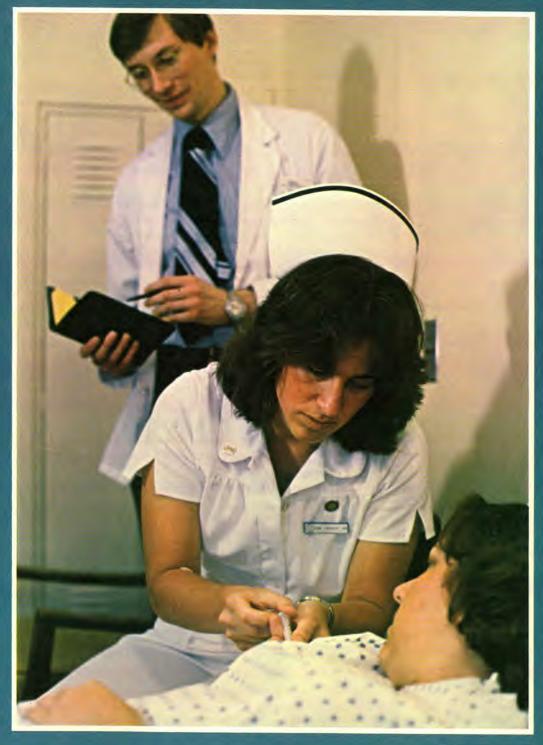
APRIL 24, 1979 VOLUME LXXI NUMBER 16







Witnesses for God

This is the third issue of the Lake Union Herald dedicated to the progress and development of the Great Lakes Adventist Health Services, Inc., (GLAHS).

Since the March 1977 vote of the Lake Union Conference Committee to establish a health-care corporation, initial goals have been achieved. We are seeing the principle goal—to support all levels of the church, ministry, education and health care—being accomplished with a vibrant, growing health-care corporation.

New programs include the management acquisition contract with Tri-County Community Hospital, Edmore, Michigan, and the continued construction and development of the Andrews University Medical Center, Berrien Springs, Michigan.

New clinics include the Athens Family Medicine Center, Athens, Michigan, a satellite clinic for Battle Creek Sanitarium Hospital, Battle Creek, Michigan, and the establishment of the Edmore Family Health Center with Tri-County Community Hospital.

A homemakers program, Health Care at Home in St. Joseph, Michigan, has begun serving the Berrien County area. This program, a unique instrument in presenting the medical ministry, has the potential to develop into a needs-assessment program and ultimately a visiting-nurse program.

As a result of the professional recruitment division, many new physicians and dentists are practicing throughout the Lake Union Conference.

Future plans call for development of additional hospitals and programs for the aged. We are continuing to develop the financial and spiritual strength of our institutions.

To meet our plans, we continue toward the goal "... that our medical institutions are to stand as witnesses for God... to relieve the sick and the afflicted, to awaken a spirit of inquiry, to disseminate light, and to advance reform."—Testimonies for the Church, vol. 7, p. 104.

Lower Bock

COVER

Nursing today focuses on the patient; it evolves out of the patient's needs, priorities and values. Pictured are Sue Lauhoff, R.N., and Steven Bascom, M.D., second-year family-practice resident at Hinsdale Sanitarium and Hospital. Photo by Donna Willard.

Because I live

by Grace Scheresky, R.N.

"And when she died, I didn't feel as bad as I might have in other circumstances." These were the words spoken by Cindy, a nurse for a patient who was spending her last days of life in the hospital.

Ordinarily you would respond to this statement with distress. Is the nurse saying that she did not care about her patient, that she was not concerned about the fact that she was dying, that she had no feeling for her?

On the contrary, this Christian nurse is grateful for the privilege of working with the patient and her family to bring meaning and fulfillment to the last days of this woman's life.

Cindy and her co-worker explained about the plan their patient had for accomplishing some things in the days that she had remaining. There were people she had to see, arrangements she wanted to make, people she wanted to talk with on the phone.

The nurses allowed the patient time to do her planning, to do her visiting without interruption if she chose. And when all of these things were accomplished, she quietly went to sleep.

This is nursing today. This is patient-directed care. This is care that evolves out of the patient's need, out of the patient's priorities and values. The nurse's role is to assist, to support—not to impose, to direct, or to command. The patient sets the pace, the nurse is the enabler.

The nurses in the above example explained that they often left the patient alone many hours while she visited with friends. In response to the question "But didn't she feel neglected?" they said that she knew they were there and would be at her side if she needed them.

It was her faith that carried her through this experience, they explained. The nurses, too, had faith.

They had faith in a God who healed the woman who touched the hem of His garment. He, too, allowed the patient to set the priorities, to take the first steps, to choose to be made whole. Then He provided the support and comfort; He provided the healing. He did not impose, He did not command.

