

Life as a Health Care Professional (Part 1 of 3)

Collector: **Gertie Fowler**

Contributor: **Cornelia Linstead**

Gertie Fowler:

Today is September 2nd, 2009 and I'm here in L'Anse au Loup today with Cornelia Linstead, and Cornelia is going to share some memories with me today that she has of the early days of the Nursing Station, and the changes in Women's Health today. So Cornelia would you like to share some memories with me?

Cornelia Linstead:

I'd love to share some memories Gertie, but it takes some time to get it all together ... ah... since '65 to 2009, as you can imagine, there's been so many changes. But I will do my best to get some of them together. But please note, first of all, that it's my own personal account from 1965 to 2009, it got nothing to do with work.

Gertie Fowler:

Yeah.

Cornelia Linstead:

Okay.

Gertie Fowler:

Okay then.

Cornelia Linstead:

So it just my own personal....

Gertie Fowler:

..it's your memories..

Cornelia Linstead:

It's my memories, its in my own personal ah... experience.

First, I will talk about the changes in the organizations name.

Gertie Fowler:

Hmmm....hmm.

Cornelia Linstead:

My different roles in the facility, because I've come from ah... PCA to now Site Manager ... RN to Site Manager and the staffing and the hours worked the clinics, in patients, transportation, communication, and new equipment and I'm sure that through it all I'm just telling you about my experience but as you can see ah.... it is the changes in the Health Care System, itself ah... but all of it lead to improvement in women's health plus the health of the whole general public.

Gertie Fowler:

Okay. Alright then.

Cornelia Linstead:

So you can stop me at any time to ask questions.

Gertie Fowler:

Alright then.

Cornelia Linstead:

We'll go from there.

Gertie Fowler:

Okay.

Cornelia Linstead:

Okay. In the 1960's we worked out of a small Nursing Station, this is just for comparison now, and in '83 we moved to an Acute Care Health Center and '94 a Long Term Care Unit was opened and in 2002 another extension was added to our Long Term Care Facility.

In the 1960's, the organization was known and funded by the International Grenfell Association, now this Association was a charitable group, and I believe in '65 it was still... it was ah... it was still run by the same ah group, the International Grenfell Association ...but it had a little help from Government. It was operated under the direction of Dr. Gordon Thomas, that's who was there when I first started.

Gertie Fowler:

Oh ... right.

Cornelia Linstead:

Okay. And after his retirement... but that was only for a short period just the same and after his retirement by Dr. Peter Roberts, it is my understanding that it was Dr. Peter Roberts who saw the transition from the International Grenfell Association to the Grenfell Regional Health Services, now totally funded, by this time, by government.

Gertie Fowler:

By government, okay... yeah.

Cornelia Linstead:

Ah....but I ... but they still continue to receive some support as do other areas, right? ...from IGA just with the equipment and things like that ...but everything else is completely funded by government.

The services covers... covered a broad area back in the '60's as it does now really. It covered... in the '60's it covered from the whole Northern Peninsula from Port Saunders and area to St. Anthony, and all of Labrador with the head offices in St. Anthony, I don't quite remember the exact dates but I believe it was in the '70's when Port Saunders and area joined Western Health.

And Northern Labrador... from Cartwright up in the '80's I think it was.... the northern Labrador from Cartwright up branched off from GRHS and developed their own board, known as Labrador Health. Because they felt that it was too big at that particular time, right?

Gertie Fowler:

Okay. Yeah.

Cornelia Linstead:

And their head offices were in Happy Valley-Goose Bay, during the later part of 2006 or early 2007, I'm not good with dates, but I think it was around that time there was another shift. So to cut cost and save money, the William's Government decided to amalgamate boards across Newfoundland again.

Therefore, Labrador Health and Grenfell Regional Health Services amalgamated again but this time the head office is in Happy Valley-Goose Bay, under the direction of Mr. Boyd Rowe. This was a major change for us in the South for sure. We're all and well all be for the better, there are pros and cons.

Gertie Fowler:

Sure. Sure.

Cornelia Linstead:

Only time will tell.

Gertie Fowler:

Sure.

Cornelia Linstead:

My personal opinion, I believe it might be a little too broad or big for it to work effectively. Communicating with the appropriate person I find is very difficult, but I am sure that a small issue such as this can and will be corrected. But it all takes time.

