626 Pine St., was southbound at about 8:15 a.m. when she apparently lost control of her vehicle on the slippery road. Her car slid into the northbound lane in front of a tractor -trailer driven by Ed Maclsaac, 35, of Barrie.

Another southbound vehicle, driven by Daryl Wilson Harper, 23, of New Brunswick, also went out of control when the collision occurred in front of it. Harper's car slid into the oncoming lane and into the tractor-trailer. Police said it was snowing heavily at the time of the accident. Both Maclsaac and Harper were taken to Sudbury General Hospital with minor injuries. They were treated and released.

Born in Sudbury and educated at Princess Anne and Lansdowne public schools, Sudbury Secondary School and Laurentian University, Miss DeMarco was a social worker. She administered a new program for developmental handicapped children and their families sponsored by the Manitoulin Health Centre for people in the Manitoulin Island and Espanola areas.

She is survived by her parents, Mr. and Mrs. Peter DeMarco of Sudbury; one brother, Peter of Toronto; three sisters, Mrs. Grant Spitz of Vancouver, Theresa, attending McMaster University, and Catherine, at home. Funeral will be held at 1 p.m. Monday in the Jackson and Barnard Funeral Home chapel, with burial in Terrace Lawn Cemetery, North Bay.

### **Prayer for Manitoulin Health Centre**

Bless this hospital, O Lord, we pray,  
Guard it safely night and day,  
Bless all it's people living and working here  
Bind them close with love and cheer.  
Bless the food which is prepared,  
And each one with whom it is shared.  
Bless the Executive Director, Business and Personnel,  
the Board of Directors, the Auxiliaries,  
Doctors, Nurses, Secretaries, lab and x-ray,  
and those who work to keep this hospital clean.  
Bless the Ambulance, laundry and maintenance workers  
Bless us all that ever we  
May live and work, O Lord, with Thee.

***By Sister Lea Trahan - October 18, 1984***

# Bill Sims passes on in his 91<sup>st</sup> year

*The Manitoulin Expositor, August 7, 1985*

Wilfrid Alan Sims affectionately known as 'Bill' to all his many friends, son of the first mayor of Little Current, Thomas Sims, grandson of one of the first Anglican missionaries, Jabez Waters Sims, died at the age of 90 years, 8 months.

A man of many talents, he was town clerk and treasurer of the town of Little Current for over 25 years. At the same time he was also secretary-treasurer of both Public and High School Boards, Division Court Clerk, Notary Public, and Justice of the Peace. Although over the years he was offered many important posts in Ottawa and other parts of Ontario he always refused to move from his beloved Island. He was involved for many years in the Liberal Party of Canada - a good friend to the late Mitchell Hepburn, former premier of Ontario, and later to the Honourable Lester B. Pearson.



Although very busy with his business affairs, he was never too busy to assist in any way he could with the work and organization of the local Curling Club, and the Lions Club of which he was a charter member, and the Canadian Legion of which he was an Honorary Life Member.

When he returned badly gassed from World War I, where he had served as a bugler, playing the Last Post for many of his dead comrades, he was appalled to discover how little was being done for the returned veterans. He was instrumental in the forming of the Veterans Association which later grew into the Legion we have today.

An avid sportsman, he had built a cement tennis court at his home Maplehurst, where the Manitoulin Health Centre now stands, playing a game in Texas as late as 1982. The winter he enjoyed curling and badminton, in the fall hunting partridge and ducks with his brother Lyle.

Readers of the local papers have had Island history brought to life by his detailed and often humorous descriptions of early Island activities.

A true music enthusiast from his earliest years when he played the Sim family orchestra, later he played the coronet in the town bandshell as well as the violin, bugle and mandolin. His fine voice will be missed in Church and the many other local activities he participated in.

In the words of his close friend and confidant the Reverend W.G Dobinson "At the age of 90 he did not walk with death as an enemy but a friend and fell asleep peaceable in the arms of Jesus."



# Chopper lands on Lilly pad

*The Manitoulin Expositor, January 23, 1985*

**LITTLE CURRENT**—The quiet zone around the Manitoulin Health Centre was disrupted by a loud noise Monday, but it was a sound hospital staff and administrators had long been awaiting. The roar of helicopter rotors filled the air as the hospital's heliport-nicknamed the Lilly pad after administrator P.N. Lilly-was inaugurated.



Manitoulin Health Centre staff admire a new arrival at the hospital's rooftop helipad.

The health ministry's air ambulance, Bandage 2, arriving from a 35-minute flight from Sudbury, touched down at noon on the \$300,000 pad.

The pad was the one of the last touches of a multi-million dollar renovation of the hospital which was celebrated in an official opening last October. The initiation of the helipad had been delayed by the late delivery of foam pumps needed to ensure fire safety on the pad.

A group of about 20 hospital and ambulance staff braved the cold to greet the helicopter outside, while others looked on from third floor windows.

Pilot Greg Fleming brought the craft in for a smooth landing. Air ambulance attendants Lucille Leach, Roger Graveline and copilot Al MacLean gave interested nurses and ambulance drivers a tour of the copter. After an hour of giving tours and answering questions, the attendants and pilots went into the hospital, where they were in turn briefed on where ipatients would be brought up to the pad.

The heliport, which is only the second such landing pad in Ontario - the other is at the Hospital for Sick Children in Toronto - will allow the transfer of patients from ,Little Current to Sudbury and points south with a minimum of movement or tiem outside a hospital.



Nurse Ann Cranston gets a first-hand look at airborne patient care with the help of air ambulance attendant Lucille Leach.

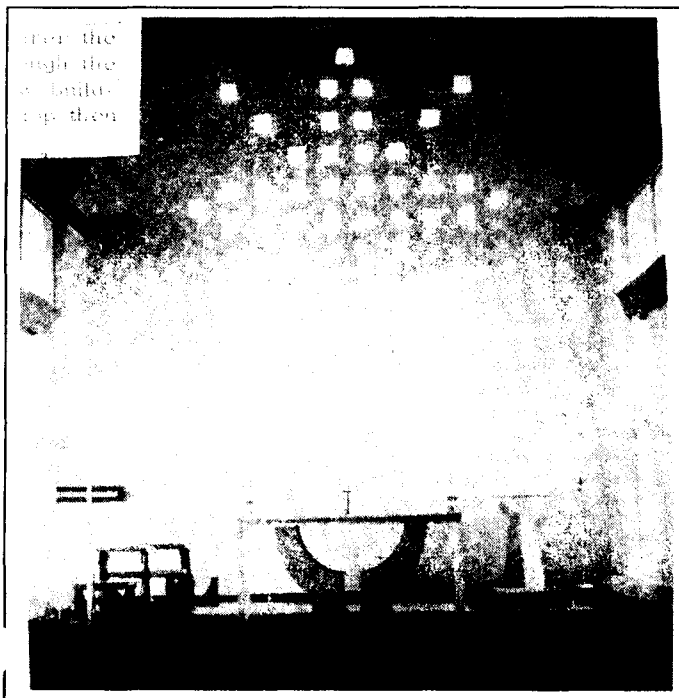
# Blesses new hospital

Thursday, November 3, 1966



His Excellency, Most Reverend Bishop Carter.