Today's nurse reflects that same kind of dignity and respect for people that Jesus demonstrated in His relationships with people.

Today's nurse respects each person as a significant human being who

needs assistance to maintain his integrity through a difficult experience.

Today's nurse teaches with the intent of assisting people to become more like the persons their Creator intended them to be.

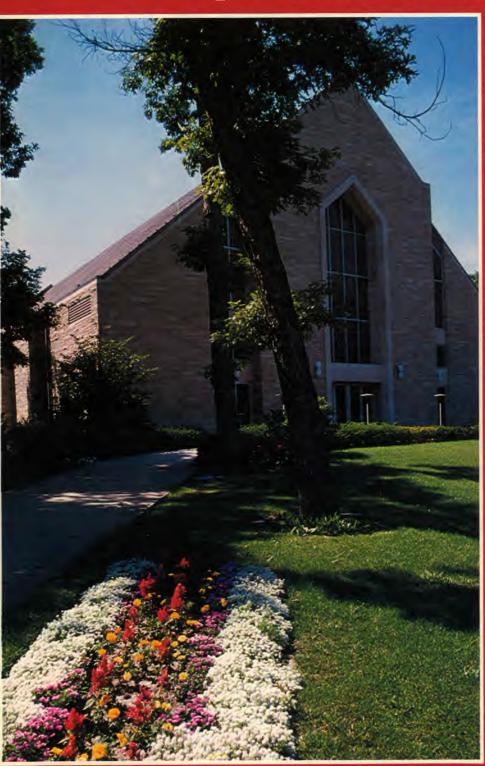
Today's nurse comforts, encourages, assists, protects, ministers to help those whose lives she touches to understand the reality of the promise, "Because I live, ye shall live also."



The Christian nurse provides support, comfort, dignity and respect while assisting each patient. Pictured is Nancy Slahetka, R.N., with a patient at Hinsdale Hospital.

Grace Scheresky is vice president for nursing at Hinsdale Hospital.

"I will instruct you and teach yo in the way which you should g I will counsel you with my eye upon you." Ps. 32:8



"I will instruct you . . . " The Lord to teach us, and by His words ar tions He would change our live short years here on earth change very course of history.

We as individuals cannot chang course of history, but we can chan lives, in some small way, of eve we meet. Through small acts of ness, personal gestures of love, ar own God given talents, we can the world a little better place to live

Your talents are important, needed. You can make the differe someone else's life. Isn't that the meaning of Christian living? The Lakes Adventist Health Services would like to help put your tale work. We would like to help you new life of caring, here in the Mic There are openings in all special medicine, dentistry, nursing, health and health education. The Lakes Adventist Health Services will assist with site location, ho legal counsel, management assis and more. Call collect today 920-1100.

IT'S YOUR CHOICE



GREAT LAKES ADVENTIST HEALTH SERVICES, INC. 15 Sail Creek Lipne • Himdale IL 00521 • (3/2) 92 Battle Creek Sanitatium Hospital Himsdele Hospital Mid American Health Services Til-County Community Hospital

A personal touch

by Sandi Balli

Most patients receive many expressions of loving concern while in the hospital, but sometimes go home to a lonely recuperation. The flowers, cards and visits often stop when the patient is wheeled through the hospital exit.

A hospital affiliated with the Great Lakes Adventist Health Services, Inc. (GLAHS) does not forget its patients. Each one is personally telephoned about one week after discharge by June Omans, administrative hostess, Battle Creek Sanitarium Hospital, Battle Creek, Michigan.

Upon completion of daily visitation rounds to patients still in the hospital, Mrs. Omans returns to her office to make an average of 10 phone calls per day to former patients. The purpose of the call is to let those at home know someone from the hospital cares about their continued well-being. Response to the calls has been enthusiastic.

Favorable comments like, "You've made my day; I never had a hospital do this before," has made this aspect of Mrs. Oman's work a pleasure.

One patient said: "I've been to

every hospital in town, but your hospital provided the best care I've ever had. I will never go to another hospital."

Many comment on the warm, pleasant Christian way they were treated by the nurses. "They seem to really care about patients."

What is the basis for these favorable impressions?

All the nurses are encouraged to spend time listening to patients talk when they are admitted. By listening, the nurses are able to define the patients' needs. To fulfill the needs, nurses use their training and the various services of the other hospital departments.

Time is spent with each patient the night before surgery to discuss any fears and to pray. Appreciation of this personal Christian care is expressed to Mrs. Omans. She reports that at least 90 percent of the calls she places to former patients bring positive feedback.

"We can carry on this program,"
Mrs. Omans says, "because we as a
GLAHS institution are dedicated to
the Christian service of mankind.
Our unique philosophy enables us to
give more personal attention to each
person."



As administrative hostess, June Omans calls former patients assuring them that the hospital cares about their continued well-being.