Gertie Fowler:

Yes.

Cornelia Linstead:

You know to see what happens.

I was first employed at Forteau Nursing Station in 1965 by Nurse Mary Taylor. My first position held was a two weeks Nursing Aid and two weeks Cook. My very first experience was completing fourteen long nights, straight. Wow! What an experience for an inexperienced girl.

Gertie Fowler:

Yeah.

Cornelia Linstead:

In '71 and '72 while working, I graduated with my Nursing Assistants License and continued to work as an LPN until September '76. One of my responsibilities, along with others, was to dispense medications to our outpatients. In '76 I decided to go into nursing and after graduating in '78, I held a position in Outpatients in St. Anthony, which I thoroughly enjoyed and loved.

This was to gain experience before returning to Forteau Nursing Station as I had promised I would do.

Gertie Fowler:

So you wanted to come back to Forteau, did ya?

Cornelia Linstead:

Well, when I left to go in, I got an Educational Leave of Absence.

Gertie Fowler:

Oh, Okay.

Cornelia Linstead:

And then, with the intentions, that I would return to Forteau if they were looking for a nurse, and at the time, there was another nurse there, her name was Aruna,

Gertie Fowler:

Yeah.

Cornelia Linstead:

Do you know...

Gertie Fowler:

Yes.

Cornelia Linstead:

You know... you know Aruna Letemplier.

Gertie Fowler:

Yes. Yeah.

Cornelia Linstead:

So, they wanted her to move further North to be a nurse in charge.

Gertie Fowler:

Yes.

Cornelia Linstead:

Yeah, she had a lot of experience. So they wanted her to go up there, and then they wanted someone to come back to Forteau.

Miss Taylor was already there, so now they wanted me to come back and join her.

Gertie Fowler:

Okay.

Cornelia Linstead:

So, in 19... so in November '79, I was transferred back to Forteau to work as an RN and with the exception of going out on educational leave and maybe relieving in other small clinics. I have remained there and have thoroughly enjoyed my nursing career.

I can honestly say that. Yeah.

It's strange though, because I can definitely remember how reluctant I was to come back to Forteau. I knew that I was returning in a complete different role, and that the expectations of me would be much greater, especially thinking that I had great shoes to fill.

Gertie Fowler:

Okay.

Cornelia Linstead:

Coming with Miss Taylor.

Gertie Fowler:

Yeah.

Cornelia Linstead:

... and wondering if I would actually be accepted in my new role. Because it was completely different right?

Gertie Fowler:

Oh. Right.

Cornelia Linstead:

... then the one I had in the beginning. A senior Physician in St. Anthony, didn't really add to a positive commitment either. His words to me were, just before I left, "Cornelia, remember a Prophet is not without honor except in his own Country".

Something to think about, hey?

Gertie Fowler:

Yes. Yes it was.

Cornelia Linstead:

However, as you can see, I did return and I'm still here today, 2009. In 1980 to '82, I completed my Outpost and Midwifery Course, gaining my Nurse Practitioner License through this program.

As said earlier, except for my Education Leave of Absence, I have practiced at Forteau Nursing Station and Labrador South Health Center, for approximately forty years. Living through, oh so many changes.

Gertie Fowler:

Yeah, I can imagine.

Cornelia Linstead:

For the last fourteen years, I have been the Site Manager, directing approximately 40 to 45 staff members, and now soon up for retirement. But I wouldn't mind doing it all over again.

Gertie Fowler:

Wouldn't change a thing would you?

Cornelia Linstead:

Wouldn't change a thing.

Gertie Fowler:

Okay.

Cornelia Linstead:

As a Nursing Aid my responsibilities included anything from domestic, cooking and

nursing duties, whatever there was to be done, we girls had to do it. And once we knew our routine, there were no questions asked, but get the work completed. As it should be.

We certainly did work long hours, 10 ½ to 11 hours a day and night. Five and six days a nights a week. More like six nights a week than five a week, and getting paid the very minimum for 7 1/2 hours. We'd be rich now, if we got all that money.

Cornelia Linstead and Gertie Fowler:

(laughs)

Cornelia Linstead:

Obviously we weren't Unionized, comparing this with today standards those long hours without appropriate pay are unheard of. Everyone except managers are unionized and both employees and employers have standards or policies to follow.