On the eve of the opening of the hospital the lovely new altar in the chapel was consecrated. This is the official dedication of the altar as a place of sacrifice. For this ceremony relics of the Canadian Martyrs were used. (In the consecration of an altar, relics or portions of the bones of at least two canonized martyrs are enclosed in a little cavity in the table of the altar - custom which goes back to the time of Pope St. Gregory the Great in the sixth century.) It was a happy coincidence that the opening of the hospital should take place on the feast of St. Luke whom St. Paul called "the beloved physician" and who is patron saint of medical doctors. It was also the anniversary of the martyrdom of St. Isaac Jogues, one of the best known of the group of the eight known as the Canadian Martyrs. St. Isaac laboured here in the Georgian Bay district for six years and in 1641 he and another missionary explored the northern shore of Georgian Bay and must have passed quite near Little Current. On that journey he traveled as far as the present Sault St. Marie. He and his companion were the first White men to look out over the great inland sea which they called 'the Upper Lake' (Lake Superior.) St. Isaac did not meet death in Ontario but in territory that is now American - he was tomahawked by the Iroquois near the present town of Auriesville, N.Y. on October 18, 1646.



On the morning of the opening day, His Excellency Bishop Carter blessed the new hospital; led by the cross-bearer the party passed through the corridors of the new building, and the Bishop then celebrated the first Mass in the new chapel. Father Hourigan and Father Berkel, the vice-chancellor of the diocese, co-celebrated Mass with the Bishop. Milford George read the Epistle and Father Hourigan the Gospel. The Bishop gave the Homily, commenting on the appropriateness of the feast day of the physician saint for the work of healing and alleviating pain will be carried on in Christ's name in the new hospital. Sister Mary Bruno presided at the organ while a choir of nuns from North Bay under the direction of Sister Baptista sang during the Mass.

# Manitoulin Ambulance Service

*The Manitoulin Expositor, Wednesday, December 3, 1986*

**LITTLE CURRENT** - Although the supervisor of the Manitoulin Ambulance Service would like to see paramedic service available to the Island, that will probably not happen for quite a few years, according to a spokesperson from the Ministry of Health. "It's foreseeable in the future but not in the near future," said Carmelle Guy, secretary to Mike Stockwell, northeastern regional director for the Ministry of Health (MOH). Jim Still, supervisor for the Manitoulin Ambulance Service, said he hopes paramedics will be allowed to work on the Island, as they could provide greater emergency health care. "Perhaps the possibility is drawing near," Mr. Still said.



Members of the service are from left to right, Daniel Kuchta, Jim Still, John Lanktree, Debra Bowerman, Manfred Ritzheim (in van), Keith Ashley, Roy Lumley, Bonnie Quackenbush and Norma Moggy.

Paramedics now work in Toronto and Hamilton and have been there for a little more than a year, Mrs. Guy said. The ministry is looking at expanding the paramedic service in the province but only to larger centres at this time, perhaps Sudbury. "They are definitely looking at it for Sudbury," Ms. Guy added.

Paramedics are allowed to administer certain drugs, an intravenous unit, operate a cardiac monitor and use defibrillation equipment all under the direction of a doctor via radio contact.

Even if the paramedic service is a few years waiting in the wings the Manitoulin Ambulance Service has a right to be proud. They are the only full-time ambulance service between Sudbury and Sault Ste. Marie and in 1985 they handled more than 1400 calls. As a full-time service they are employees of the Manitoulin Health Centre although the centre receives funding for the ambulance service from the Ministry of Health. But it was not always that way.



When the service started in 1967 it was a volunteer staff, most of whom worked in the St. Joseph's Hospital as orderlies. From a volunteer service it changed to an orderly ambulance service. "That just about killed them," said Tom McMurray, assistant supervisor of the ambulance service. As an orderly ambulance service, the ambulance attendants would work their regular shifts on the hospital wards and then be on call for ambulance duty. "Sometimes you'd have two days and two nights without sleep," Mr. Still said.

During those years there were only six ambulance attendants but today there are 12 and two ambulances. In 1979 the hospital changed hands and became the Manitoulin Health Centre but the ambulance service remained an orderly ambulance operation. It wasn't until 1984 that the service became a recognized, full-time ambulance operation and that change was the result of a long and sometimes bitter fight. "The north has always had to fight. People bleed the same in the north as in the south," Mr. McMurray said. "It was a struggle," Mr. Still admitted.

Changing the ambulance service to a full-time operation obviously meant spending more money on the part of the ministry but the service was finally able to convince the government the number of calls warranted a full-time position. "We started in the late 70's and it went on for four or five years...people were getting sick, they were just played right out," Mr. Still added.

At that time the service was handling more than 1,000 calls per year, a number that was higher than some full-time services in the south, Mr. McMurray said. "We were struggling to survive," Mr. McMurray added.

During 1980 and 1981, the orderlies, while in the midst of fighting to get the service full-time, also took on the job of upgrading their emergency care education, as well as working their shifts on the hospital floors. But in October of 1984 the provincial government recognized the call volume and allowed the service to become full-time. "I guess for all good things there's going to be a struggle," Mr. McMurray added.

All of the full-time employees of the service have their EMCA (Emergency Medical Care Assistant certification, as well as a class F license, cardio-pulmonary respiration (CPR) courses, and a radio-operator's licence. As the only full-time ambulance service along the North Shore, the Little Current



Tom McMurray, assistant supervisor, points out some of the equipment in the new ambulance vehicle.

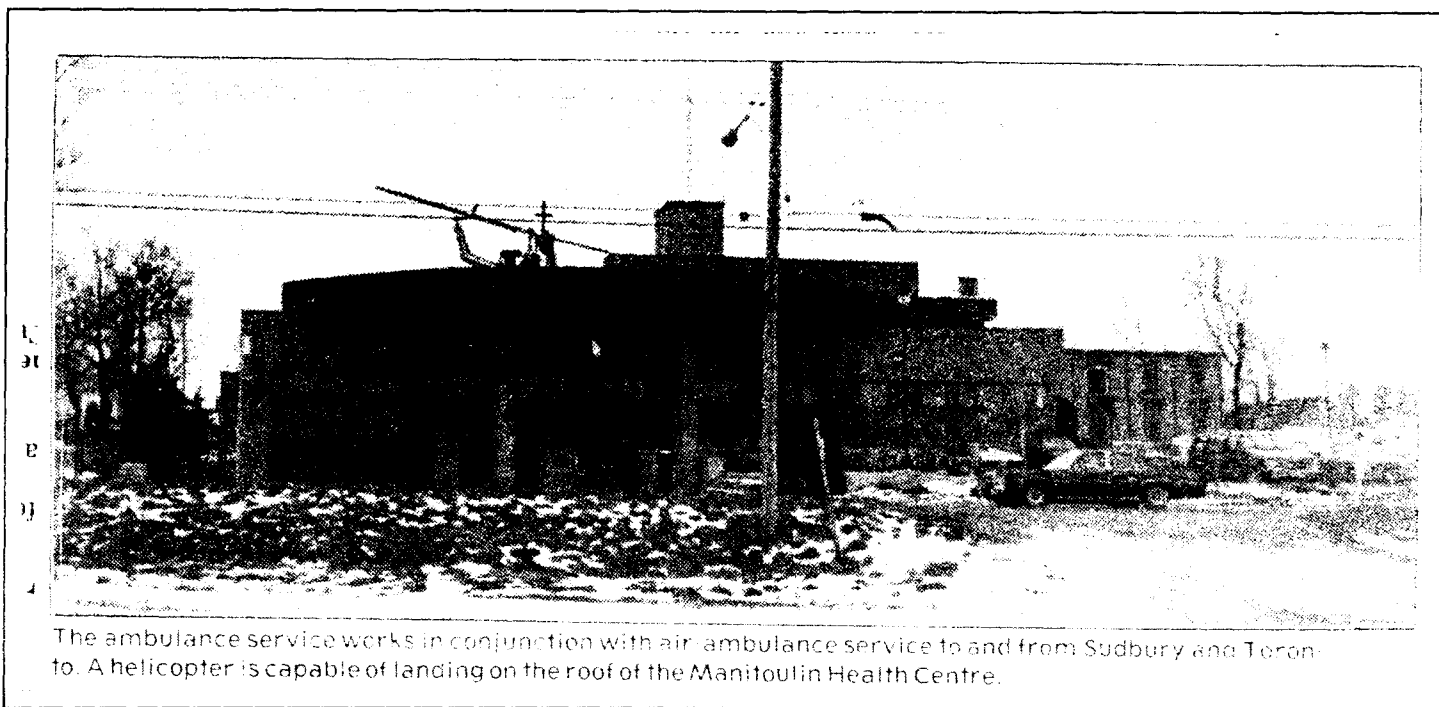
team does backup work for Espanola. Both Espanola and Elliot Lake have orderly ambulance service operations.