Sandi Balli is personnel coordinator at Battle Creek Sanitarium Hospital.

Broadening the health care horizon

ATHENS
FAMILY MEDICAL CENTER

The completion of Athens Family Medical Center, Athens, Michigan, marks the first step of many planned satellite clinics for the Battle Creek, Michigan, area.

William Van Arsdale, M.D., is coordinating preventive health programs such as the Five-Day Plan to Stop Smoking.

Future plans contributing to the total development of the Athens Family Medical Center include the placement of a dentist there.



The new medical center at Athens, Michigan, opened in early April.

HEALTH CARE AT HOME

Adding a new dimension to the growth of the health-care delivery system in the Lake Union Conference, Health Care at Home, an Adventist home health agency, became a division of the Great Lakes Adventist Health Services, Inc. (GLAHS), on March 1, 1979. Directed by Judy Storfjell, R.N., Health Care at Home began operations in St. Joseph, Michigan.

Last fall, while pursuing studies at the University of Michigan for a master's degree in community health nursing, Judy was contacted by the Area Agency on Aging (A.A.A.) about the possibility of starting a home health agency for Berrien County.

After this opportunity was presented, Irwin C. Hansen, president of GLAHS, and Grace Scheresky, vice president of nursing, Hinsdale Hospital, were contacted.

Recognizing the need in the county

and realizing the potential for Christian witnessing in long-term personal care, GLAHS enthusiastically endorsed the concept of a Seventh-day Adventist home health-care agency in Berrien County.

In February 1979 GLAHS was awarded a \$45,000 grant by A.A.A. for the purposes of establishing a homemaker program and doing nursing assessments for home-delivered meal recipients.

Recruitment is under way for dedicated individuals to fill homemaker positions. Homemakers will spend three to four hours in the homes of homebound elderly persons doing light housekeeping, meal preparation, shopping and personal care.

This is an exciting opportunity to minister and express warmth and care of Christian concern.

UNIVERSITY MEDICAL CENTER

In September 1979 the University Medical Center is scheduled to open its doors in the newly constructed building on U.S. 31, Berrien Springs, Michigan.

This medical clinic facility has the mandate of Andrews University to provide health care for all students and faculty associated with the university. The clinic is also developing a health-care program to serve Berrien Springs and the surrounding area.

A comprehensive multi-specialty group of physicians is being recruited to provide total health-care services.

This clinic will add a new dimension to Andrews University as well as being a means for meeting the health-care needs of the community.

TRI-COUNTY COMMUNITY HOSPITAL

The newest institution to join GLAHS is Tri-County Community Hospital (T.C.C.H.) in Edmore, Michigan.

The town of Edmore may be familiar to many individuals of the Lake Union area, especially graduates of Cedar Lake Academy. Edmore is located in beautiful rural central Michigan about four miles from Cedar Lake.

T.C.C.H. is a first for GLAHS in many ways. It is the first outreach project into a non-Adventist governed institution and the first experience for the development of a comprehensive rural health-care delivery system for GLAHS.

On October 23, 1978, the governing board of T.C.C.H. entered a management contract with GLAHS

which leads to eventual ownership of the institution in approximately two years.

GLAHS has been managing T.C.C.H. since November 1, 1978, with the administrative direction of Michael Bildner, formerly of Battle Creek Sanitarium Hospital where he served as vice president for three years.

The administrative team claims the promise of Philippians 4:13, "I can do all things through Christ which strengtheneth me." With the help and cooperation of area board members, medical staff, employees, area residents and various church

congregations, T.C.C.H. is moving forward.

Within the next three months a unique obstetrics program will be implemented at the hospital. And three months later, a 10-bed alcoholism rehabilitation unit will be a reality. Neither service is provided within a 50-mile radius of T.C.C.H.

Health educational programs such as the Five-Day Plan to Stop Smoking and coronary risk evaluations have already been presented and enthusiastically received by area residents.

With God's help, the mission of providing a health ministry to central Michigan is well underway at Edmore. The witness demonstrated by the working of the Holy Spirit in this new ministry has begun and will continue.



The health care needs of a rural community are being met by the 40-bed Tri-County Community Hospital.

An extension of

by Irwin C. Hansen

Alvin Tofler in his book, Future Shock, reported on a study involving life change as it relates to illness. Drs. Harold Wolf and Thomas Holmes hypothesized that the rate of change in a person's life could be one of the most important environmental factors influencing emotional and physical well-being.

A research tool was developed named the "life-change-unit-scale." This device measures how much change an individual has experienced recently.

The researchers then took this list of life changes to thousands of men and women in the United States and Japan and asked them to rank in order the specific items on the list according to their relative importance.

Based on the responses, the researchers assigned a numerical weight to each type of life change. For example, the death of a spouse was given a ranking of 100, moving to a new home ranked only 20, while a vacation was given 13 points.