Gertie Fowler:

Yup.

Cornelia Linstead:

So we have to keep this.

Anything over and above regular working hours means getting paid overtime at the applicable overtime rate and that is at time and a half and double time. Today in 2009, they work their regular 150 hours a month only. Now why I say 150 hours a month only is they do twelve hours shifts.

Gertie Fowler:

Oh. Okay.

Cornelia Linstead:

And then you know.... sometimes... do 78.75 hours and then 73.25 or something like that hours.....

Gertie Fowler:

Okay.

Cornelia Linstead:

By-weekly.

Gertie Fowler:

Yeah.

Cornelia Linstead:

Which brings them up to a 150 hours, a week. And anything over and above that they get paid their appropriate pay in overtime.

In '65 to '82 we worked out of a small Nursing Station, yet I can honestly say that in-patient numbers were greater than, then it is now.

I believe this is because of the changing trend in the Health Care System, itself. Changing from Curative and focusing more on Preventative.

Gertie Fowler:

Hmm...hmmm.

Cornelia Linstead:

People are encouraged to and are... they actually are taking more responsibility for their own health.

I guess, having the support there for them, that they are able to continue and take more responsibility for their own health. And giving all the teaching that's there today.

Gertie Fowler:

Yes, the education and that.

Cornelia Linstead:

The Nursing Station consist of four wards; three two bed wards for adults, one ward for obstetrics, with one bed and one ward for 'peds' with four cribs. One large clinic room, also used as an emergency room, a small waiting area, laundry and furnish...furnace room combined, a living room, that was occupied by the RN's and visiting staff only, one kitchen area for the PCA's and other staff members... ah one public health room. four bedrooms, two of which was for the nurses... one for an elderly lady that lived for us and she ... she ah... helped us through many tough times, preventing us from getting into trouble, yes.

Gertie Fowler:

Did she?

Cornelia Linstead:

Yeah, great lady she was. Aunt Mary Fowler, I'll say her name..

Gertie Fowler:

Yeah...

Cornelia Linstead:

Yeah, she was a lovely lady.

Gertie Fowler:

Okay. So how come she get to live there????

Cornelia Linstead:

Because she... I think years before that, she entertained the physicians and nurses all that traveled to West St. Modeste.

Gertie Fowler:

Alright.

Cornelia Linstead:

They stayed with her and after her husband died, she went to live in with the I guess she started out helping... like cooking or something, but I'm not quite sure, I don't quite have that...

Gertie Fowler:

Oh, that was nice then.

Cornelia Linstead:

Yeah, and then they kept her right, which was really nice. Yeah. Later after she died, we were given another room, so that was.....we were glad of that..

Gertie Fowler:

Now..you had...

Cornelia Linstead:

Now we had two rooms.

Gertie Fowler:

You had an extra room.

Cornelia Linstead:

We had an extra room. Anyway, since our move to the Health Center and today there's no living in. We found that a bit difficult in the beginning as well. 'Cause we were like a little family, hey?

Gertie Fowler:

That's true.

Cornelia Linstead:

And after we moved, we were.... all had to find our own accommodations and do our own thing. So we all had to find our own accommodations, staffing at the Nursing Station consisted of ten people and in '83 with the opening of the Health Center, approximately 20 and today around 45.

I'll give you a break down later, on the comparison.

Gertie Fowler:

Alright then.

Cornelia Linstead:

After they were seen.... after the patients were seen by the RN's in OPD, that's Outpatient Department.

Diagnosed and appropriate treatment and admission suggested by them, the PCA's assumed the the ah... the admission and all the general Nursing duties responsibilities. The RN's were like Physicians are today. They would do their daily rounds, assess the patient and then give verbal orders to the PCA's. Written documentation is limited. Quite different from today, when nothing is done without documentation, I mean, that's a must.

Gertie Fowler:

Yeah.

Cornelia Linstead:

Documentation sometimes, and you think documentation would come over patient care but you know what I mean, but often documentation is the last thing you do but it's really stressed today. Documentation ... good documentation, and all your nursing hours and minutes are accounted for monthly. So whatever you do, the hours you put in is accounted for. We continuously had our beds filled, seldom was there a cot or bed free. One out and one in at all times, the RN's usually started clinic around 8:30 or 9:00 and would carry on into the late evening or night. They tried not to have regular clinics on the weekends but that didn't stop the patients from coming. The nurses had to be available 24 hours a day, seven days a week.

