



NEWSLETTER

PROBUS CLUB VANCOUVER

#252-2025 West 42nd Avenue, Vancouver B.C. V6M 2B5 (604) 261-6818

Clubs for retired and semi-retired professional and business persons, former executives and others

NEXT MEETING: October 17, 2000
TIME: 9:30AM
LOCATION: Stanley Park Pavilion
SPEAKER: Don Evans, VP Vancouver Rotary
TOPIC: Railroads in BC - Past, Present and Future

Minutes from September 19, 2000

Roy Williams introduced Mal Endelman, the incoming District Governor of Rotary. Mal had presented the Charter to Vancouver Probus at its inaugural meeting. He also recognized **John Hoyle** and **Fred Cotton** for their efforts in getting the Club started.

The Squamish trip has room for more. **Geoff Walsh** announced that the Chinatown tour has sold out. Both attendees and wait listed will be phoned one week before the October 12th date.

Pridge McBride announced that The Night at the Cloverdale Races on October 28, 2000 features a buffet dinner at \$28.00 per person with the dining area overlooking the track.

Report of the Treasurer: **Bill Wallace** stated that we have \$8,700.00 in our account. Expenses and revenue increased by \$1,000 last year. The extra events are breaking even. The plan is to not increase our reserves this year.

Report of the Membership Chair: We lost seven members last year. Eight individuals on the wait list will be invited to join Probus.

Report of the Greeters Chair: **Norm Weitzel** announced that the new chair will be **Leo Sauve**.

Outgoing President **Roy Williams** thanked all of his helpers during his Presidency and turned the chair over to the incoming President **John**

Hopkins. A Past President's pin was presented to Roy by the incoming President who thanked him for his year of service as President.

The annual Meeting was adjourned.

The guest speaker was Murray Martin, the CEO, Vancouver Hospital and Health Sciences Centre which includes the Vancouver General Hospital, UBC Hospital, G.F. Strong Rehabilitation Centre and George Person Centre. He was introduced by **Norm Weitzel**. The speaker, a native of Saskatchewan, arrived at the Vancouver General Hospital (VGH) in 1991. He has 29 years of experience in the field of health care

In the past the Canadian health care system was highly regarded. Now health care concerns by the Canadian public have become the number one political issue in Canada. Changes to the system and implementation of innovative ideas are often hampered because the system is full of special interest groups who push their own agenda. A further major challenge is meeting the public's high expectations with limited resources and dealing with the high cost of new technologies. His talk was devoted to three of the issues in health care today - *people, money, and structure*. He offered his recommendations for dealing with each of these issues and sought feedback regarding these issues.

The people issue is related to the current shortage (which will become critical) of health care professionals. We are not creating or keeping enough of these individuals.

Eighty percent of the last graduating class of pharmacists at the University of British Columbia (UBC) went to the USA. This aggravates an already serious shortage of pharmacists in BC. It is an example of how we are losing professionals of all stripes to the world market for these individuals because we are not competing with a global outlook. We need a 10-12 year lead time to increase physicians output from our medical schools. Ten years ago a decision was made to reduce Physician output in Canada over the objections of most medical organizations. The UBC Medical School has been held at 120 graduates per year with the Province relying on overseas recruitment for the gap between output and need. The overseas and out of Province candidates, for various reasons are no longer filling this gap. VGH has 623 specialists on staff. In 10 years 275 of these will be lost to retirement alone. This will require a large proportion of UBC grads to replace these losses, which would leave nothing for the rest of the province. There will be an increase in the number of nurses being trained over the next 2-3 years. Recruitment of nurses at present is meeting needs.

He recommends that the positions for health care professionals training be increased by 10% per year for five years to try and close the gap between output and needs.

Money Problems accompanied by increasing demands are making things worse. For instance, the increase in the aging population of baby boomers has created a need for an increase of 15,000 long term care beds in BC alone. The money problems have been created by the reduction of Federal transfer payments of \$4.3 billion in 1993. The Provinces have not been able to fill the gap. As a result there is a major catch-up required in health care infrastructure. The portion of health care budget received by hospitals has reduced from 42.5% to 31.6% - this despite major increases in new programs, technology,

and direct costs such as a rise in pharmaceutical pricing. Information technology, which is a new cost and a critical part of health care delivery, now consumes 1.5% of budget. Most hospital buildings in the system have deteriorated because of lack of funds for maintenance. New construction has not kept up to the need of the community. Basic equipment such as beds or patient lifts are not being purchased. It is estimated that the Canada wide system requires a \$6 billion catch-up. In per capita spending for health care Canada was #2 in the world, now it is #5.