For the first time it was believed that it would be possible to show in a dramatic way that the rate of change in a person's life, or his pace of life, is closely tied to his state of health.

Thus in August of 1967, 3,000 Navy men were given the questionnaire prior to departing on a six-month voyage. During this time exact medical records of each man were maintained.

After the voyage the men's medical records were reviewed to discover which men had been ill, what diseases they had reported and how many days they had been confined to sick bays.

The results showed that the men in the upper 10 percent of the change units—those who had to adapt to the greatest amount of change in the preceeding year—suffered from 1½ to 2 times as much illness as those in the bottom 10 percent. Moreover, the higher the life change scores, the more severe the illness was likely to be. This study points out that there is a definite physical limitation to adaptability.

Living in an accelerated society, nearly all patients who come to a health-care facility suffer from some kind of stress. Perhaps their particular stress brought them to a hospital or extended-care facility; often merely being



Irwin C. Hansen

Irwin C. Hansen is president of Great Lakes Adventist Health Services, Inc.

Christ's life and mission

placed in an environment out of their control, out of contact, is stressful.

So faced with the problem of patients with these stresses, why do churches sponsor health-care facilities? And what specific solutions do church-sponsored institutions have to offer patients?

The underlying principle, I believe, for the church-sponsored medical facility, is the universally accepted message of Jesus Christ, that of love and charity. That message must be central to every act carried on by the facility.

The services are an outgrowth of the concepts and beliefs of trustees, administration, medical staff and employees concerning the deity, the nature of man and his worth, his present condition and his ultimate destiny. These concepts permeate the institution and influence every employee, patient and visitor.

Christ's followers realize that they cannot fully understand God or His universe, yet they see in the universe evidence of a Creator demonstrating love and care for His children.

They attempt to emulate this love and care in their relationships with others. They see God's natural and spiritual laws as a revelation of a perfect Heavenly Father who loves every human being.

That view gives a deeper understanding to the text found in Hebrews 13:8 which says, "Jesus Christ the same yesterday, and today, and for ever."

I believe that the Christian medical institution must recognize the stress which patients are under and create an atmosphere in which the patient can gain a spiritual understanding of the everlasting nature of God.

A Seventh-day Adventist health-care facility should be an extension of Christ's life and mission. However, this extension will be no more than the sum of the individual attitudes and actions.

God's goodness and kindness should consistently be demonstrated in the lives of all who serve in the facility. And since man possesses emotional, spiritual and physical capabilities, disease or disability of any kind is most effectively cared for when these various aspects of his person are considered.

Thus, in our health-care institutions we try to marshall our personnel to work together so that their concern and

their specialized skills are used to treat the patient as a whole person.

This goal can only be accomplished when all personnel are motivated by love and by knowing that in caring for the sick they are doing Christ's work. The quality of love will ensure a Christian regard for the individual as a child of God.

The Christian institution must show by its actions, and this includes its business practices and the way it treats its employees, that there is a concern for pain and fear and lack of understanding, and even despair, all of which are often a real part of the life of the patient.

In the book of James, chapter five, it says, "Is any among you afflicted? let him pray. . . . Is any sick among you? let him call for the elders of the church; and let them pray over him, . . . And the prayer of faith shall save the sick, and the Lord shall raise him up; . . ."

While the Christian health-care facility must continually strive to improve the quality of its services, it must also understand that the emotional and spiritual needs of the patients predominate. Thus, employees and physicians of all faiths are welcomed, and as they understand and accept the philosophy of the institution, they become more able to join in a team approach to complete physical, mental and spiritual caring.

By the same token the institution of healing should not become an arena for religious argument or doctrinal disputes. Christ served humanity as a whole. His concern and care was extended without discrimination to race, occupation, political or religious persuasion, or for that matter, its absence.

Our Lord served Judas first at the Last Supper and healed the 10 lepers, even though only one expressed thankfulness. He fed the 5,000, many of whom a few days later clamored for his death. Jesus never employed coercion to force or advance His ideals.

A Christian health-care facility is ideally a place where the nature of real Christianity is seen and sensed by all who enter its doors. Within its walls the broad spectrum of human needs must be understood and treated with Christ-like patience. In the truest sense it is a place of redemption, as well as physical healing. This is the goal toward which all institutions of Great Lakes Adventist Health Services strive.



Joe and Maureen Bardusk, left, are continuing to study with the Bible study group at Hinsdale Hospital following their recent baptism. Pictured with the Bardusks are Drs, Lee, Butcher and Harvey.

The Christian Gospel-An aid to healing

by Donna Willard

"Medicine is a means of showing the Gospel in a practical way," says DeWayne Butcher, M.D., Hinsdale Hospital staff physician.