Now we get our time off, hey.

Breaks are time off with something for the future, not in the '60's and '70's. Although when they had the second nurse available, they try taking every second weekend off. But this didn't always work either.

Gertie Fowler:

No.

Cornelia Linstead:

Nope, 'cause if they were gone, somebody would be looking for them. Right?

Anyways, they made it through those days. Those days everyone has to have their fifteen or twenty minute break, morning and evening and half an hour lunch. If not, overtime is expected to be paid.

In the '60's and '70's or while were in the Nursing Station, there was no appointment system, they saw patients on first come, first serve basis unless there was a need otherwise.

Gertie Fowler:

Okay.

Cornelia Linstead:

If an emergency came in....

Gertie Fowler:

Yes.

Cornelia Linstead:

.... or someone in distress.

Patients came all hours and yes, they expected to be seen, there was no concept of regular clinic hours. The responsibilities that nurses accepted with the job were sometimes overwhelming, they wore many professional hats for example, nursing, medical, surgical, dental, obstetrical and pediatrics. They had to do it all.

Gertie Fowler:

Yeah.

Cornelia Linstead:

Whatever came up, they had to do.

Gertie Fowler:

It was a big responsibility, wouldn't it?

Cornelia Linstead:

It was, yeah.

I recall a few times when they looked us girls, girls please pray. They certainly felt the need to seek God's guidance and did.

Physician help was seldom available, except for advice by radio transmission, that was installed at both ends, St. Anthony and Forteau and all the Nursing Stations at the time; and later by telephone. Occasionally, just occasionally we received a visit from a physician, they tried to come every six to eight week, but because of in inclement weather conditions or other problems they encountered along the way, they seldom made it within this period of time.

Gertie Fowler:

Yeah.

Cornelia Linstead:

Home visits back in the sixties were a must. People expected you to visit your home. So I guess that was their responsibility as well to get out whenever they could, be it by sometimes dog team.

Gertie Fowler:

Yeah.

Cornelia Linstead:

Right?

I think the cars were around in the early sixties or you know, it wasn't good but they got around.

Gertie Fowler:

Yeah. Miss Taylor did.... told me that she did some house calls....

Cornelia Linstead:

By dog team.

Gertie Fowler:

Yeah. By dog team.

Cornelia Linstead:

But after... in my day I think that had... I think by my time, the car had.....

Gertie Fowler:

You could go by car.

Cornelia Linstead:

You could go by car.

Today we have Home Care Nurses, Public Health Nurse and Community Mental Health Nurse taking this responsibility. Outside clinics, that is clinics in each community was conducted but with the exception of Red Bay, they were all discontinued before I returned in '79 as well.

While speaking about Red Bay clinic, I'd like to tell you a little story.

Gertie Fowler:

Okay.

Cornelia Linstead:

Here. Something that happened to us in my PCA days, so that you know that we played as well as worked. Okay. It wasn't all work and no play.

Gertie Fowler:

Alright.

Cornelia Linstead:

It was more or less when the “cat is gone”. As the saying goes, “when the cat is gone, the mice will play”, hey?

Gertie Fowler:

Sure.

Cornelia Linstead:

As mentioned earlier, the living room was primarily for the nurses and visiting staff, I'd like to say, Grace can give you....tell you about some of this.

Gertie Fowler:

Okay. Yeah.

Cornelia Linstead:

We girls had no access to it, except for completing chores, we seldom had any contact with our visiting staff.

Well at one particular visit, from a traveling Physician and Dentist... two of them. We got stuck with entertainment responsibilities. They completed their clinic on Thursday afternoon and was due to go back to St. Anthony the next day. Our nurse went off to Red Bay as well, on Thursday afternoon, to do a clinic as she had previously planned but didn't know that the doctors were coming that week, right. So she planned... so she continued to go on Thursday.

Well the next day and the next two days, our visitors were stuck with us in Forteau. The weather came down and they were unable to return home. Neither did our nurse get back from Red Bay.

So it was just the four of us left in the building, the two visitors, my colleague and I... now just what were we to do? Up to this moment, we probably had not spoken two words to each other.

