

Hospital Auxiliary a dedicated group

In today's busy world, volunteers are fast becoming a rare commodity. Yet, despite the hustle and bustle of daily life, the Georgetown Hospital Auxiliary with its more than 130 volunteers is an active and dedicated group.

The organization's history dates back to the late 1950s when a small group of energetic women first established the Hospital's Auxiliary. Since its creation, the organization's financial contributions to Georgetown Hospital total about \$300,000.

Some of the original founders such as Inez Chrichton, Lois Graham, Lena Johnston and Eva Patterson, have remained active in the Auxiliary since its inception. They, and others like them, proudly continue Auxiliary's tradition of fund-raising programs and activities.

There are, however, some things that have changed. Lena

Johnston explains. "I remember taking around the Auxiliary's first gift cart. It was 1961 and the rules for volunteers were very strict. We were required to wear low-heeled shoes, and were not permitted to wear pants, make-up or earrings. When selling items from the cart, we would always remain outside a patient's room and talk to them from the door."

Today the Auxiliary's role has expanded to include ward work, training teen volunteers, providing hairdressing services in the Hospital's hair salon. Then there's also a baby photography service, flower arranging and running two gift shop operations.

Ambitious activities like these could not happen without the dedication of countless Auxiliary volunteers who have so willingly donated their time and effort to Georgetown Hospital.

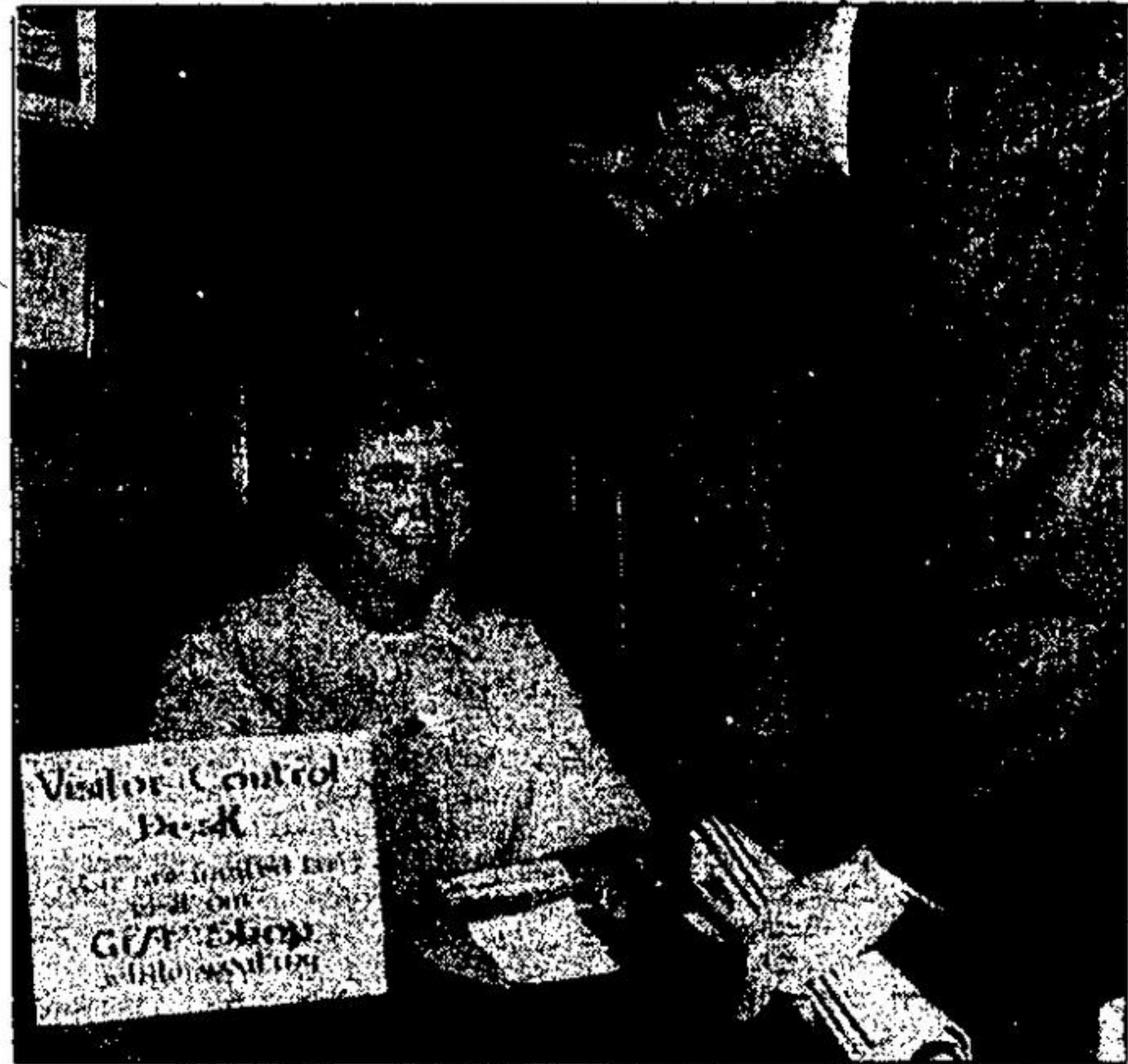
To all members - past, present and future - a special thank you.