Since 1971 the service has operated two ambulance vehicles, the newest of which is a 1986 Dodge van, equipped to carry two stretchers, that the service put into operation in September. The ambulance service is supplemented with the help of a Ministry of Health helicopter that can transport patients to Sudbury or directly to Toronto for extremely specialist care. Although there is "not much love between the air and land 'service' the helicopter definitely has its place," he added.

The ministry operates five helicopters throughout the province at an estimated operating budget of \$11.1 million, Mr. Still said. The annual budget for the ambulance service in Little Current is about \$300,000, he added.

Round-trip time for the helicopter to transfer a patient to Sudbury is about one hour, 14 minutes and the ambulance can make the trip in one hour, 15 minutes. The difference is the out-of-hospital time for the patient, which can make a difference, Mr. Still acknowledged.

The Manitoulin Ambulance Service covers a district from Whitefish Falls and Willisville to the north, West Bay to the west, and South Baymouth and Wikwemikong to the south. The service averages 3.1 calls every day and makes a trip to Sudbury between seven and ten times a week. One of Mr. Still's goals is to set up a satellite ambulance station, on a full-time basis in Manitowaning, to provide increased service to the southern part of the Island. However, for right now the main concern for the service is what is going to happen to them. The Manitoulin Health Centre had indicated to the Ministry of Health they no longer wanted the ambulance service directly affiliated with the hospital but they have since reconsidered, Mr. Still said. The service would then be operated privately. "We're in limbo so to speak... the hospital is still managing us but the MOH hasn't decided what to do," Mr. Still added. The status of the ambulance service is basically the same as it has been for the last two years, said Jim Dafoe, executive director of the Manitoulin Health Centre. "The ball is in their court...the ministry is slowing everything up," he added.



Regardless of the past problems with the service and the ongoing status situation, employees of the service have a sense of satisfaction in their work. "We enjoy our job immensely...it's a good feeling, especially if you're doing a life-saving technique and they come back," Mr. McMurray said. "But sometimes you have to turn the feelings off...people don't see the agony that goes on behind the scenes," Mr. McMurray added.

### **Ambulance Service Members**

*Original Ambulance Service Members still with the service:*

Jim Still, Tom McMurray

*Full time Members*

Manfred Ritzheim, Keith Ashley, Norma Moggy, John Lantree

*Part Time Members*

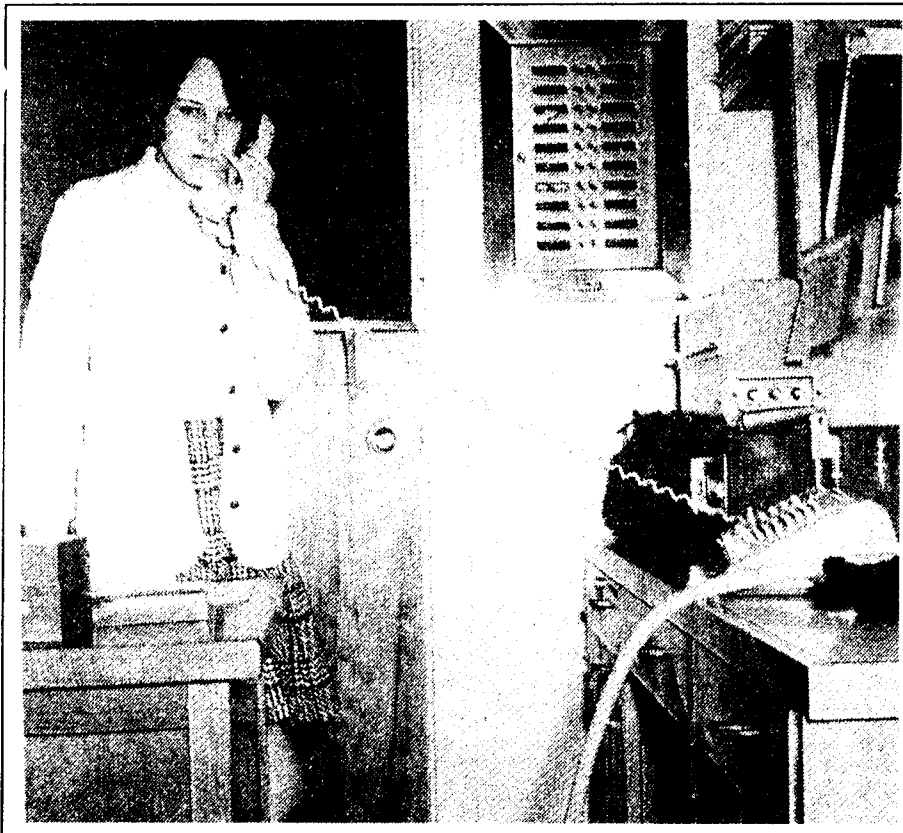
Bonnie Quackenbush, Daniel Kuchta, Debra Bowerman

*Casual Part Time*

Roy Lumley, Anne Elliot, Fred Peltier, Michael Bie

### **Hospital Office Is Renovated**

*(62nd Year - No. 31) Wednesday, February 18, 1970*



The admitting and general office of Little Current's St. Joseph Hospital has undergone a complete facelift. Working in the newly renovated department, Linda Dunn assists a patient in placing a long distance call. Under the direction of the hospital's engineer, Bob Bunton, partitions were removed and new lighting installed. Working with Bunton, staff members Giovanni Fraulin and Lloyd Taylor redecorated walls with, pastel shades and installed modern furnishings, finished off with gold colored carpeting, all bought locally. Specialized work was done by local contractors. The net result of several weeks' work is a pleasant atmosphere in a vital part of the hospital and greater privacy for incoming patients in the new semi - partitioned cubicles.