Gertie Fowler:

No.

Cornelia Linstead:

(laughs) Not two words. Well our first move was to invite them to the kitchen to have a meal with us, and they gladly accepted.

Gertie Fowler:

Sure.

Cornelia Linstead:

Yeah. We were surprised... but they gladly accepted. From there we tried hard to keep a conversation going, as you can imagine what it's like ... back then too...

Gertie Fowler:

Strangers?

Cornelia Linstead:

Strangers, hey?

Gertie Fowler:

Yeah.

Cornelia Linstead:

Until... and then... ah...Until we settled back in the living room, once they went in the living room well then we were free again, right. Before bedtime, my friend and I decided to play a trick on them. I'm not sure what it is called today, but back then it was called a "French" bed or a bed and butter... "Bread and Butter" bed.

Gertie Fowler:

Okay.

Cornelia Linstead:

"Bread and Butter" bed .. I gets ...hey?

Gertie Fowler:

So what did you do?

Cornelia Linstead:

Anyways... and this was this wasn't enough....well do you know what a French Bed or what a "Bread and Butter" bed is?

Gertie Fowler:

No, what is it?

Cornelia Linstead:

Well, what it is, is you... you put the under sheet under... the top sheet you turn it in half. So when they try to get in the bed they can only get down half ways right?

Gertie Fowler:

Okay. Yeah.

Cornelia Linstead:

So... but that wasn't good enough, we put crumbled corn flakes in their bed as well.
(laughs)

Gertie Fowler:

So when they tried to get in the bed, they couldn't get down.

Cornelia Linstead:

They couldn't get down. They got in amongst the corn flakes

Cornelia Linstead and Gertie Fowler:

(laughs)

Gertie Fowler:

Very good.

Cornelia Linstead:

What a chance we were taking too, in fear of the nurse... news getting back to our boss.

Gertie Fowler:

Yeah.

Cornelia Linstead:

A waste hey. She wouldn't allow that. Anyways, before the visitors went to bed again, my friend and I wanting to get in on the fun, hid in the adjacent room, with closed doors, to listen. What a fuss they made, and yes....yes they came out to look for us. But we were no where to be found, as you can imagine.

We waited anxiously for them to return to their room, okay. I'm not sure where we hid but I believe it was ah... one got in the closet and one got under the bed.

Gertie Fowler:

Okay.

Cornelia Linstead:

Anyways... they didn't come to the room. This particular room where we were, it was our bosses room and maybe they felt they had no limits to it. That's probably what they felt right?

Gertie Fowler:

Yeah. Wasn't allowed in there.

Cornelia Linstead:

Good move for us. Eventually the noise settled and we left the bosses room and went to our own, that was the beginning of a fantastic weekend. We realized that those guys were willing to be part of us... you know..

Gertie Fowler:

Yeah.

Cornelia Linstead:

They were friendly. And we proved to them that we were not unfriendly people, we were just keeping our places as policy set out by management. That was the style.

Gertie Fowler:

Yeah. But you had to play that joke.

Cornelia Linstead:

Yeah, well ... to break the ice we had to do something.

Gertie Fowler:

Yeah. Do something to them.

Cornelia Linstead:

We did receive feedback from those guys, as well, after they returned to St. Anthony. It was told to us that they went back to St. Anthony, elaborating on the wonderful weekend they had spent in Forteau. And quote "we didn't think those girls could laugh".

Gertie Fowler:

(laughs)

Cornelia Linstead:

(laughs) Little did they know.

Gertie Fowler:

Yeah.

Cornelia Linstead:

Why do I tell you this? Because this incident helped break the ice for us locals to be more friendly, with our visitors, which is certainly required if you are going to retain staff.

Gertie Fowler:

That's true.

Cornelia Linstead:

Today, there is no segregation professionals and non-professionals alike, we mix, we work today, we eat and play together. We are a team and try to keep the team concept alive. To get work done efficiently and effectively, we need each other. Every person has their own job to do and I wouldn't be able to do mine unless the other person... you know...

Gertie Fowler:

Okay.

Cornelia Linstead:

...did hers, you know what I mean.

Gertie Fowler:

Yeah.

