

## **G. F. STRONG REHABILITATION CENTRE**

### **Contribution to the Physiotherapy History Project.**

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**Sources-**Extracts from Annual Reports of G.F Strong Rehabilitation Centre /  
B.C. Rehabilitation Society 1947-1989

**Summary-** *The only reliable source we could find were the GFS annual reports borrowed from Administration. They are only available from 1947 to 1989 and we have summarized them. There is not a lot specific to P.T in them, but they do give an impression of Rehabilitation in B.C in general through this time which had an impact on Physiotherapy.*

## **1949- Western Society for Physical Rehabilitation – 900 West 27<sup>th</sup> Avenue**

### **Ralph s. Plant was the President but deceased and Dr. GF Strong was the vice president**

- Construction started May 1948
- first unit opened in January 1949, then realized additional space was required for physiotherapy and a remedial pool. 2<sup>nd</sup> unit plans underway for more PT space 20 x 14 feet, pool and bedroom accommodation and classrooms for “spastic children”
- commencement of a program for children with CP in co-operation with the Spastic Paralysis Society of BC
- much of work focused on treatment of polio. 48 individuals in first 8 months. 26 para’s, 12 polio and 10 “others”
- Women’s Auxiliary- assisted with furnishings and draperies for the building plus providing funds for the driver and maintenance of the care which enabled home bounds individuals and hospital pts. to attend classes at the Centre. Kinsmen assisted with bedroom furnishings.
- Mr. E. J. Desjardins managed the Administration dept. The Medical director was Dr. WJ Thompson
- Both PT’s and Remedial Gymnasts on staff. Working towards hiring SW and Psychologist
- PT dept Supervisor was KM Ker and RG was JR Ford
  - **1950** – brace shop opened as needs were greater than the capacity of brace shop at Shaughnessy Hospital .
- Centre expanded (Unit 2) to include hydrotherapy and remedial exercise departments plus facilities for education of children with cerebral palsy. There was 127 admissions with 33 as residents. Clients Polio were highest admission number at 51 , paraplegia 32, CP adults 14, amputees 5, hemiplegia 5, miscellaneous 20

**1951-** monthly charge to patients for physical rehab program of \$70.00. For those attending part time there was a charge of \$1.50/half day. Charge for “living in “ accommodation plus board was \$6.50/day in addition to the \$70.00/mo. cost of wheelchairs and appliances were extra. Patients were admitted for a 3 month term and that could be renewed at the discretion of the medical director (WJ Thompson). Sam D. Brooks Memorial gym in place. Unit 2 built which included a remedial pool 20’ x 14’ and 2 Hubbard Tanks.

**The Cerebral Palsy Program** was operated by the Spastic Paralysis Society of BC .Charge for patients was \$15/mo for 5 days/week treatment . Transport for children provided by Society.

**CARS-** Arthritis program space at the Centre . Administrative space made available for MedicalDirector, Research Secretary and Head PT of CARS BC Division.

**1952-** summer and fall outbreak of polio. Cerebral Palsy Association held its first provincial conference in the spring of 1952 and the Western Society of Rehabilitation was the headquarters.

**1953-** Units 3+4 opened in March and beds increased from 35 to 53. PT moved into Unit 4. PT supervisor Mrs. KM Roberts (? Miss Ker now married) .

**1954** – operating budget now \$247,000/year and staff of over 50. When centre opened in 1949 the operating budget was \$35,000 with a staff of 8. Teaching centre established with links to UBC. Psychologist added to staff plus OT staff increased with an addition of a”model kitchen”

Dr. WJ Thompson resigned as medical director and Dr. AC Pinkerton took on the medical director role. 64% of the admissions were polio , 18% CVA , 10% SCI, 3% amputees. 27 Arthritic patients were resident in the Centre while receiving rehab Services from CARS. CARS OP program is extensive.

Educational facilities for the school age children with COP added with cooperation with the Vancouver School Board and the Cerebral Palsy Ass’n.