## Dr. Jack Bailey tells the story of 45 years' service

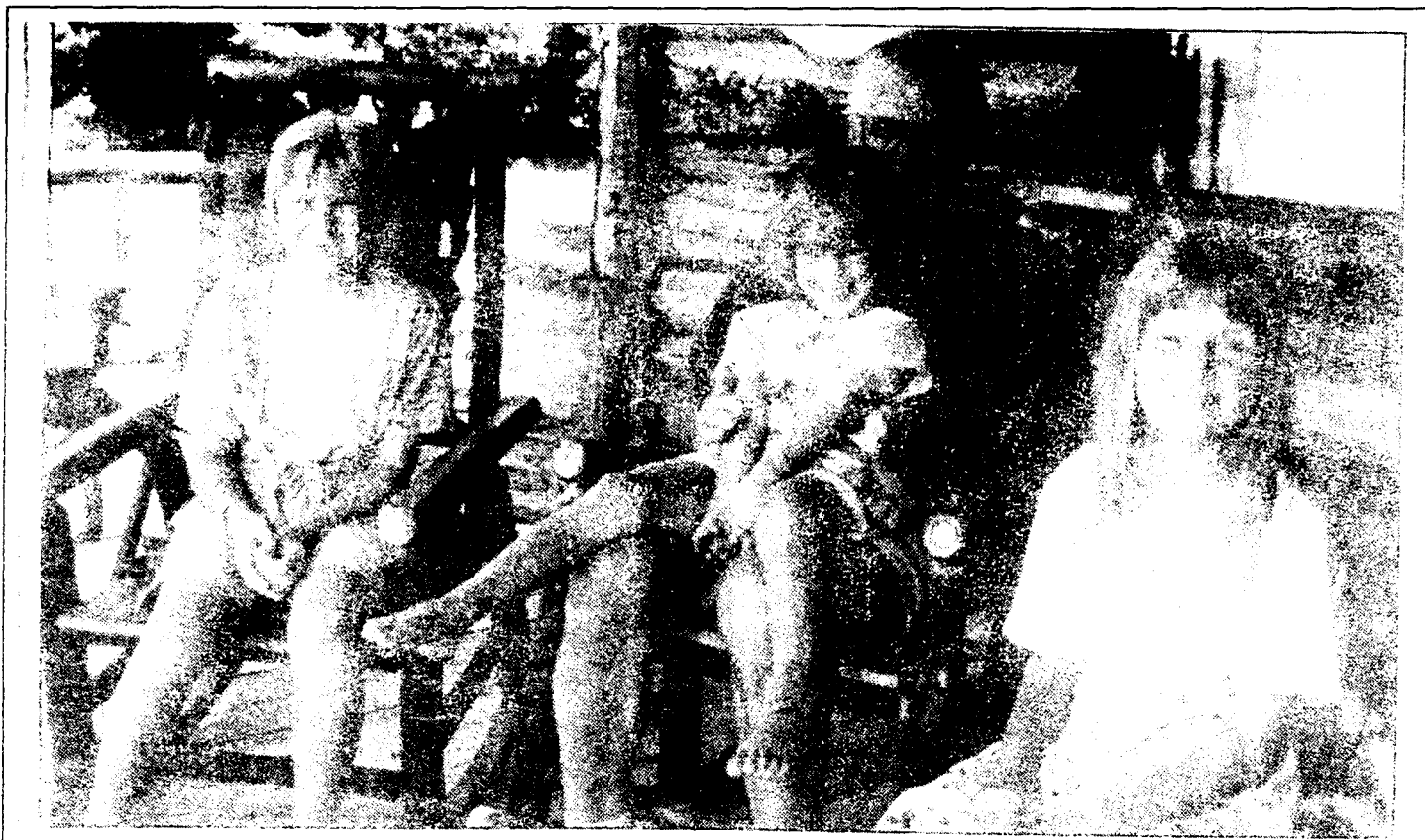
*The Manitoulin Expositor, Wednesday July 28, 1993*

**LITTLE CURRENT** - While most residents of Little Current, Wikwemikong don't know it, they owe a great debt of gratitude to Dr. George Earle of Omemee, Ontario, a man they never met, geography surrounding the town of Capreol, a place many may never have visited.

It was on a farm near Omemee, that Dr. Jack Bailey-Little Current's pre-eminent family physician-was born and raised, It was during his high school years in the tiny Omemee school (his graduating class had six students) that he says, "I decided I wanted to get involved in medicine and I was influenced by our local physician, Dr: Earle."

It would be a few years before Capreol would come into the picture, though. In the meantime, the young Mr. Bailey went to Grade 13 in Peterborough and from there he went to the University of Toronto, where he graduated from its medical school in 1947. He then did a "rotating internship" at Toronto General Hospital for a year, he says as he recalled his past from the front porch of his summer home on the North Channel last week.

After that, the newly designated Dr. Bailey says, "I didn't know how to set up a practice, but I had three qualifications" for his desired medical career. "It had to be in Northern Ontario, in a village and on the water."



Dr. Jack Bailey intends to spend as much time as he can with his seven grandchildren, including, from left, Erin, Stephanie and Nicole, now that he is officially retired after 45 years of medical practice.

As it turned out, a former patient of his during his internship invited Dr. Bailey to Capreol because their local doctor had died. "I had the weekend off, so I came up on the CN train," he says. During that time, he also heard of Little Current, so the family he stayed with in Capreol agreed to drive the winding roads of the day to Little Current-much to their later chagrin.

"I spent an hour in Little Current and decided it looked good," he says. Capreol lost out, he adds, because "it had no water that I could see." During this hour, Dr. Bailey visited the town's physician, Dr. C.R. Young, who was living at the time in the Shaftsbury House. "That was in March of 48," he remembers, "and I said I would be back the first week of July."

### **THE DR. IS IN**

True to his word, Dr. Bailey arrived in Little Current to stay on July 6, 1948. "I came with all my belongings in a suitcase and my medical bag," he says, still moaning about the three-and-a-half hour train trip from Sudbury to Little Current that he calls "agony".

By the time he came back, Dr. Young had moved across Robinson Street (to the house Dr. Bailey and his wife Joyce now reside in). "I lived with the Young's for a year-and-a-half," he says, but as his practice "got bigger, my patients had to sit on the stairway," he says, which he felt was disruptive to his hosts' family life.

From there, he moved his office "to Boyd Flett's building," he says, at the southwest corner of Campbell Street East and Manitowaning. He stayed there for 15 years.

Until the province's doctors got together in the mid-1950s to form Physicians Services Incorporated, the predecessor of socialized medicine in Ontario, Dr. Bailey and all physicians of his day sent out bills to their patients. "My original office visits cost between \$1.50 and \$2.," he says, noting, though, that a new car only cost around \$1,800. "There was a bit of bartering," he says, when patients were unable to pay, "but we never refused service. and sometimes we'd get produce on top of bill, he adds.

Obstetrical care, including prenatal services, cost \$25. at the time, he remembers. "When it went up to \$35. in the rest of the province, we left in there (at \$25.)" he says. "And felt lucky if we collected that at all "During this time he says that Dr. Jack



Dr. Jack Bailey, Canada's Family Physician of the Year in 1989, is Little Current's most recent retiree, having given up his practice of 45 years to do a little sailing, but mostly "enjoy life around here." One activity he does plan to continue, though, is his participation in the "meshing" of native and western medicine that he calls "complementary".

photo by Muir



Henry (Little Current's other doctor, who practiced until the mid - 1980's, Dr. Jack McQuay in Mindemoya and himself regularly charged up to 25 per cent less for their services that doctors would receive elsewhere because "we were lining in low income area."

The Ontario Health Insurance Plan (OHIP) was instituted in the mid-1960s, which opened up opportunities to increase the medical staff in town, he says. Knowing, the demand for his services would increase with OHIP, along with his income, he says, "I could afford to offer another physician the kind of earnings he could make in southern Ontario. Before that, I couldn't pay another physician enough" to come to Little Current. Through an advertisement in Great Britain Dr. Stephen came to town in 1966.

"When Dr. Stephen came, that was the start of a group practice," he says, noting proudly that the Little Current Clinic now boasts six doctors. In the early years, though, he worked every evening as well as part of Sunday to meet the local needs. "For the first 20 years I was only off for part of every Sunday," he says. "And the phone would ring as soon as we'd get back from a long weekend. It was a hard life, but satisfying."