Cornelia Linstead:

Yeah, that's what it means to work together. Red Bay's clinic continued until the 1990's after the completion of the paved road, too bad because I thoroughly enjoyed a day away from the clinic in Forteau and certainly, did enjoy my new meal cooked by our maintenance man and free at that.

See what I mean by working together?

Gertie Fowler:

Yeah.

Cornelia Linstead:

Okay, moving on to communication.... I'll tell you about the communication and transportation system back then.

Gertie Fowler:

Which was very poor, in the '60's and '70's .

Cornelia Linstead:

The most effective means of communications in the '60's and '70's ah... was by radio transmission, I don't know if you remember there's a radio... there was one set up in the Nursing Station, there was one in each area and if you recall, we use to hear it on the radio, over the radio like CJW33, CJW30.

Gertie Fowler:

Okay.

Cornelia Linstead:

And that's how, it was back and forth through this.

Gertie Fowler:

Everyone had their....

Cornelia Linstead:

And then if you got a report from St. Anthony, you'd have to put your own radio on at home to hear a progress reports ...

Gertie Fowler:

Oh, okay. Yeah.

Cornelia Linstead:

.... from your person that would be in St. Anthony right.

Ah... at times ah... your reception was bad. It could be bad on both ends right.

Gertie Fowler:

Hmm....hmmm.

Cornelia Linstead:

....and later in the '70's, telephones were available and helpful.

In the '60's and early 70's, transportation even the communities ... even from the communities here on the coast to Forteau wasn't great. And the only means of transportation to St. Anthony was by single engine plane, which could only fly during daylight hours. This in itself caused much stress on our nurses.

In '83 we moved into our new Health Center and ... with a lot of changes. So now, we'll get into a lot of changes that happened mostly, I've been telling you before, from the '60's and '70's, now in Up to '82.

In '83 we moved into our new Health Center, this meant a larger facility.

Gertie Fowler:

Okay.

Cornelia Linstead:

...more staff, more available professional services, newer and better equipment, better communication and transportation and the list goes on. We certainly looked forward to those changes and indeed the extra help that we were getting.

'Cause everybody more or less had their own job then, right. Back in the nursing station, you had to be a part of everything.

The facility as such, itself, was much more spacious. We now had four clinic rooms, and better equipment, we had a dental room, laboratory ... with staff, X-Ray room, three wards with five beds and one crib. It came down to one crib. So you can see that's a big change, right?

Gertie Fowler:

Yes.

Cornelia Linstead:

A large waiting area, a general office that housed medical records, and ... with plenty... which had, you know, plenty of space for charting and things like that. We had a kitchen with a staff lounge. This was a bonus. Conference ah... but there was no, again there was no...not... the kitchen and the staff lounge was for everybody...

Gertie Fowler:

Oh, Okay.

Cornelia Linstead:

...like there was no one person in one place and another person in another place, that changed completely.

Gertie Fowler:

Everyone....

Cornelia Linstead:

We all had to be together, Conference Rooms for meetings and in-services, other office space, a drug or Pharmacy Room and a large basement that had a Public Health Room, for her... seeing her moms and like prenatal classes.

Gertie Fowler:

Oh. Okay. Yeah.

Cornelia Linstead:

And thing like that, and had supplies and a furnace room. Like every place had its own...

Gertie Fowler:

...had it's own...where at the Nursing Station everything was all in together.

Cornelia Linstead:

All in together. And they didn't have no space for Public Health Teaching or Pre-natals, or Post-natals or

Gertie Fowler:

Sure.

Cornelia Linstead:

Sure, or anything like that right? They didn't have the space to do it. All medication were dispensed from our in house drug room or pharmacy. Today there's a private pharmacy in the community, so another change, which means the Health Center carries emergency drugs only.

Gertie Fowler:

Oh. Okay.

Cornelia Linstead:

In our In- Patient wards, were considered to have holding beds only. Which means a patient is placed in a bed and held until transportation out was available. The maximum hours that we were suppose to hold our clinics were twenty four. To my knowledge this

policy had never been adhered to mainly because of our geographical area, and the problems that we encounter with transportation.

Gertie Fowler:

Oh. Alright.

Cornelia Linstead:

Today transportation has improved, but it is common knowledge and we are encouraged to diagnosed, treat, and manage at the Health Center as much as possible. And I would think some of the reason is because of the specialist availability now in St. Anthony, which is not so great as it was back in

Gertie Fowler:

Oh, Okay.

