

Is The Community Hospital Worth It?

Are hospital costs high? This is the perennial question kicked around by the public, politicians and press. Yet, at the same time, there is continuing pressure for high hospital salaries, more staff and more services.

Since the advent of federal-provincial hospital insurance a decade ago, there has been a steady acceleration in the community hospital's role, from primarily nursing care to a community health centre, with increasing out-patient and other health services.

Six years ago West Haldimand General Hospital treated 2,013 patients. Today the figure has jumped to 3,692 patients. A half million more patients were hospitalized last year as compared with ten years ago. More than three million were cared for by hospitals.

Hospital construction cost have risen nearly 400 percent during the same period. Ten years ago it cost \$10, to \$12,000 to put one bed into treatment service. Today the figure has jumped to \$30, to \$35,000 per hospital bed. As a contrast, in 1930, construction costs were \$1,800 per bed.

Compared to 1900, the daily cost per patient has risen 500 percent. The average cost per patient day in 1900 was \$1.00; in 1945 it rose to \$5.82 and now the figure has reached between \$40, and \$50. The cost at our hospital is \$32.80. And this only covers day to day operating expenses - not including building and equipment costs.

The recent federal-provincial Task Force Reports on the Costs of Health Services in Canada made a detailed analysis on some of the problems affecting hospital costs.

One must remember, however, that it was only a little more than a decade ago that most community hospitals were charitable institutions, relying on philanthropic gifts and donations from wealthy citizens and businesses and the members of the community.

With the adoption of the hospital insurance scheme, the burden of financing daily operating and construction costs moved toward the public purse. However, we still do rely on public funds for financing special services and some of our constructions costs. Across Canada, this ranges from a mill rate tax base to an outright grant.

Hospitals have had their growing pains from the problem of low wages and from near non-existent bookkeeping methods which are now the sophistication of twentieth century industry.

This health care industry which employs nearly five percent of our national working force is a labor intensive industry and these costs amount to 70 cents out of every dollar spent at the daily rate.

This is in contrast to the petroleum industry which spends less than 10 cents out of every dollar on labor. There are more than two hospital employees to care for each patient.

Pressure is on for increased wages for health care workers to reach the comparable level of other industries. Unlike any other service or industry, the hospital MUST stay open and on the job 24 hours a day, every day of the year, to preserve life.

Although costly in terms of money, the modern hospital and modern hospital care represents a tremendous saving to society in terms of life.

According to the Hall Royal Commission on Health Services in 1964 "the emergence of modern technology and treatment methods has increased the importance of the economical aspects of hospital care so that today access to equipment and services of the modern hospital is indispensable to high quality general practice. At the same time there has been a movement to making the hospital the domain of the specialists."

These specialist areas have increased the cost of health care. This is in contrast to some years ago when we only had one nurse who did everything. With the development of modern medicine, every small hospital today has equipment far in advance to what was in the large hospitals 25 years ago.

Since the time of Joseph Lister, the first man to use antiseptic in operations, the control of infections has progressed beyond his wildest dreams with the hospitals leading the way. Again, this adds to the bill along with new drugs and diagnostic services and equipment maintained by the hospital.

Emergency treatment, out-patient care, therapeutic rehabilitation, geriatric and psychiatric care and treatment, which were to a degree unheard of a few decades ago, are

commonplace in hospitals today. In the past, the responsibility for this type of care rested solely with the family in the home.

In today's highly developed society this role is played by community hospitals. Even the familiar family doctor who cared for patients in the home is almost a thing of the past. Today the doctor relies on the community hospital's facilities to help him diagnose and treat his patients.

Translation of research in the approaches and utilization of new equipment for patient care is much faster today. For example, it took 40 years for the electro-cardiograph, developed in 1903, to become a standard hospital tool.

The opposite is the case today. What was new yesterday may be literally obsolete today in the exploding health care field. Even the technology or the space age is making a critical impact on hospital and health care.

Spriiling inflation, which our provincial and federal governments are trying to combat, also must be taken into consideration by those who question the costs of building and equipping hospitals.

Between the planning stages, final approval, raising of the money and the construction, the cost may have skyrocketed 10, 15 or even 20 percent. Many times hospital boards encounter problems because of this inflation. They find themselves going back to the community and the governments for more financing or settling for less than they had originally planned on.

Modern hospitals have four basic functions. The first is patient care. Another primary function is to teach and train health care workers through formal and

informal programs in hospital schools and in-service programs.

Because hospitals are a large source for training skilled health personnel, most other community health jobs are filled by hospital trained people.

Also research in conjunction with universities and statistical data collected by all hospitals are being used to win the costly war against disease. Hospitals practice preventative medicine through public education programs and clinics. Some regional hospitals even serve as poison control centres.

A little over a quarter century ago only 37 percent of Canadian births occurred in hospitals and 56 babies died out of every thousand. Today, 98 percent of births are in hospitals and infant deaths have decreased more than 60 percent.

This is only one of the ways the modern hospital is saving and maintaining life. It is common to read about organ and heart transplants today and cancer is being checked through early treatment and hospital care.