Dr. Bailey credits Little Current's success in attracting doctors to the Underserved Area Plan that was initiated by Dr. Bill Copeman, a friend of his, in the early 1970s; the plan provides doctors coming to areas such as Little Current with annual tax-free grants of \$10,000. for four years. The larger number of doctors is better for both physicians and patients, he believes. "There is a big improvement in medical services over what we supplied," he says, maintaining that "the fatigue of being on call every night is not conducive" to the best practice of medicine. "And doctors want a different lifestyle now," he says, "and not on call every other night"

## **HOSPITAL DUTIES**

Unlike today, when diabetics can determine their own blood sugar levels with a prick of their finger, Dr. Bailey had to do all of his own laboratory work himself or send the samples to North Bay. It took five days to get a blood sugar test back, he says, which made it "hard to impossible to treat diabetics," he claims. His lab was housed in a six-foot-by-eight-foot room and was equipped with a fridge, sink, cupboard, microscope and a centrifuge.

Heart disease and tuberculosis (TB) were also two problem diseases when he arrived. Birch Island suffered through a TB epidemic, he says, shortly after he arrived. The young people were sent to a sanatorium in Gravenhurst for a year, he says, seldom seeing their families in that time. Now, TB patients spend four days in hospital and are sent home on medication. And with today's drugs, monitors and surgery, "there have been tremendous improvements in the treatment "of heard disease. In his first years in Little Current there was no ambulance service or blood band, as there is today.

"The funeral director used to supply ambulance service." Dr. Bailey recalls." to was a station wagon and army stretcher in the back," he says "I rode to Sudbury many times on my knees next to the patient. I could hardly move when we arrived."

To collect blood, Dr. Bailey says, "we had a list of local donors in a black book kept at admitting" at the Sisters of St. Joseph General Hospital, which had opened less than a decade before he arrived. "They would be called in by the doctor," he says. "Their blood would be cross-matched and then we'd take the blood. This was usually during an emergency situation, so we were grossly underserved."

The original hospital, on the same site as the present Manitoulin Health Centre, was an old home that "got enlarged," Dr. Bailey says. Before an elevator was installed, the patients had to be carried down the stairs on a stretcher after their operations on the third floor. "It was a great day when we got the elevator," he says, noting that it was paid for with a \$10,000. donation from the Toronto Star's Atkinson Foundation. The elevator is the same one that is still in service today taking patients mainly from emergency to the helicopter pad on the roof.

The helicopter pad is a story in itself, he relates. Originally, the pad was to have been in the field beside what is now the Manitoulin Board of Education building on Highway 6, even though the hospital's medical staff, administration and board had lobbied to get permission to put it on the roof. Then, during the ceremony to amalgamate the Mindemoya Hospital and St Joseph's Hospital into the Manitoulin Health Centre Corporation, Dr. Bailey met the deputy minister of health of the day, who happened to be married to a former classmate of his. "Over tea and cookies, I told him we can't get permission to build the pad on me roof," he says. "He says the Ministry of Health has the money and the rules can be bent." And they were, and the rest is history, so they say.

Dr. Bailey has seen health services at the hospital increase during his 45-year tenure. In the beginning, consulting clinics "were relatively few," he says. "So I contacted Dr. George Walker and he came over from Sudbury to do general surgery and some "consulting." Those services have "gradually enlarged" to the point where "13 specialties are involved in clinics now," he points out—everything from cardiology to geriatrics, and from pediatrics to cardiovascular surgery.

"The paradox is that we have more doctors here now at the same time we seem to have the need for fewer patient beds," he notes. "Years ago, with only two doctors, you couldn't see patients again the next day so you had to admit them"

### **MANOR OPENS**

The opening of the Manitoulin Centennial Manor in Little Current in 1967 is a great source of pride for Dr. Bailey, although he gives the credit for its eventual construction to a number of people other than himself, including Bill Robinson of Gore Bay, the first chair of the building committee. "The Manor filled a great need," he says. "Before that, there was absolutely no place for the elderly who were disabled to go," making it "hard to discharge them" from hospital, he says.

"There was a lot of difficulty to get the location," he says, noting that every municipality wanted the Manor. When Little Current was chosen, council promised to extend the sewer line to the site, he says, but the building was completed and opened before the line was ready. "That winter, we had a big tank in the basement for the sewage, which was collected in trucks-four trips per day." Noting that the town asked him to keep the number of residents down until the sewer line was installed, Dr. Bailey, instead, says, "I filled it up with as many patients as possible."

When the Manor was opened, one-third of its residents were to be self-sufficient, with the remainder receiving extended care. "Now those requiring normal care don't even get admitted," he says.

### **NATIVE MEDICINE**

When Dr. Bailey arrived in Little Current, the federal government had "designated doctors for the reservations," Dr. Bailey says, a practice that continued until OHIP was introduced. Taking over

Dr. Young's practice meant that Dr. Bailey looked after the medical needs of Sucker Creek, Birch Island and Sheguiandah all for \$69. a month. "I told the government I was being underpaid," says Dr. Bailey. "I felt like a missionary. They then upped it to \$115."

Within months of beginning his Little Current practice, Dr. Bailey began a relationship with Wikwemikong that has lasted to this day. In September 1948, he went to Wily to spell off a doctor there that he says had "had no holidays for six years. So I went there twice a week until he returned." At that time there was a 15-bed hospital in Manitowaning for the Wily patients. Now, members of the Little Current clinic go to Wily five days a week.

Over the years Dr. Bailey's relationship with his aboriginal patients and communities grew to the point where he became one of the few non-natives to be given a native name-Gaikezhe-yongai (meaning "Swift Wing," a name often associated with the eagle, osprey or peregrine falcon).

Even now that he is retired, Dr. Bailey intends to continue his association and support of native medicine as practiced by people like native healer Ron Wakegijig. "Ron and I are invited to a conference in Wisconsin to do a presentation on the meshing of both systems of healing-native and western-as both are used by native people," he says. "They're complementary," he maintains.

### **FAMILY SUPPORT**

Dr. Bailey did not earn the respect of his community and national accolades-Family Physician of the Year-in 1989 and the Order of Ontario in 1990~all on his own, however. Since 1952, he has been married to his wife, Joyce, and during that time they raised four sons-all of whom have been supportive of his career as a family medical practitioner.

His oldest son, Christopher, paid him the supreme honour, following in his father's footsteps by becoming a family physician in Lakefield, Ontario. Two of his other sons, Peter and Geoffrey, are engineers in Atlanta, Georgia, and Port Perry, respectively, while Michael is a lawyer in Toronto. The four have given Dr. and Mrs. Bailey seven grandchildren, whom he now hopes to have more time to dote on.

His retirement plans are simple, he says. A little sailing is certainly in the works, but mostly "we plan to enjoy life around here. People have been very kind to me," he says gratefully. "The honours I have received have resulted from nominations by my colleagues and local people."