Cornelia Linstead:

In actual fact, the specialist in St. Anthony now is not quite so great now as what they were back in the '80s and '90's.

Gertie Fowler:

Is that right?

Cornelia Linstead:

Yeah, with the change in the ah.... and some of the doctors, like the medical person, some of them retiring.

Gertie Fowler:

Oh, Okay.

Cornelia Linstead:

And it seems... it seems to be more difficult to recruit those specialist.

Gertie Fowler:

Specialist, yeah.

Cornelia Linstead:

But they're still trying. They are still trying to keep...

Gertie Fowler:

Yeah.

Cornelia Linstead:

...keep it open.

Ah.... this allows for our... by being able to keep them in, in Forteau, which I thoroughly, you know say "yes, this is what we should do". Ah... it allows for our

clinics to be treated at home in their own environment, family members are able to visit and decreases cost both for the clinic and the organization.

Gertie Fowler:

Sure.

Cornelia Linstead:

Which means a lot, right?

Gertie Fowler:

Yeah.

Cornelia Linstead:

You'll note here that I have changed from referring to our public as patients to clinics. The period we are living through are now encouraging all medical nursing personnel to refer to our public as clinics.

Gertie Fowler:

Oh, Okay.

Cornelia Linstead:

Another change.

Gertie Fowler:

Change, for sure.

Cornelia Linstead:

Another change.

Gertie Fowler:

You're not a patient anymore.

Cornelia Linstead:

You're not a patient anymore. Although I heard it on the TV last night, they referred to patients, again.

Gertie Fowler:

Did they?

Cornelia Linstead:

Yeah. So probably the older people are still....

Gertie Fowler:

..it's hard too...

Cornelia Linstead:

...hard to change. In the '60's and '70's Anti-natals were cared for at, all except complicated deliveries, were at the Nursing Station.

You were probably delivered at the Nursing Station were you?

Gertie Fowler:

No. Grandma Jane....

Cornelia Linstead:

Oh, is that right.

Gertie Fowler:

...borned me.

Cornelia Linstead:

Oh, okay. In your age group,

Gertie Fowler:

Yeah.

Cornelia Linstead:

.. most of them were ah... delivered at the Health Center, right?

She probably couldn't make it.

Since 1983, anti-natals are cared for through... throughout their pregnancy at the Health Center, but are sent out to a Tertiary Center for delivery, most to St. Anthony, but some wish to go otherwise...

Gertie Fowler:

Yes.

Cornelia Linstead:

...like to Corner Brook or St. John's wherever they have family members right?

Gertie Fowler:

Okay.

Cornelia Linstead:

But they are... therefore, transportation and provided accommodations of all improved therefore it was wise to utilize the system.

Gertie Fowler:

Sure.

Cornelia Linstead:

And knowing the complications that you could encounter with deliveries, it was safer for moms and babies to go out to a Tertiary Center.

Gertie Fowler:

Oh, Okay.

Cornelia Linstead:

'Cause it has the facility and then they have the Obstetrician there on hand to...

Gertie Fowler:

Sure.

Cornelia Linstead:

...And the Pediatrician if anything happened. So this is for the improvement of women's health and babies health as well.

For the safety of our clients, I do encourage this practice, seldom do we... seldom do we get a delivery now on the coast. I recall my last delivery was a twin 15 or 16 years ago.

Gertie Fowler:

Yes, maid.

Cornelia Linstead:

You know the Roberts twin.

Gertie Fowler:

Oh, that was nice.

Cornelia Linstead:

Yeah. There's been two or three deliveries since then, but by somebody else. We encourage all our clients to ensure they go out, at the appropriate time, but you'd get the odd one who lingers or you get the odd one that dates are not right on and then, you know. But we still get them out if possible, but you might be stuck with the delivery.

Gertie Fowler:

Yeah.

Cornelia Linstead:

We do have the room there and babies....

Gertie Fowler:

If you need to do it...

Cornelia Linstead:

....And all the facilities, if we need to do it.

Pediatrics. The number of children admitted to the Health Center has decreased since we moved.

Gertie Fowler:

So is that why now, back there you said you had one crib for children.

Cornelia Linstead:

Yeah. Yeah 'cause and parents were encouraged to ah ...