Emotional needs at times accompany or trigger physical illness. By responding to these needs the Christian physician often has the opportunity to bring to his patients the spiritual aspect of health care.

Believing that the Christian principles taught in the Bible are important aids to total health care, Dr. Butcher; Gene Harvey, M.D.; Willis Graves, hospital chaplain, and Bruce Lee, M.D., family practice resident, conduct a weekly Bible study class for their patients and hospital contacts who express an interest in spiritual concerns.

"The group approach poses less threat to someone who has the desire to study," says Dr. Butcher. "At the same time it is easy enough so that anyone can lead out."

Interest is sometimes aroused through discussion in the doctor's office, or may be encouraged by literature placed in the waiting room.

"Patients have to see something different in you that they like," says Dr. Lee, "before they will be interested in your approach to Christianity. The combination of medicine and a Christian outlook is a unique one which often speaks for itself."

Joe and Maureen Bardusk, two patients who appreciated the Christian atmosphere at the Hinsdale Family Medicine Center (H.F.M.C.), saw a difference in the scope of care offered, and consequently expressed an interest in Bible studies. "It has been a tremendous amount of fun," says Dr. Lee as he refers to his many contacts with the Bardusks at home and at the Bible class directed by Dr. Butcher.

The first group study that the Bardusks attended dealt with hell and a loving God. Having a different type of religious background, they were immediately impressed with the concept of a God who is loving and concerned.

This acceptance carried through to the Sabbath. "Within four weeks after studying the Bible and realizing the significance of the seventh day, they began attending church," says Dr. Butcher.

On Sabbath, April 7, Joe and Maureen were baptized and joined the Hinsdale Seventh-day Adventist Church.

Opportunities for witnessing vary from patient to patient and not all results are as tangible as the baptism of the Bardusks.

"Our purpose is to encourage a genuine relationship between the individual and God," says Dr. Butcher, "This may be evident in a more positive outlook on life, a decrease in physical problems, or a more vital involvement in that person's own church." A solid relationship with God inevitably results in better functioning in all aspects of life.

Contact with people who have moved from the area emphasizes the extent of influence that these studies have. One family in Michigan and another in southern Illinois are continuing their interest and are involved with Adventist churches in their areas.

Dr. Butcher has found that it is easy for patients who have a more substantial Bible knowledge to relate with those who are studying for the first time. They often take the "big brother" approach in helping to facilitate learning among the newcomers.

The weekly study classes at the hospital consist of one hour of introductory lessons followed by another hour of more in-depth study.

Resulting from this present study is the idea of developing a regular study group on the family practice resident's ward at the hospital.

This would be an open group for patients who have a desire to learn more about the Bible. Dr. Lee hopes to start a similar Bible study group in Ithaca, Michigan, where he will soon establish a practice after completion of the residency program at Hinsdale.

Donna Willard is a public relations assistant at Hinsdale Hospital.

GLAHS provides alcoholism rehabilitation

by Rita Waterman

"The man who has formed the habit of using intoxicants is in a desperate situation. His brain is diseased, his will power is weakened. So far as any power in himself is concerned, his appetite is uncontrollable. He cannot be reasoned with or persuaded to deny himself."

Ellen G. White penned these lines in the book *Ministry of Healing*, page 344. She recognized the devastating effects of alcohol on countless persons whose children are rapidly becoming today's statistics. The National Institute of Alcoholism and Alcohol Abuse estimates that approximately 10 percent of the adult American population is alcoholic or suffers from alcohol-related problems.

The same author states in *Ministry* of *Healing*, page 172, "With these [people who "have yielded to the indulgence of appetite until they are helpless to resist temptation"] self-indulgence is not only a moral sin, but a physical disease."

She continues: "They need to be surrounded with an atmosphere of helpful, uplifting Christian influence. In every city a place should be provided where the slaves of evil habit may receive help to break the chains that bind them."

As Adventists we have a Christian obligation to the alcoholic. Great Lakes Adventist Health Services, Inc. (GLAHS) is striving to fulfill that obligation through alcoholism rehabilitation programs.

A 10-bed unit is celebrating its first anniversary at Hinsdale (Illinois) Sanitarium and Hospital and a "certificate of need" has been submitted to authorize the opening of a similar unit at Tri-County Community Hospital, Edmore, Michigan.

Alcoholism Rehabilitation Services

(A.R.S.) at Hinsdale Hospital is a comprehensive three-phased treatment program for the alcoholic.

Since alcoholism is a family disease, families are urged to become involved in the entire rehabilitation process aimed at treating the mental, physical and spiritual aspects of the individual.

The purpose of the program is to provide a nonjudgmental, supportive and educational environment for medical evaluation, diagnosis and treatment of patients.