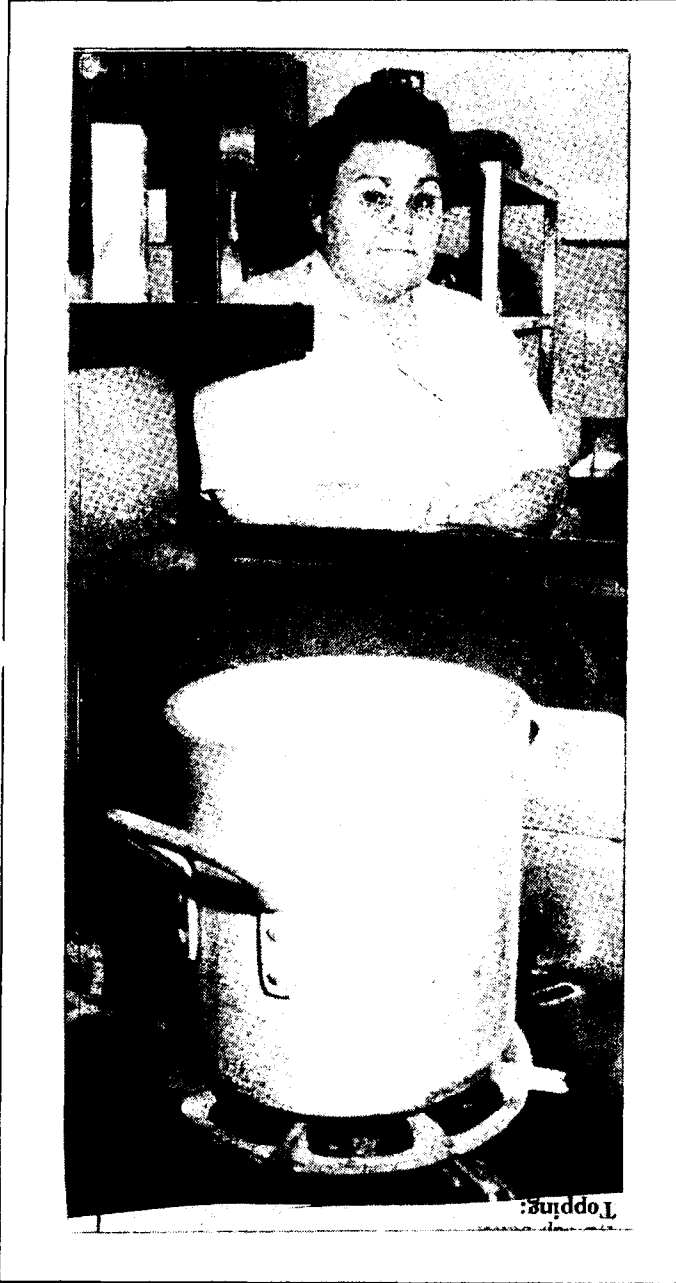
His latest honour is the Jack Bailey Family Medicine Prize, given in his name to a graduate of the Northeastern Ontario Family Medicine Program at Laurentian University who demonstrates "excellence in family medicine as exemplified by the dedication, skill, attitudes and values of John F. Bailey MD." Of the award, Dr. Bailey responds, "it's a tremendous retirement honour for me."

So even if Dr. Bailey is no longer practicing medicine I Little Current -although he admits "I'm still in and out of the clinic a bit -his name will live on with this award but most of all in the hearts and minds of those he served and served with.

# Mary Smith

*The Manitoulin Expositor, date unknown*

Christmas at the hospital will be a familiar affair for Smith. Every second year for over 20 years Ms Smith has cooked Christmas dinner for the patients, their visitors and staff at the hospital in Little Current. And she doesn't seem to mind too much.



"We always have fun," she says, although still mindful that her job as cook is an essential service and she has a responsibility to meet. "We're here for the patients."

But Christmas is a special day, she says. She prepares a full traditional turkey dinner, complete with stuffing, gravy and Christmas pudding, enough for about 30 people, although the number is hard to predict. Family and visitors are able to have dinner with a patient as long as they book early at admittance.

However, the number of patients in the hospital usually drops at Christmas time, as many leave to be with their families.

For those who stay, including long-term chronic care patients for whom having Christmas dinner at the hospital is really having it at home, every effort is made to make it a festive occasion.

The dining room is colourfully decorated and patients receive goodies, such as candy canes, on their dinner trays, as well as fancy serviettes and a Scripture reading.

The staff also receive goodies. Ms Smith says that relatives of patients, especially those in the hospital for a long stay, often bring along treats for the staff, such as chocolates and homebaking.

"It is really nice here and everybody is in the Christmas spirits," says Ms Smith.

She starts the day early, clocking in at 6 am in time to prepare the dinner, and by 2 pm she is finished her work and able to return home just outside of Little Current to enjoy another Christmas dinner which her husband and daughters have prepared.

But Ms. Smith denies working Christmas day at the hospital to get out of cooking the family Christmas dinner. In fact, she has prepared much of the meal the night before and after finishing her shift is ready to enjoy it.

## Auxiliary life members inducted

*The Manitoulin Expositor, December 4, 1994*

**LITTLE CURRENT** - The Manitoulin Health Centre Auxiliary now has two new provincial life members following an official ceremony in the health centre foyer last Sunday to induct Debbie Heise and Joey Hanson. They join the auspicious ranks of the auxiliary's three existing provincial life members: Irene Bousquet, Rita Hawke and Donna Corbierre.

Ruth Mohammed, the president of the Manitoulin Health Centre Auxiliary, welcomed the 20 or so guests and family members who came to "celebrate our provincial life members." Between the five provincial life members, she said they represented a total of around 140 years of service to the health centre in Little Current. "That's magnificent," she said.

Mrs. Hanson, with 20 years of service, and Mrs. Heise, with 18, were originally to have received their life membership pins in the Hospital Auxiliary Association of Ontario at the annual convention last month, but neither were able to attend, so the local auxiliary decided to honour them in their hometown hospital, Ms. Mohammed explained. She handed out certificates on behalf of Algoma-



Manitoulin Health Centre Auxiliary members Joey Hanson, right, and Debbie Heise, third from right, were presented with their provincial life membership pins at a ceremony in the hospital foyer this past Sunday by Laurette Belanger, second from left, the Region 10 chair of the Hospital Auxiliary Association of Ontario from Sudbury. Looking on are the health centre's existing life members Donna Corbierre, Rita Hawke and Irene Bousquet.

photo by Muir

Manitoulin MPP Mike Brown, who couldn't make it because of a death in the family. "He thinks your service is wonderful," Ms. Mohammed told the two new inductees and the three existing life members.

Little Current Mayor John Hodder attended the ceremony. "We're here to honour these girls," Mayor Hodder told those in the crowd. "We know how difficult it is to get up today and the next day" to help out, but it is volunteers such as these provincial life members and others like them who "make our community work," he said. "Without them we wouldn't be rich in the fellowship we enjoy." Mayor Hodder also said "the good times are past" in terms of the various levels of government looking after all aspects of people's lives. "They give a stirring example to the community of the help to be needed" by such organizations as the hospital and the Manitoulin Centennial Manor in the future. Mayor Hodder said of the auxiliary volunteers. He thanked Mrs. Heise and Mrs. Hanson, and the other three life members "on behalf of the town, from the bottom of my heart."

Laurette Belanger of Sudbury, the Region 10 chair of the Hospital Auxiliary Association of Ontario, handed out the provincial life membership pins to Mrs. Hanson and Mrs. Heise. "It's a great honour" to present the awards in front of "such a distinguished audience," Ms. Belanger stated. The local auxiliaries of the provincial auxiliary association "contribute to the well-being of their communities," Ms. Belanger said, through education, fund-raising and volunteer service. Region 10, which has 19 hospital auxiliaries in an area between Ottawa and Mattawa, should be "proud" of the service it renders, she said "I have tallied 264,000 volunteer hours and \$745,000. in donations" in the past year, Ms Belanger noted. "With the rapid pace of change, we must continue to commit ourselves," she said.

Following the presentation of the provincial life memberships, the five life members set to work serving the cake made in their honour to the guests who attended the ceremony. Besides the five provincial life members, the Manitoulin Health Centre Auxiliary in Little Current has 20 active members and a further 30 associate members, according to Ms Mohammed. As well, the Manitowaning Hospital Auxiliary, which supports the Little Current health centre, has about 50 members.