PT supervisor now Miss. P . McArdle. RG – Jack Ford

**1955-** Vocational counseling and nursing ( previously had to be organized privately) added to staff. Nursing services allowed earlier transfer to rehab and permitted 24 hr care. Had 231 new admissions for the year. 2 teachers in the Centre's classroom.

Royal college of Physicians and Surgeons granted post grad training in specialty of physical medicine and rehab. Dr. Dorothy Stillwell hired as Asst. Medical Director.

**1957-** Name of centre changed to GF Strong Rehabilitation Centre as Dr. Strong died suddenly in Feb. 1957. Name change in recognition of Dr. Strong's contribution as part of the West Rehab Society's board.

PT now participating in a 2 day training program for senior student nurses at VGH for better understanding of principles and techniques of rehabilitation. Dr. Symington now the assistant Medical Director

**1959** – clearer definition of IP and OP programs . A physician referral required. 356 patients admitted. The OP numbers increased significantly. Number of polio admissions increased to an outbreak in the latter part of 1959. 94% of IP's receive PT services.

Number of children with CP treated annually increased by 300% since 1949. A 3<sup>rd</sup> academic schoolroom added. 13 staff + 30 volunteers . Program is still run by the Cerebral Palsy Association.

Total number of GF Strong Rehab Staff is 92 ( 53 of these are rehab related )

Plans started for acquiring more property ( a portion of Laurel street). The plan is for a 6 storey wing. An electric hoist system for the remedial pool and Hubbard tanks is installed .

1960

- long waitlist for admission developing . 2 issues – lack of IP accommodation and lack of highly trained staff
- Dr. Hunt appointed Director of Registry and Rehab Services for Provincial Health Branch.
- Dr. Fahrni appointed as Asst. Professor of Medicine and future Director of School of Rehab Medicine at UBC. "Anticipate their strong support in establishing a training program to meet shortage of professional personnel in rehab".
- In Sept. 1960 a large part of the cost of the inpatient care at GF Strong came under the Provincial Government Rehab, Chronic Treatment and Convalescent Care Program.
- 25% of admissions are polio, 23% vascular lesions of CNS and SCI trauma 8%
- Miss McArdle PT dept Supervisor

1961

- Mrs. GF Strong, al Life Member of the Women's Auxiliary passes away
- First class of therapy students in new School of Rehab Med at UBC commenced in Sept. 1961
- Polio cases dropping to 10% of IP admissions

1962

- Accreditation standards developed by the Association of Rehab Centres of which GF Strong is a part
- Still awaiting government decision on expansion of GF Strong
- New modalities purchased for PT- SWD, Ultrasound, Ultraviolet and an ice making machine
- PT staff attended a 2 day course on PNF at VGH
- Vascular lesions of CNS still have highest percentage of IP admissions but SCI admissions increasing . More C spine injuries being admitted.
- A Children's Treatment Centre operated by the Lower Fraser Valley CP Association opens and allows some transfer of cases from the GFS Childrens' Cerebral Palsy Program

1963

- Received approval in principle from the BC Hospital Insurance Service for expansion of the Centre.
- Constant waiting list for IP's – 30 patients waiting. 3 week wait for physician to provide consultation after referral received..
- The Cerebral Palsy association is now officially called " the Cerebral Palsy association of Greater Vancouver
- Agreement of Affiliation between GF Strong Centre and UBC "brought to fruition". Student training programs for nursing and School of Rehab Medicine initiated.
- Miss McArdle, Chief PT resigns and Mrs. B. McNeil is promoted to acting head PT

- Miss Brenda Jones is President of the BC Branch of CPA and is allowed a LOA to attend the International Congress for PT in Copenhagen.