Regarding private vs. public health care spending:

UK	85%
USA	46%
Canada	69%

So there is already a significant two tier system of health care in Canada with 31% being met by drug plans, extended benefits insurance etc. The difference between Canada and the USA is that acute care is managed virtually 100% by the public sector. The public sector in Canada is much more efficient than the USA. The USA spends 14% of GDP on health care. Canada spends 9%. It is his opinion that because of these efficiencies that instead of increasing health care spending to 14% of the GDP as in the USA, we could manage by spending only 12%.

Structural Issues: He feels the services that should be covered by the public system should be equal to what the needs are. He recommends there be a public process to define core services for public spending.

His Conclusions:

- ' The public expects high quality and access
- ' Medicare cannot provide all things to all
- ' Public funding should be restored to pre-1994 levels
- ' The private sector should be defined and communicated

Feedback and questions:

- The Oregon System (ranking diagnostic categories and dropping the bottom one third from benefits) founded on human rights issues among others.
- Issuers regarding two tier system (public and private):
 - private offers excess capacity therefore is more expensive
 - private picks easy predictable activities
 - private has more money to pay nurses therefore depleting the public sector
 - dollars should be put to public sector because of greater efficiencies
 - wait lists in all public sectors are the same world wide
 - private USA hospitals have 45% occupancy, low wait lists, higher costs
 - VGH (public) has 90% occupancy and longer wait lists but lower costs

The current major problem in Canada is that it is the politicians - not the health care professionals - who are making health care spending decisions.

Bill Ibbott thanked the speaker for an interesting and provocative presentation.

Don Farquhar, Secretary

PRESIDENT'S MESSAGE

As your incoming President, with your help, I look forward to an interesting and active year.



Please review the enclosed questionnaire, fill in the information as requested, and return it with your cheque for your annual membership dues, either at the meeting Tuesday, October 17 or by mail.

I wish to take this opportunity to acknowledge Brice Macdougall, Chairman of the Speakers Committee, for his devoted and tireless efforts in arranging our monthly speakers since the Club's inception. Brice has resigned from this position, effective December 31st. On behalf of the Club, I extend sincere thanks Brice, for your contributions to the Club's growth. (Brice is President elect of the Downtown Rotary Club). Fred Cotton and a committee of 2 to 3 will arrange for speakers in the future.

Special thanks are also extended to the following members:

a) John Catchpole and Bill Manson for arranging the "Interfor" tour to Squamish. All reports indicate it was a fantastic tour and perhaps should be repeated next year!

b) Geoff Walsh and his Committee for the Chinatown tour on Wednesday October 11th, which is sold out, and will be reported on next month.

The above are excellent examples of what Probus is all about - speakers, fellowship and camaraderie.

Sincerely,
John Hopkins

OCTOBER GREETERS ARE:

Chris Lee

Bob Weese



Don Evans

*President - West Coast Railway Association
Chairman - West Coast Railway Heritage Park Capital Campaign*

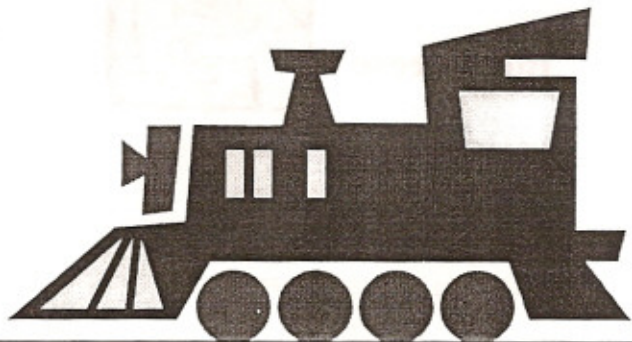
Don Evans is a native British Columbian, born and raised in Vancouver. His interest in railways goes back to his childhood, when the Evans family traveled extensively by rail for their annual summer vacations in the streamliner era. Model trains would also be found around the household since Don was age six!