## Help Little Current Hospital



The building fund of St. Joseph's Hospital in Little Current is \$700 richer today as the result of a presentation made to the hospital by the Little Current Lions Club. The presentation of the \$700 is pictured here, Left to right are Moe Sears, chairman of the fund-raising committee of the club; Rudy Joly, retiring president of the club; V. W. Charlton, secretary; Sister Rose Marie, hospital superintendent; Dave Kaichen, of Little Current, district governor-elect for Zone A5. The club raised the \$700 by staging variety shows in a number of neighboring communities. The hospital at present is being expanded to care for additional patients.

# Haven House food baskets to contain children's toys

*The Manitoulin Expositor*

**LITTLE CURRENT** - Haven House Christmas food baskets will have an extra blessing in them this year-thanks to two Manitoulin Health Centre workers who are doing double duty as Santa's helpers.

Sally Assinewai and Carole Mayhew, who both work in the kitchen at the health centre in Little Current, are collecting toys for the children of the families that will be receiving the food baskets. To that end, they have built a large toy box and decorated it to look like a Christmas present. The toy box is now placed in the lobby of the health centre, where people can deposit their new or used toys and games.

To make sure the toys are ready to be delivered with the Haven House Support Group's food baskets on December 15, the toys need to be dropped off at the Manitoulin Health Centre by December 12. While Ms Assinewai, who came up with the idea of the toy box, understands that the food baskets are important, she believes "kids need toys too on Christmas Day." As a child, she remembers that in good times or bad, her father always made sure there were toys under the tree. "Christmas was an important time for him," she says, adding that his influence was part of the inspiration for this project.

Donations of toys and money, which will be used to purchase toys locally, have already been received, Ms Mayhew says, and hand-knitted items have been promised. As well, some Little Current stores have agreed to supply Christmas paper to wrap the gifts in.

From their co-workers at the hospital, they say the response has been good, and Ms Assinewai hopes she can get some of them to "a gift wrapping party," to help her and Ms Mayhew wrap the presents. Using a list provided by Haven House, these elves will be able to match the donated toys with the appropriate aged children. If the response in Little Current is good this year, Ms Assinewai and Ms Mayhew say they might build another one for the Mindemoya Hospital next year.



Sally Assinewai, left, and Carole Mayhew want people to help them "make a child's wish come true" this Christmas by donating new or used toys in their toy box at the Manitoulin Health Centre in Little Current. Santa's two helpers will then wrap the toys, which will be distributed along with the Haven House Support Group's Christmas food baskets.

# St. Joseph's General Hospital

*The Manitoulin Expositor, no date given*

In Canada and the United States, May 12th is National Hospital Day. Therefore, we have been asked to tell some of the story of our hospital to those we serve. St. Joseph's General Hospital was opened in Little Current in 1945. It is the smallest of six modernly equipped General Hospitals operated by the Sisters of St. Joseph of the Diocese of Sault Ste. Marie. The others are in Blind River, North Bay, Sudbury, Port Arthur and Elliot Lake.

The road to recovery for the sick centres in the hospital. It must have economic and efficient help, no matter how small the hospital. Proper personnel has to be in constant readiness to serve 34 hours of the day, seven days a week, all year. This is a very great burden when qualified help is so difficult to obtain. It requires a constant payroll. A hospital cannot have a slack payroll period even though it may have a slack patient-load period. The hospital cannot control its amount of business, beds must be available for certain types of cases and people - medical and surgical; male and -female; maternity and pediatrics - these cannot be mixed.

The Hospital Act demands one Graduate Nurse for 35 patients during the day and one Graduate Nurse for 50 patients at night. Competent nurses' aides or other lay help are also necessary. But they' are not always easy to obtain, due to our distance from large centres and the small local population, even though working conditions and salary schedule are good. In smaller places, the lack of abundant social and recreational activities may discourage applicants. Of course, staff problems are common to most hospitals, sometimes they are partly solved by some volunteer help. By this is meant, those who offer to come in two to four hours a day several days a week. The arrangement helps out hospital finance problems, problems, for the new Ontario Hospital Services Plan does not solve all of these.

For example, the hospital plan seems to be reducing the length of stay, but it is increasing the number of employees needed to provide services for the rapid turn over of patients. This has shown a sharp rise in hospital costs.

Readers will be interested to know where the \$12.15 a day per patient goes. It is spent for rooms, meals nursing care. operating room, recovery room, delivery room, electrocardiograms, x-ray, drugs and, other medication, dressings, oxygen as well as laboratory services. The latter is a big item and better facilities are needed, such as space and equipment and laboratory personnel.

Incidentally, there is a good future for young people in laboratory work here and elsewhere. The Sudbury General Hospital does most of our pathology and blood chemistry. If we had the facilities this could usually be done locally.

The \$12.15 per day does not cover a very important part of our costs, namely building. Money for new equipment or expansion cannot be taken from this daily charge. It is here the community and the Women's Auxiliary help is so welcome and necessary. Voluntary public contributions are very much needed if hospitals are to retain proper freedom prestige, services and expansion.

The Provincial and Federal Government will be providing a certain percentage for new equipment and expansion, when they deem necessary, but a great gap still remains between the actual cost and the amount of Government assistance.



The following is taken from our records for the year ending 1956. Admissions - 1160 adult and children; total births - 155; total deaths - 25; number of patients treated as out patients x-ray, emergency, laboratory etc. - 932; Number of patients x-ray 3453; number of meals served 5829; number of hours employment 64,127 Operating expenses - \$125,478. of which \$88,172 went for salaries; new equipment \$21,864. Collect-accounts outstanding - \$22,000. Number of employees (not including the sisters) full time - 30; part time 3.

We are very fortunate to have on our medical staff, several doctors, Dr. J. A. Henry and Dr. J. F. Bailey of Little Current; General Practitioners; Dr. Mary Habgood, Obstetrician and Gynecologist, of Manitowaning. Dr. M. J. Lynch, Pathologist of Sudbury General Hospital; Dr. T. A. M. Thompson, D. R. of North Bay, Radiologist for most of our films.

We would like to say also the Ontario Hospital Services Commission request that all members of the family carry in their wallets at all times an exact copy of their certificate with all details, i.e. name, initial, contract number, supplementary code and effective date. The Contract number alone is insufficient. In addition the patient has to answer the following questions (1) Does he pay personally (2) Does he pay through payroll deduction. (3) Is he a recipient of public assistance. It is best if the receipt for the original payment is also presented.

St. Joseph's General Hospital Women's Auxiliary invite one and all to visit and inspect the entire hospital on National Hospital Day Tuesday May 12. Tea will be served from 2:30 to 4:30 pm by the Woman's Auxiliary.

## St. Joseph's wants blood donor support

*The Manitoulin Expositor, February 2, 1977*



St. Joseph's lab technician Sanjay Tarachandra performs test to determine donor's blood type

It's a matter of life and death...your neighbour's, your friend's or, possibly, your own. St. Joseph's Hospital in Little Current is out for blood and wants Islanders living within a radius of 25 miles from Little Current to roll up their sleeves.