1964

- Report of the Medcial Advisory Committee on Rehabilitation, Chronic Treatment and Convalescent Care requested by the Minister of Health Services and Health Insurance recommended that the Centre be relocated and enlarged at a site closer to VGH
- GFS Board evaluated the Committee's report and approved a resolution to relocate the Centre close to VGH. However capital was not available for a relocation and it was thought to take too much time. Expansion of the current facilities reconsidered as needs were urgent. The cost differential between relocating and renovation was \$1,870,000.
- Mrs. B McNeil resigns as acting chief PT to take up a as chief PT position at Royal Columbian.
- Miss B. Jones promoted to position of chief PT
- BC Hospital Insurance Service (BCHIS) pays GFS a per diem rate to cover the cost of patients at GFS who qualify as BC residents. The per diem does not include OP services
- To obtain sponsorship of costs not covered by BCHIS, GFS makes a referral to appropriate voluntary or other government agencies. In addition to the agencies, the social service dept. of Vancouver city, other cities and municipalities sponsor, on approval, the cost of wheelchairs, braces, prostheses and other appliances for OP's on social assistance.

1965

- Approval received by the Honourable Eric Martin, Minister of Health Services & Hospital Insurance to expand the Centre in its present location
- The Shaughnessy Armory Site purchased from the federal government and approval from Vancouver city to close 27<sup>th</sup> Avenue in the 900 block . The city also approved a grant of \$700,000.
- Brenda Jones is Chairman of the PT Supervisors Committee of Vancouver
- Madelon Schouten from the Children's program is the Corresponding Secretary for the BC Branch of CPA
- Sue Fife attends a course on PNF in Saskatoon
- Mary Bingham attends a course on the Western International Conference of OT and PT

1966

- Number of the waitlist awaiting admission to GFS IP increasing – averaged 52 patients
- The Honorable Wesley Black, Minister of Health Services & Hospital Insurance, authorized to bring into service 100 finished beds and to provide space in "shell" form for future expansion
- Estimated cost of construction of the new building, renovation of existing building, furnishings and equipment \$4,960,000. Occupancy for the new building planned for summer 1969
- Noted lack of suitable housing on discharge for several quadriplegics under 40. The patients were faced with institutionalization in a geriatric setting.
- Children's Rehab and Cerebral Palsy Association continuing with its financial support to services provided to CP children. Peak of 330 children seen . A new classroom ended the need for a swing shift. The staffing for the Children's Program increased from 3 to 4 PT's and 2 to 3 aides

1967

- At the end of 1967, Children's Rehab and Cerebral Association notified GFS Directors they would not be responsible for the financing and staff of children's programs as per the present agreement but would continue to provide financial support on an annual declining basis
- GFS was prepared to continue with the Children's services and embarked on raising additional funds
- 58 full time staff and 2 part time staff engaged with treatment of patients
- Brenda Jones – supervisor of the GFS Adult PT Program
- Madeline Schouten- supervisor of the GFS Children's PT Program

1968

- GFS underwent accreditation by the Commission of Accreditation of Rehab Facilities ( head quarters in Chicago) . GFS was the first rehab facility in Canada to be surveyed by the commission.
- Diagnosis distribution- stroke 16%. SCI 16%, MS 11%, bone and joint disease 9%

1969

- Had a waitlist for OP's for the first time
- Centre was fully accredited by the Commission mentioned in 1968. Ceremony performed on July 2, 1967. In the newspaper, GF Strong rated one of the best on the Continent"
- Dr. Denys Ford became President of the Medical Staff

1970

- Construction of the new building began in April 1971
- Barbara O'Hanlon, Daughter of the late Dr. GF Strong turned the first so. Now approximately a \$6,000,000 project to be ready for occupancy in April 1973 and renovation of the old building by Sept 1973. Costs were shared 60 % by the BC Government and 40% by the Greater Vancouver Regional Hospital District
- More small group classes introduced into the PT Program – 9 group classes running
- 2 part time positions created – Recreation Director and a Coordinator of Volunteers