The Dominion Bureau of Statistics states in 1964 some 100 general and allied hospitals in Canada admitted 3 million 1000 general and allied hospitals

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VICTORIA DAY CELEBRATION Bands Ball Games PROGRAMME

SATURDAY MAY 16th
Dancing to Don Leatherdales Clubmen, Jarvis Community Centre From 9 p.m.
SUNDAY MAY 17th
CHICKEN Bar-B-Q - \$1.50 Plate, Jarvis Community Centre - Rain or Shine No waiting in line - From 4 p.m. on -
MONDAY MAY 18th
CALUTHUMPIAN PARADE - 1 p.m. THREE BANDS, FLOATS, HORSES, MAJORETTES. Ball Games From 10 a.m. to 9 p.m. Finals in the evening.
TEEN DANCE PARTY TO THE "SEA DOGS" Jarvis Community Centre 2:30 p.m.
RIDING CLUB COMPETITIONS Big Creek and Dry Lake Saddle Clubs 2 p.m. Pony Chariot Races.
Rides For The Children
PRIZE DRAW FIREWORKS DISPLAY AT 10 P.M.
FRESH BAR-B-Q CHICKEN AMATEUR SHOW

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WED., THURS., FRI., SAT. SCREAM AND SCREAM plus a Adult Entertainment
FEW BULLETS MORE
DUSK TO DAWN SHOW MAY 17 th.
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ANGRY RED PLANET MON., TUES.
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The Weeklies Say

CONTROL EXPRESSIONS

The licensing (of newspapers) appeared to be part of the federal government's policy to control expression of thought through review of licences to enjoy government favor annually. Granting of a licence ensured postal privileges by way of special postal rates as Second Class Mail. We congratulate (Postmaster General Eric) Keirans on his reversal of a policy that neglected the fundamental privilege of a free press. - Rimbey (Alta.) Record

LOOKS NAIVE

What makes it difficult for reasonable (Indian chiefs) to carry more weight is that too often the white world is so concerned with its whiteness that it makes non-whites who counsel racial tolerance and equality seem naive. - Swift Current (Sask.) Sun

MAKES SENSE

Mr. Diefenbaker's contention that the (Canadian Wheat) board needs "new bold" makes sense. Even if the board is doing an adequate job, its over-all effectiveness may be suffering from a lack of confidence. - Swift Current (Sask.) Sun

PARKING FEES

Parking meters aren't designed to make money for the city. The only reason they are installed is to control downtown parking so people who wish to shop can get a place to park. - Cranbrook (B.C.) Courier

DRUG ABUSE

The more often young people are reminded of the facts about drug use, or at least told where they can obtain the facts, the more reason there is to hope the problem can be solved. - Chilliwack (B.C.) Progress

LONE RESPONSIBILITY

Laws and warranties by themselves will not prevent needless accidents caused by auto malfunctions. The individual owes it to himself, his family and the public at large to ensure that his vehicle is sound. It's up to individuals to accept responsibility for the safe mechanical condition of their cars. - Salmon Arm (B.C.) Observer

SIMPLIFY ABORTIONS

How much simpler it would be if abortion was removed from the Criminal Code entirely and made strictly a matter between a woman and her doctor. If a woman wants an abortion and her doctor has no medical reason for denying her one, then she should get one. - West Vancouver (B.C.) Lions Gate Times

Hospital

Continued From Page 6

In Canada admitted 3 million patients, at an average cost of \$26.87 per day. The total bill for all of hospital costs had risen to nearly \$15 billion. Hospital costs had risen to nearly \$15 billion.

Getting back to the federal provincial Task Force Reports on Cost of Health Services, there are many good suggestions on how to keep hospital costs from rising out of perspective. However, these benefits are long range.

The Hall Royal Commission stressed the need for patient and citizen health care while the Task Force Reports stressed efficiency in the total system. The two provide a bases for patient and taxpayer rights.

Undoubtedly better patient care will result from better use of facilities and resources. But over-emphasis on efficiency and cost can short-change the patient and the community.

Here we quote an article in the January issue of the Canadian Hospital Association Journal.

"Taken to the extreme, it might be more efficient and less costly to the health care system if people with various illnesses or ambulance service, etc. Mathematically and economically it might be better for the system, but does the system exist for statisticians and governments, or people-patients.

What is it worth to the individual and his family to be alive and healthy? What is it worth to you to know that there is a place you can go to get the best possible treatment available anywhere in the world today? And to know that there are skilled hands and the latest equipment to help restore your health and prolong your life? We ask you, is the community hospital worth it?

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New Addition To Glendale School

The Ontario Department of Public Works will call tenders shortly for an addition to the Department of Correctional Services Glendale School, Simcoe.

Public Works Minister J. R. Simonett said the cost of construction is estimated at \$340,000.

The new addition, located at the south end of the existing classroom wing, will provide additional space for workshops, offices, teachers' lounge and facilities. The three new workshops will consist of an industrial arts shop, occupations shop, and an electronics shop.

Each shop provides a working area, teaching area, store room and a washroom. A Head Teacher's office,

guidance office, waiting area, lounge, seminar room and washroom facilities for staff and visitors are also provided.

The new project will be of one-storey brick construction with a mechanical penthouse over the lounge and office area blending into the existing training school and the new addition.

A security wall will be located at the front of the building as well as parking for visitors.

Architectural and engineering design for the new addition was provided by Department of Public Works staff.

COMMUNICATION GAP

For some reason, our school board has started to adopt the policy originated by our local hospital board, which doesn't even let the public or press into its monthly meetings. Public officials should never lose sight of the one basic truth: It's public money, public schools, public hospitals and public services they are charged with administering. - Quesnel (B.C.) Cariboo Observer

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JUNIOR PLAYER (18 years and under)	\$ 35.00
JUNIOR PLAYER (18 years and under and Family Member)	\$ 25.00
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FIVE DAY FEES

(Monday to Friday)

PLAYING MAN	\$87.50
PLAYING LADY	47.50
PLAYING FAMILY	95.00

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Week Days \$3.00	Week Ends and Holidays \$4.00
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