Because alcoholism is a disease, the treatment is based on a medical model. The admitting physician is an integral part of the treatment team which includes nursing personnel, inpatient and family counselors, a community services representative and a full-time chaplain. This professional staff prepares an individualized treatment plan for each patient.

After detoxification, which ensures the patient a safe withdrawal from alcohol, a two- to three-week inpatient rehabilitation phase begins.

The program consists of a series of counseling sessions, group meetings and therapy, lectures, films, readings, exercise, diet therapy and social encounters.

The treatment plan seeks to identify the central problems, outline specific treatment goals and objectives and implement the methods to attain them.

The final phase is a two-year aftercare program to minimize the danger of relapse. The patient and family meet weekly with Alcoholics Anonymous, Alanon or Alateen and a hospital-based support group.

A hospital setting is advantageous to this 24-hour care plan because of the proximity to ancilliary facilities, emergency services and staff physicians.

Consideration is being given to expanding Hinsdale Hospital's inpatient unit to 16 beds while GLAHS's goal is to put the Tri-County Community Hospital proposed 10-bed unit in operation by July 1979.

The GLAHS commitment to this comprehensive alcoholism rehabilitation program stems from its philosophy of providing, in a Christian manner, for the needs of the people its institutions serve.

"Every true reform has its place in the work of the third angel's message. Especially does the temperance reform demand our attention and support.... Shall there not be among us as a people a revival of the temperance work?.... With the great light that God has entrusted to us, we should be in the forefront of every reform."—Temperance, p. 234.



Joyce Henderson, R.N., director of A.R.S., discusses the program at Hinsdale Hospital with long-time family physician and program medical director, Richard Matthies, M.D.

Rita Waterman is a public relations assistant at Hinsdale Hospital.

Today's nurse meets professional challenges

by Sharon Mikula, R.N.

Until a few years ago, the nursing profession consisted of following physicians' orders and providing for the physical needs of the patient. The nurse's role was essentially that of a task-oriented caretaker. However, that role has changed significantly in recent years.

Nursing today includes observation, assessment and direction of patient care, counseling, teaching, supervision and management, coordination of services, and conducting and participating in research.

The nurse and the physician are recognized as a team, with the nurse having input regarding the direction of a patient's care.

The nurse functions as a patient advocate and is more frequently recognized as a resource person in designing programs and policies regarding patient care.

Nurses are recognized as highly skilled professionals, and are evolving as practitioners in their own right. In this role the nurse works with a physician, but provides services and is responsible for making decisions regarding the care and treatment of the patient.

THE NURSE AND THE PATIENT

In providing care, the most important aspect is acknowledging that the patient is a person with individual needs, problems and concerns. A patient is not to be regarded as a number or a disease.

Sharon Mikula is director of nursing for Mid American Health Services.

Frequently, patients are overwhelmed with guilt and fear during an illness because of the burden they place on family and friends, both emotionally and financially.

Patients are also afraid of possible disablement or death. The nurse should recognize the feelings of the patient and provide support to the patient and family.

Often the dignity or self-image of the patient is forgotten when he enters a health-care setting. He may be totally dependent upon the facility's staff for all of his personal needs, and his privacy is at stake when asked to make decisions regarding his treatment. The patient confronted with unfamiliar terms may refrain from asking questions.

The nurse can help preserve the patient's dignity by encouraging him to participate in the planning of his care. Care should be provided in a dignified manner, allowing the patient private time with his family.

Total patient care should provide for the physical, social and emotional needs of the patient. Total care can be given in something as simple as a bed bath by explaining what will be done and why, allowing the patient to do what he can for himself during the procedure, and communicating with him.

Comprehensive patient care is important. Nursing responsibility does not end when a patient transfers to another department or is discharged.

When a patient leaves a nursing service, temporarily or permanently, it is the nurse's responsibility to see that the patient will continue to receive the care needed.

This may require patient education so that he is aware of how he can best attend to his personal needs and what resources are available to him, should he need direction or information.

THE NURSE AND THE CHANGING HEALTH FIELD

Because pressures within the nursing profession are demanding change and the entire scope of medical care is changing, today's nurse must be flexible and adaptable.

Attitudes concerning health practices have markedly changed; new medications are flowing into the market, technology and methods of treatment are being modified, and diagnoses are constantly being revised.

Health care today not only focuses on treating the sick, but maintaining well-being and using preventive medicine.

When taking into account the changes in health care and the demands of society, it is easy to recognize the responsibility placed on the nurse of today. It is this highly skilled professional who provides "humanistic care."



Worthington Foods-Worthington, Ohio 43085

GLAHS reports from:





Lawrence E. Schalk

Joel W. Hass

Vice President and Treasurer

The Great Lakes Adventist Health Services, Inc. (GLAHS) in its initial financial objectives provided assistance in the structure, financing and refinancing of debt for each of its subsidiary institutions.