1971

- inclusion of a psychiatrist on the Centre's active medical staff
- accidents account for 27% of the adult admissions. Stroke is still the highest diagnostic category. 65% of these patients are under 65 years of age. 93% of patients discharged home.
- A POSSUM typewriter that can be controlled by sip and puff obtained
- Program of sex education for handicapped children initiated by Dr. G. Szaz of UBC
- New building plans:
  - Lower floor- radiology, cystoscopy, dentistry, EMG, pharmacy, Stores, CSD, prosthetics and orthotics, patient recreation and teaching
  - Ground floor- lobby, central reception, gift shop, dining room, lecture theatre, board room, PT, OT and medical clinic and administration
  - 2<sup>nd</sup> floor- 50 self care beds
  - 3<sup>rd</sup> floor- 50 rehab nursing beds
  - 4<sup>th</sup> floor- roughed in for future development
- Existing building
  - Lower floor- children's rehab and cerebral palsy unit:- 6 school rooms, OT, PT , gymnasium and 3 pre- school rooms
  - Ground floor- Social Services, SLP, hydrotherapy, gym, audiometry, psychology, voc rehab, home care, administration, teaching and Women's Auxiliary

1972

- Delays in the building due to strike and lock out in the construction industry. Now the new building occupancy expected in June 1973. However elevators not ready for occupancy due to a strike by the union of elevator installers
- In May 1972, received 2<sup>nd</sup> accreditation for a 3 year term by the Commission of Rehab Facilities
- BC Chapter of the Community association of Riding for the Disabled was established.

1973

- Mr. Gordon Southam who was the President of the GFS Board since the inception retired and was taken over by K.F. Fraser
- Inpatients moved to the new quarters on the 2<sup>nd</sup> and 3<sup>rd</sup> floors in Dec. 1973
- The "official Opening" of the new building was held on Oct. 28, 1973 and Hon. W.S. Owen Q.C. Lieutenant Governor of BC unveiled the dedication plaque.
- Renovation of the original building commenced in July 1973
- Dr. Pinkerton resigned as Medical Director and Dr. Cecil Robinson became the new Medical Director.

- The book on management of severely disabled quadriplegic patients written by Jack Ford, Chief Remedial Gymnast and Bridget Duckworth, OT, accepted for publication
- BC Medical Centre established – GF Strong is a member
- The number of spinal cord admissions increases along with traumatic amputees and head injuries.

#### 1974

- Renovation of original GFS building completed and occupied in Nov. 1974
- GFS Board requested that the BC Medical Centre approve the 4<sup>th</sup> floor be completed for occupancy for 50 more beds as IP waitlist ranges from 50-70 patients. The request was approved
- In addition, a construction of a smaller hydrotherapy pool beside the existing pool was planned
- Pharmacy and x-ray dept on site opened
- Children's gymnasium added and classroom facilities enlarged. Now have 6 classrooms for primary and 1 for high school.
- Lay chaplain and audiovisual technician added to staff

#### 1975

- Founding of the Health Labour Relations Association in BC
- BC Medical Centre dissolves
- Special recognition given to Marpole Women's Auxiliary to Pearson and GFS as they have provided great assistance since its inception in 1947
- Acute Spinal Cord Injury unit at Shaughnessy Hospital opened in May. Patients will be transferred to GFS for rehabilitation. The number of SCI from MVA's has risen sharply over past few years. GFS SCI and Arthritis admissions constitute over 50% of the IP caseload.
- Sexual counseling program made available at GFS and Acute SCI unit

#### 1976 -

- The hydrotherapy unit was renovated.
- Seat belt legislation was enacted.
- Spinal cord injury and Arthritis patients represented 50% of inpatient case load.
- There was no change in levels of care

#### 1977

- First Accreditation of Rehabilitation Facilities undertaken, highest award granted.
- Discharge and Follow up Services introduced.
- Services remained the same as previous year.
- 1512 patients received service. 94% of inpatients and 74% of outpatients received P.T services.

#### 1979

- Thirtieth Anniversary of the opening of the Centre.
- Increase in admission of high lesion SGI patient.
- Dr Tali Conine appointed Director of the School of Rehabilitation Sciences at UBC.