Don joined the West Coast Railway Association in 1975, and enjoyed the fellowship of other hobbyists in the group. He became the newsletter editor in 1980 - a role he continues to perform to this day. He was elected to the executive in 1987 and was appointed President in 1988 - a position that he held continuously through four two year term terms until 1995 when he was named Chairman. He returned again to the Presidency in 1998 after successfully establishing *the Full Steam Ahead* capital campaign.

The preservation of British Columbia's Railway Heritage has become a passion for Don. Under his leadership the Association has grown in size and activities, and is now the owner of the second largest collection of heritage railway rolling stock and artifacts in Canada. The West Coast Railway Heritage Park became the major project of the Association, as planning began in 1987, the Squamish site was acquired in 1990, construction commenced and the new attraction opened in 1994. Having completed full operating seasons since 1995, and hosting over 100,000 guests from all over the world, the Heritage Park is now moving forward with the construction and opening of it's second phase in 2000-2002. Funded by the \$1.5 million raised to date in the capital campaign, the Heritage Park has now become a year round attraction and has formally introduced it's new educational programs and community facilities.

In his working life Don is President of DJE Holdings Ltd., a consulting and management development business established after he retired from BC Tel in 1997. He was with the telecommunications firm for over 31 years, holding several senior management positions during that time. He is a Director of the Association of Railway Museums and is also active in community affairs as Vice President of the Rotary Club of Vancouver, a member of the Vancouver Board of Trade, and as Chair of E Comm Corp which provides the Emergency Communications for Southwest British Columbia.

Don and his wife Deb live in North Vancouver.



ACTIVITIES

RE: CLOVERDALE RACES OCTOBER 28, 2000

Due to the time needed to make definite reservations for the Cloverdale Races on October 28, 2000, we have had to CANCEL this activity. They need definite numbers by October 7th which we are unable to respond to.

We will look at this same evening sometime in the new year.

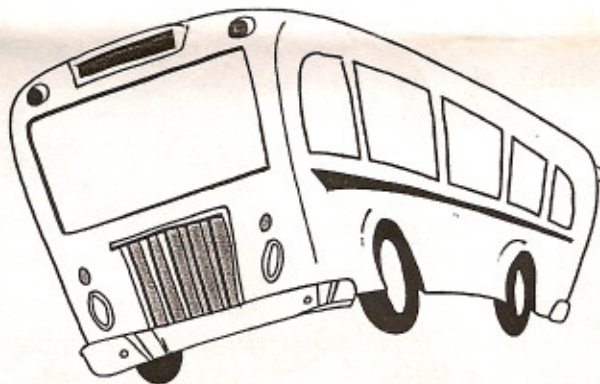
Dr. T. McCusker
Activity chair

RE: SQUAMISH TRIP

On behalf of the group who toured the Interfor operation at Squamish I would like to express our sincere thanks to John Catchpole for organizing a superb trip. Having been raised with my family in the logging industry I was amazed to see the huge changes that have taken place since those days. If any of us think that the environmentalists and Greenpeacers in their continuous verbal barrage against logging and logging practices in B.C. are not out to lunch in their views, you should take the opportunity to visit an operation like this. The organization, the lunch, the scenery and the information guides were all excellent. Unfortunately we ran a little short of time as the bus time, to get to the sites our environmental guide took us to, caused a rush at the end of the day. Their development of new fish habitat streams, selective logging techniques, preservation of some old growth areas and the reforested areas were

outstanding examples of what forestry is today. It is not what environmentalists would have you believe. Thanks again John for a great day.

Bill Manson



I'M FINE

There's nothing whatever the matter with me.
I'm just as healthy as I can be.
I have arthritis in both my knees
And when I talk, I talk with a wheeze.

My pulse is weak and my blood is thin,
But I'm awfully well for the shape I'm in.
I think my liver is out of whack
And a terrible pain is in my back.

My hearing is poor, my sight is dim,
Most everything seems to be out of trim,
But I'm awfully well for the shape I'm in.

I have arch supports for both my feet,
Or I wouldn't be able to go on the street.
Sleeplessness I have night after night,
and in the morning I'm just a sight.

My memory is failing, my head's in a spin,
I'm peacefully living on aspirin.
But I'm awfully well for the shape I'm in.

The moral is, as this tale we unfold,
That for you and me who are growing old,
It's better to say, "I'm fine" with a grin
Than to let them know the shape we're in.

Cardinal Cushing