With the management acquisition of Tri-County Community Hospital and the development of Health Care at Home, the corporation has furnished consulting work in providing feasibility studies on the acquisition and establishment of these organizations.

In addition, with the establishment of the management of the University Medical Center, the corporation has provided financial and management consulting in the construction of a new professional office building, management practice and financial planning.

The financial objectives of GLAHS for the coming year include the coordination of a data-processing system for the subsidiary institutions in the Lake Union, preparing consolidated financial statements for the organizations selecting a corporate auditing firm, and coordinating the financial activities of GLAHS and the other North American health-care corporations.

Lawrence E. Schalk



Roy R. Wightman

Vice President and Secretary

During the past two years more than 70 physicians and dentists have made commitments to relocate in the Lake Union Conference. These commitments fill one of the goals established by Great Lakes Adventist Health Services, Inc. (GLAHS) to attract, through its professional relations division, physicians and dentists to meet existing health-care professional needs in the institutions and communities served by GLAHS.

With the continued development of the GLAHS corporate staff in the coming year, marketing strategies will be initiated to place GLAHS services and resources in a position of strength and accessibility. Updated public relations efforts and medical staff development will fill an important role in all of the institutions.

GLAHS will be growing with the acquisition of additional facilities within the next two years. Our objective for growth is to complement other North American health-care corporations responsible to the Health Services Board of the General Conference of Seventh-day Adventists, while meeting the health-care needs of the Lake Union Conference.

Joel W. Hass

Vice President for Health Ministries

Recent research regarding the effect of lifestyle on health has precipitated such statements as this one, made by Dr. Lester Breslow, Dean of the School of Public Health, U.C.L.A.: "It is what you do hour by hour, day by day, that largely determines the state of your health, whether you get sick, what you get sick with and perhaps when you will die."

Dr. George W. Comstock, Johns Hopkins University, reports, "The risk of fatal heart disease is almost twice as high for men who attend church infrequently as for those who attend once a week or more."

Life style is important in this life in preparation for the life to come. "Pure air, sunlight, abstemiousness, rest, exercise, proper diet, the use of water, trust in divine power—these are the true remedies."—Ministry of Healing, p. 127.

"The health should be as sacredly guarded as the character."—Child Guidance, p. 343. "That thy way may be known upon earth, thy saving health among all nations." Psalm 67:2.

Great Lakes Adventist Health Services, Inc. continues to adopt the philosophy of providing total health care to the Lake Union Conference. The various health education programs provide a necessary component in meeting these health-care needs throughout the four-state area.

Roy R. Wightman

GLAHS offers balanced management

Mid American Health Services for the elderly, the acute care referral services available at Hinsdale Hospital, the community-based medical services at Battle Creek Sanitarium Hospital, and the rural health-care system of Tri-County Community Hospital contribute toward meeting the total health-care needs in the Lake Union Conference.

The administrative teams of each institution provide a unique and balanced management. Combining the Christian philosophy of making the total man whole-spiritually, physically and mentally-with quality health-care management skills and technical knowledge, each team member is responsive to the needs of the patient, professional staff, employees and the general public.

Each institution is benefiting from the shared preventive health education programs, combined purchasing system, effective coordination of financial resources and recruitment of health-care professionals coordinated by

With continued dedication the administrative teams continue to acknowledge the special characteristics and responsibilities of their institution and of the health-care field in general to ensure that the highest level of Christian environment exists.



Vernon L. Small President, Battle Creek



Gary C. Whitworth President, Mid American



Michael P. Bildner Administrator, Tri-County

GLAHS staff additions

With the continued growth of the Great Lakes Adventist Health Services, Inc. (GLAHS) since March 1977, new members have been added. Lynn I. Ahrens joined the staff as administrative assistant in June 1978. Lynn's primary responsibilities center around the health-care professional recruitment division. Her duties include working with the officers and institutions of GLAHS to define health-care professional needs for communities in the Lake Union. Lynn's husband, David, a physician, is presently a resident with the Hinsdale Family Practice Residency Program.



Lynn I. Ahrens



Connie Schneider

Connie Schneider has assumed the position of office manager responsible for coordinating the daily work flow. Connie performs administrative duties in the area of new hospital acquisitions and serves as recording secretary for the GLAHS Board of Trustees and the members meetings of the various subsidiary institutions. Her husband, Alan, is the clinical instructor for the School of Radiography at Hinsdale Hospital.

LAKE UNION

OFFICIAL PUBLICATION OF THE LAKE UNION CONFERENCE OF SEVENTH-DAY ADVENTISTS

April 24, 1979 Vol. LXXI, No. 16

JERE WALLACK, Editor RICHARD DOWFR, Managing Editor ANDREA STEELE, Copy Editor PAT JONES, Circulation Services

Indexed in the Seventh-day Adventist Periodical Index.