- Board awarded three scholarships to school of rehabilitation sciences at UBC.
- 1308 patients received services. 90% I.P's and 70% O.P's received P.T services.

#### 1980

- In patient bed were opened on the 4<sup>th</sup>, floor of the center in an attempt to reduce the wait list.
- Reduction in Rehabilitation Services at V.G.H announced. Some rehabilitation staff (including Physiotherapists) transferred from V.G.H to GFS.
- Discussion re. introduction of Seating Clinic.
- 1270 patient received services. 93% I.P's and 74% O.P's received P.T services.

#### 1981

- This was the International Year of the Disabled.
- The Centre once again received certification for 3years from the Canadian Council for Hospital Accreditation.
- The computer advisory committee was formed.
- The Department of Rehabilitation Engineering was established
- 1353 patient received services 95% of I.P's and 75% and O.P's received P.T services.

#### 1982

- Dr. C.E. Robinson retired from the position of Medical Director.
- There was an increase of admission rates for Stroke and Head Injured patients
- G.F Strong organized regional multidisciplinary workshops in Prince George and Trail.
- 1284 patients received services 95% of I.P's and 77% O.P's received P.T services.

#### 1984

- Dr. G. Hahn was appointed Medical Director.
- Due to the recession the G. F Strong Centre had to respond to a period of restraint, two FTE P.T's were laid off, also the center was partially closed for approximately 2 weeks during the summer months, and all staff were encouraged to take unpaid leave of absence.
- The Physiotherapy Department under the directorship of Brenda Tillotson were awarded 2 years accreditation by the Canadian Physiotherapy Association (the maximum at the time) This achievement was recognized in the centers Annual Report.
- The first in house computer was installed in accounting.
- A 35 hour work week was introduced by the provincial government.
- A committee of clinical department heads called 'The Patient Services Advisory Committee' was formed to act in an advisory capacity to administration.

1296 patients received services. 95% of I.P's and 75% of O.P's received P.T services.

## **1985**

- On the 1st. Of April 1984 The Western Rehabilitation Society was formed as a result of the amalgamation of the G.F. Strong Rehabilitation Center and Pearson Hospital.
- The New Dimensions Project an organizational renewal involving all staff was progressing with the development of a statement of philosophy for the center.
- Research facilities and organization were initiated and six Physiotherapists were undertaking rehabilitation related research projects.
- A Computerized Driving Assessment Module (CDAM) to evaluate driving performance in simulated setting was developed It was operated by a remedial gymnast
- Once again the center was closed for a brief period as a method of fiscal restraint.
- 1271 patients received services. I.P's and O.P's 67% received P.T services.

## **Reports for 1986 & 1987 are not available**

## **1988**

- 1987 was the 40th. Year since the establishment of the Center.
- In 1987 Rehabilitation director of the P.T department for 23 year retired. Sheila Benwell-Veuger took over a department director.
- An affiliation agreement with UBC was signed.
- A proposal to implement an organization wide computer system was presented to B.C Hospital Programs.
- .A Quality Assurance Program Plan was in progress.
- The son of the former Premier of China (a paraplegic himself) visit the center. The first stop on his tour of North American Rehabilitation Facilities.
- Staff presented papers at the Third Canadian Congress of rehabilitation in Quebec City.
- The Remedial gymnastics department was amalgamated with the P.T Department. Remedial gymnasts who held the required prerequisite courses took additional courses to allow them to be licensed with the APMP of B.C

## **1989**

- The name of the organization was changed to 'The British Columbia Rehabilitation Society'
- The twelve distinct programs offered at the G.F Strong Center were defined and described
- Two Physiotherapists undertook research projects on Gait Analysis and computer measurement of low limb edema, and presented them at the CPA congress.
- The technical Aids Lab. Expanded to assist patients in the use of computers and other technical aids
- The P.T department became part of the Professional Services Division which together with Medicine and Nursing had representation on the Centers management committee.

## **1990**

No annual reports are available after 1989. Program management was introduced throughout the societies operations in the early 1990's.