Gertie Fowler:

...to take care of ...

Cornelia Linstead:

Yeah. And they could because they had more access to the nursing station, right. And we do admit, but not so many. Anything that you can care for at home, is cared for.

Gertie Fowler:

Oh, that's good, then.

Cornelia Linstead:

Yeah. Parents are encouraged too and seem to be able to cope with their child's illness at home, more than they could back... mind they didn't have direct access to the Health Center either... to the Nursing Station right. 'Cause it's more difficult for them to get there and... but ... they weren't ah.... later I'll elaborate on that a little bit.

Theory is that a child improves far quicker in his own environment with their parents or guardians then with strangers in an institution.

Gertie Fowler:

That's true.

Cornelia Linstead:

You know... and that's what they...parents weren't allowed to stay with the admitted child back in the '60's or '70's either which was ah....usually bad for the child right.

Gertie Fowler:

Yeah.

Cornelia Linstead:

But in the '80's and today and per chance that we have an admission, the mom and dad is encouraged to stay with them right.

As you can see, support such as this relieves stress on women and prevents major illnesses as well.

As you see, as I go through, all the things that I'm talking about, if you're preventing stressors on women, well stressors causes illness, you know.

Gertie Fowler:

Sure.

Cornelia Linstead:

And then ah... with all the things that I have ... all the improvements that I have talked about, it ah... it's a means of improving women's health, right?

Gertie Fowler:

Yes.

Cornelia Linstead:

Yeah.

In the '80's and today, communication and transportation services has improved. I've talked about the communication and transportation back in the '60's and '70's. Today, and that improved a little after moving into the Health Center. Today I mean it is much improved. There is a direct access ... there is direct access to a local Physician both ah... but ah... both during regular and after hours.

There is direct access to other specialty services by telephone. The telephone system has changed and improved immensely, as we can witness ourselves

Gertie Fowler:

Yes.

Cornelia Linstead:

... and our homes right. We now have emails, fax machines, meda-tech is being introduced, especially for Lab and X-Ray results.

Gertie Fowler:

Okay.

Cornelia Linstead:

Otherwise, where it took weeks for it to get an X-Ray result back and even a Lab result back, now we can get it basically in 24 hours.

Gertie Fowler:

Oh. Okay.

Cornelia Linstead:

Other specialty consults and when Pax Machines, which is the ... which is the improvement in the X-Ray system, ah.... video teleconferencing, video conferencing, etc. These all gives us much easier access to specialty services that we might require.

Gertie Fowler:

Alright.

Cornelia Linstead:

There are plans to increase the Medix services availability, and if they do, this will certainly continue to improve our Health Care services. Transportation has also improved, now ... we now have regular provincial flights our own Medi-Vac plane with instrumental flying, able to fly at all times, night and day... weather, permitting.

Gertie Fowler:

Sure.

Cornelia Linstead:

We have local planes on the ground.

Gertie Fowler:

Hmmm..hmmm.

Cornelia Linstead:

... to utilize when this necessary. We also have access by road, ambulance and ferry. It seems to be that we are continuously growing. In the 1980's private ambulance services started with help and support from GRHS, it started out with one paramedic as the driver and a Nurse escort. Today they are fully staffed with paramedics and EME's seldom do a nurse have to go. Instead of a van that we use in the 1960's and a maintenance man as a driver, we now have full private ambulance services with paramedics and emergency equipment.

Gertie Fowler:

Oh, okay.

Cornelia Linstead:

So that's a great change, right?

Gertie Fowler:

Big improvement.

Cornelia Linstead:

Yeah. They are also available to transport clinics from St. Anthony or elsewhere when the weather is down.

For the Physician at the Health Center have more contact with specialist in other areas other than St. Anthony.

Gertie Fowler:

Oh, Okay.

Cornelia Linstead:

Like if they go to St. Anthony and the specialist is not within the health... in the hospital will then they will be referred to maybe St. John's or Corner Brook and got direct access there. Better communication and transportation has lead to... to improvement in our Health Care services which again leads to an improvement in Women's health, as well as others.

Gertie Fowler:

Sure.

Cornelia Linstead:

Okay. Can we take a break here... for a minute?

Gertie Fowler:

We can.

Cornelia Linstead:

We can.