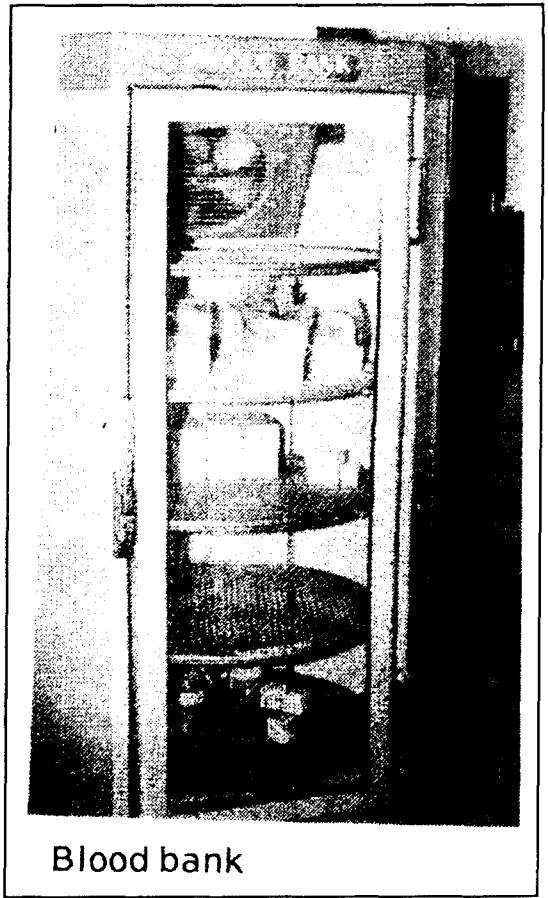
Why the need? One of the medical staff's most treasured life-savers is a little black book with the names, phone numbers, and blood types of volunteer donors. In an emergency requiring blood transfusion, the lab technician flips through the pages in search of donors with a compatible blood type, reaches for the telephone, and hopes for the best. If the number has been taken out of service, if the donor has moved, if he's not at home, or if he's getting on in years, the technician moves on to the next name on the list. Meanwhile, the patient in need of the blood is in greater danger of becoming a statistic, the little black book becomes smaller and smaller, the drama builds, and finally, the doctors, nurses and technicians' begin rolling up their own sleeves.

The blood donor book at St. Joseph's Hospital was last updated eight years ago and needs a transfusion itself if it is to do the job for which it was intended. The hospital staff is appealing to the public to call the hospital switchboard or any individual doctor to make an appointment for a harmless blood test. Your blood type will be determined and a sample sent off to Toronto to ensure your arteries aren't carrying anything you wouldn't want to share with someone else. If you pass the test, your name and phone number will be noted down in the little black book and you may one day find yourself saving someone's life, an opportunity you may only fully appreciate when you realize the recipient is across the hall on an operating table.

The thought of yielding a pint of blood can sometimes frazzle the nerves of the most fearless among us, but when the blood-letting is over, you'll still have nine or ten pints for yourself and after a few minutes rest you'll be as good as new. According to medical experience, you can give a pint every three months without unduly taxing your body's capacity to replenish the loss. Chances are you won't be called upon that often, but because St. Joseph's blood donor book is as dangerously thin as it is, some members of the community with blood types in demand now find themselves called upon more frequently than doctors would like. Some help is provided by the Toronto

Red Cross in the form of regular blood shipments which are refrigerated at the hospital and ready to be pumped into a patient at a moment's notice. However, the supply is often only enough to sustain a patient until donors can be reached. St. Joseph's is one of the few hospitals in Northern Ontario to have such an arrangement with the Toronto Red Cross but has no more than a pint (or two at the most) that would be compatible with the blood type of any on patient.

In emergency cases characterized by serious hemorrhaging as many as eleven pints of blood may have to be administered before the condition of the patient is stabilized. That means a possible need for ten donors, every one of them a determining factor in the delicate balance between life and death. So, if you're between the ages of 18 and 60, have a heart, lend an arm, and call today. It won't hurt a bit.



Blood bank

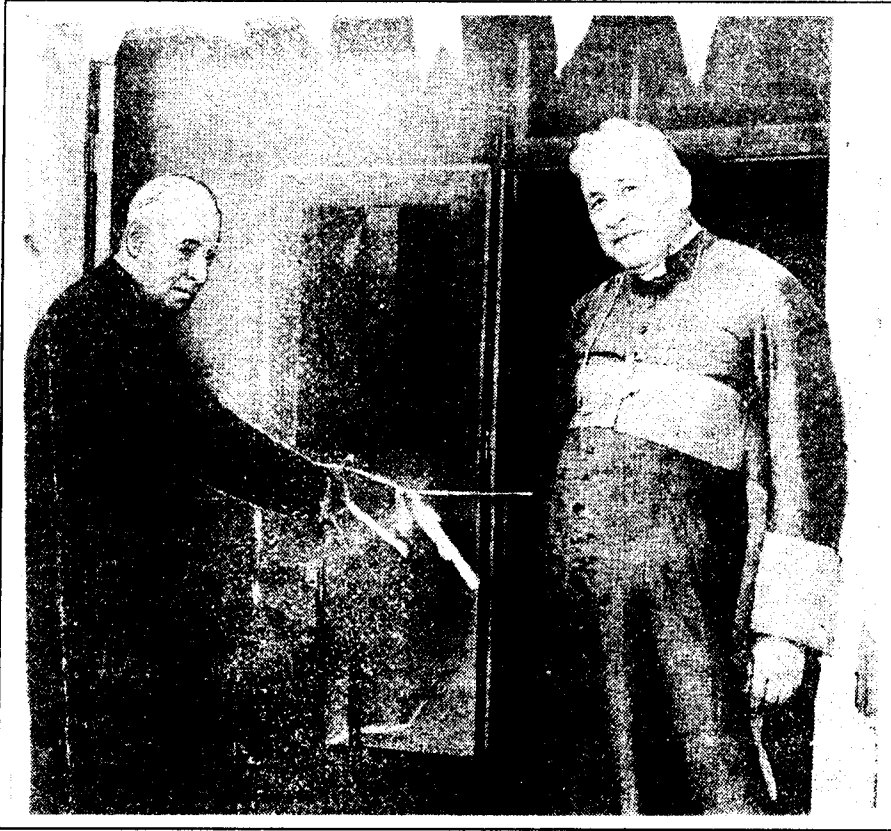


Doesn't it look harmless? It's all you have to do to have your name placed on the donors' list.

## Elevator Grant Set Stage For 22-bed Addition to Little Current Hospital

*Special to The Star*

**Little Current, August 31** - A dream of public service came true here yesterday when St. Joseph's General hospital's 22-bed, \$125,000 addition was opened to the people of Manitoulin district, all because of a grant of \$18,280 by The Atkinson Charitable Foundation.



Mayor White cuts ribbon as bishop R. H. Dignan looks on



As Rev. E. T. Kennedy acts as master of ceremonies, crowd streams into building

Nearly 500 people, some of whom came from 75 miles away, saw Mayor Charles White cut the ribbon after a resume of the hospital's eight-year history by Rt. Rev. R. H. Dignan, Bishop of Sault Ste. Marie diocese.

How the whole building had originated from an Atkinson Foundation grant toward construction of an automatic electric elevator in the three-storey structure, was told by W. J. Paterson, editor and publisher of the Manitoulin Expisitor.

When the building was surveyed for installation of an elevator shaft it was found the shaft would have to be built outside the existing building. And when a building must be built to house the shaft it was decided to include additional bed space to accommodate additional patients of the always full 38-bed hospital.

The 38-bed hospital which accommodated as many as 50 patients at a time has thus become a 60-bed hospital which can take care of as many as 80 if the need arises. The hospital serves an area 120 miles by 60 miles, with a population of more than 12,000. Only other hospital in the district is a Red Cross outpost hospital 30 miles away at Mindemoya.