Auxiliary helps out

In 1989, the Georgetown and District Memorial Hospital Auxiliary donated a \$40,000 mobile X-Ray unit to the hospital. The Auxiliary paid for the unit over two years. Pictured above: Gerda Rasmussen,

Inez Chrichton, Barbara Phipps, Jackie Lavelle, Stien Ligterink, Eva Patterson, Anita McReavy, Eva Middleton, Anna Ewen, Vi. Haines, Karen Caisie and Dave Barton. (Herald photo)



May 7/64 - Instituted in 1963, the Hospital's Control Desk was used to regulate the flow of visitors to patients. Auxiliary member Mrs. John Vietch "checks in" John Ollivier. (Photo submitted)



May 10/62 - Sterilizing equipment is Mrs. P. Lewis, keeping a careful check on the dials. Note the uniform and cap. (Photo submitted)

Discharge planners give special care

Today's Hospital-based Discharge Planners, such as Georgetown Hospital's Eunice McGowan, are routinely involved in many aspects of patient care.

The Hospital's Discharge Planning Department was established in 1990. Since that time, Discharge Planning has been acting as a liaison for the Hospital and the community, providing that all-important link for patients between their hospital recovery and convalesce at home.

"The Hospital uses a team approach in the Discharge Planning Program," Eunice McGowan explains. "We are involved in ongoing planning with physicians, occupational therapists, physiotherapists, and nursing staff who provide us with a patient's medical information. As well, the Discharge Planning assessments, related to the patient's social needs, allow us to fully evaluate a patient's readiness to return to the community or a Long Term Care facility," notes McGowan.

Understandably, a variety of forms and applications, including a five-page Assessment Form, ensure that top-quality patient care continues after discharge. Details such as the patient's medical data, as well as financial concerns, family, housekeeping requirements and many other issues are examined - all before the patient leaves the hospital.

"There are a great many factors involved in ensuring the patient makes a smooth transition back into the community," McGowan says. "For example, a patient returning to his or her home after a lengthy hospital stay may often require additional

counselling in order to make the recovery complete. For others with more serious illnesses, perhaps alternate living arrangements may be necessary.

"Ultimately, the same high level of patient care received in the hospital should be available to everyone, once they are discharged," adds McGowan.

Through its Discharge Planner, the hospital taps into countless outside services including Halton Helping Hands 'Friendly Visitor Program.' This service is one of many offered under the Ministry of Community and Social Services' Home Support Program. Other services include 'Meals on Wheels', homemaking or transportation services.

Alternatively, the hospital may turn to Home Care, a program funded by the Ministry of Health. Home Care provides additional medical care to patients in their own homes including nursing, physiotherapy and occupational therapy.

Or, perhaps a patient might simply require daily telephone checks, available through the Distress Centre. Whatever the case, the hospital reaches out to an extensive network of community-related services.

Interwoven in her role as Discharge Planner is Eunice McGowan's training in social work. Her experience includes psychiatric nursing and psychiatric social work at a number of large hospitals in western Canada. In addition, she was the acting Executive Director of Halton Helping Hands, and, most recently, the Director of the Home Support Program at Community Care, East York. Currently, she is the Chairperson of the Ontario Home Support Association, a 500-member agency organization.

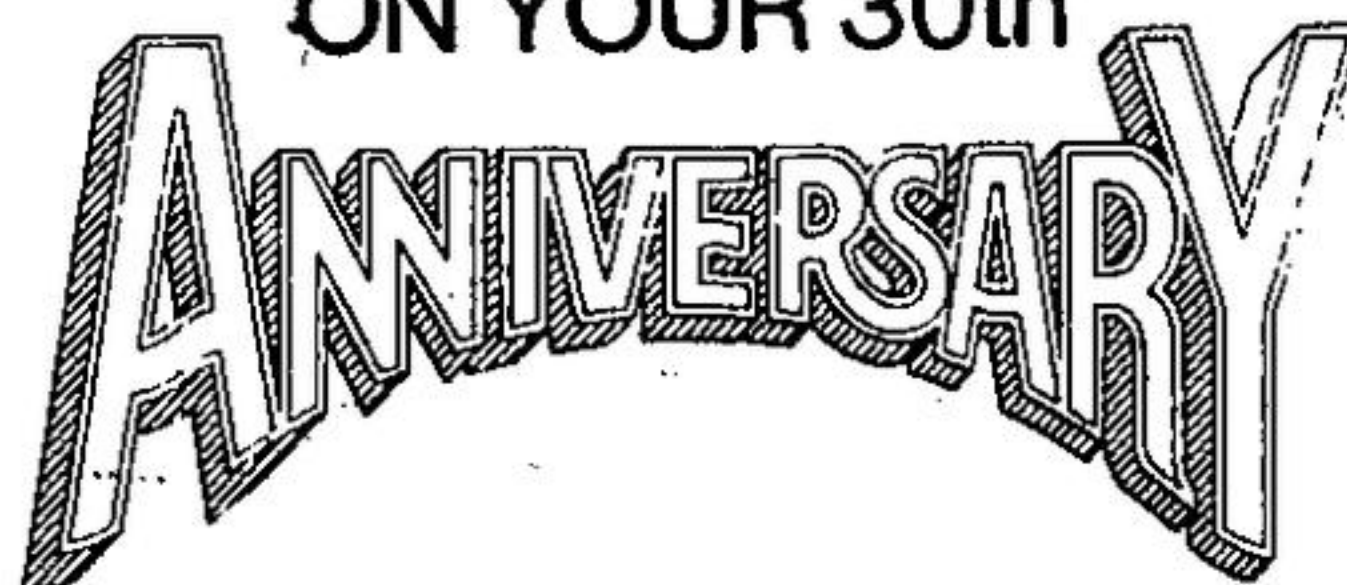


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