LAKE UNION CONFERENCE Box C, Berrien Springs, Michigan 49103 (616) 473-4541

Lowell I Rock

rresident	LOWER L. DOCK
Secretary	Robert Carter
Treasurer	George Crumley
Assistant Treasurer	Charles Woods
Association of Privately Owned S.D.A. S	ervices
and Industries	D. A. Copsey
Communication	Jere Wallack
Data Processing	
Education	F. R. Stephan
Education Associate	Warren E. Minder
Health	Roy R. Wightman
Lay Activities	A. W. Bauer
Loss Control Director	William E. Jones
Ministerial	
Publishing/HHES/ABC	J. S. Bernet
Publishing/HHES Associate	Reginald Frood
Publishing Associate	
Religious Liberty	
Religious Liberty Associate	
Sabbath School	
Stewardship	
Temperance	F Wayne Channerd
Trust Services	
Youth	E. wayne Snepperd

GREAT LAKES ADVENTIST HEALTH SERVICES, INC.: Irwin Hansen, President; Joel Hass, Secretary; Lawrence Schalk, Treasurer. Office and mail address: 34 S. Vine St., Hinsdale, IL 60521. Phone: (312) 920-1100.

ILLINOIS: J. L. Hayward, president; R. R. Rouse, secretary-treasurer. Office address: 3721 Prairie Ave. Mail address: Box 89, Brookfield, IL 60513, Phone: (312) 485-1200.

INDIANA: G. W. Morgan, president; A. E. Hackett, secretary-treasurer. Office address: 15250 N. Meridian St. Mail address: P.O. Box 1950, Carmel, IN 46032. Phone: (317) 844-6201.

LAKE REGION: Charles Joseph, president; R. C. Brown, secretary; Isaac Palmer, treasurer. Office and Mail address: 8517 S. State St., Chicago, IL 60619. Phone: (312) 846-2661.

MICHIGAN: Charles Keymer, president; James L. Hayward, secretary; Herbert W. Pritchard, treasurer. Office address: 320 W. St. Joseph St. Mail address: Box 19009, Lansing, MI 48901. Phone: (517) 485-2226.

WISCONSIN: R. L. Dale, president; W. J. Jaster, secretary; W. H. Dick, treasurer. Office address: 2 miles north of 1-90 on Wisconsin 151. Mail address: P.O. Box 7310, Madison, WI 53707. Phone: (608) 241-5235.

COPY DEADLINES: Announcements should be received by the local conference office one month in advance of the publication date

NOTICE TO CONTRIBUTORS: All articles, pictures, mileposts, classified ads and announcements must be channeled through your local conference correspondent. Copy mailed directly to the Herald will be returned to the conference involved.

NEW SUBSCRIPTION requests should be addressed to the treasurer of the local conference where membership is held.

Entered as second-class matter in the Post Office, Berrien Springs, Michigan. Printed weekly, 48 times a year (omitting one issue each quarter as follows: the last week of March, the week of 4, the week of Labor Day, and the week of December by the University Printers, Berrien Springs, Michigan. Yearly scription price, \$4.50. Single copies, 15 cents

aster: Send all notices to Lake Union Herald, Box C, Berrien Springs, MI 49103.

Sunset Tables

April 27 May 4

Berrien Springs, Mich. E.S. 7:40 E.D. 8:48 Chicago, III. C.S. 6:44 C.D. 7:52 Detroit, Mich. E.S. 7:28 E.D. 8:36 Indianapolis, Ind. E.S. 7:35 E.S. 7:42 C.S. 7:03 C.D. 8:11 La Crosse, Wis. E.S. 7:33 E.D. 8:41 Lansing, Mich. Madison, Wis. C.S. 6:54 C.D. 8:02 Springfield, III. C.S. 6:49 C.D. 7:56

SIZZLE FRANKS. LOMA LINDA DISCOVERS THE MISSING LINK.



Other people have made meatless franks before, but they always left a lot to be desired. Namely, the real taste and texture that make franks such a favorite among both adults and kids.

Now Loma Linda has discovered the missing link.

We call them Sizzle Franks, and we think you'll call them delicious. Because Loma Linda uses a special ingredient that combines two different vegetable proteins for better flavor and texture, and a more favorable nutritional balance.

Of course Sizzle Franks have something missing, too. Things like animal fat, preservatives and cholesterol. And chemicals like sodium nitrate and nitrite. So with Sizzle Franks you get all the flavor and fun that make franks so

popular, together with the pure, wholesome nutrition ovegetable protein.

Sizzle Franks come packed in handy cans, ready to hea

and put between a bun. They also make a hearty main dish served with beans and hot bread. Or you may cut them into scrumptious bite-sized hors d'oeuvres.

Try some Loma Linda Sizzle Franks soon. And see what you've been missing.

