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It’s a team effort
More than 40 nursing and paramedic students from Medicine Hat College experienced the demands of working in a rural hospital on September 25, 2018. The event was a unique skills day collaboration between the College, Alberta Health Services, and RhPAP at Bow Island Health Centre, modelled after RhPAP medical skills events for rural Alberta high school and post-secondary students.

See photos from more events from around the province on pages 8 and 9
Thank you to the Honourable Sarah Hoffman for meeting with members of the Rural Health Professions Action Plan Board of Directors and our Executive Director on May 16, 2018 at the Alberta Legislature in Edmonton.

L-R: Dr. Rob Warren, Sherri di Lallo, Dr. Bert Reitsma, Honourable Sarah Hoffman, Bernard C. Anderson, Linda Humphreys

Thank you to the Honourable Sarah Hoffman for taking the time to meet with members of the RhPAP Board of Directors on May 16, 2018 at the Alberta Legislature in Edmonton. We were all super pleased with the meeting, which included some great conversation with the Minister of Health, and many laughs as well!

The Board was so impressed with Minister Hoffman’s understanding of rural health care. The Minister was raised in rural Alberta and conveyed a genuine and heartfelt concern for health issues affecting our rural communities. RhPAP looks forward to our continued work with Minister Hoffman in helping rural Albertans achieve even greater access to health care.

RhPAP Board Members Dr. Rob Warren (AMA), Ms. Sherri di Lallo (CARNA), Dr. Bert Reitsma (AMA Rural Medicine), Ms. Linda Humphreys (Member-at-large), traveled from across Alberta to join Executive Director, Bernard Anderson, at this important and exciting meeting.

RhPAP Meets Minister Hoffman

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Travelling in similar circles

Our team was also happy to run into Minister Hoffman at many of health-care related conferences and trade shows over the summer.

(Left) Collette Featherstone and the Minister at the Alberta Association of Midwives Midwifery Matters Conference in September. (Right) Dean Lack and Minister Hoffman at the Canadian Mental Health Association Alberta’s Now We Are Stronger Conference in June.
Building on a legacy of rural health advocacy

Update from the Board Chair

When Dr. Bert Reitsma retired from the RhPAP Board in June, he left us a legacy of passion and advocacy for rural health care and its professionals in Alberta. It is a testament to his strong leadership that, since his departure, this enthusiasm has continued unabated.

We advise and help to form more and more Attraction and Retention Committees in communities throughout the province, we coordinate skills events for hundreds of post-secondary and high school students (page 8), and we continue to meet with important stakeholders on behalf of rural Alberta (page 2).

With our expanded mandate, we continue to look at ways to support and promote a team-based approach to rural health care. The examples of Colleen Cartier in Thorhild (page 4) and Brooke Elworthy in Bashaw (page 6) show the benefits of thinking outside the traditional health-care box.

Not that we have forgotten about physicians.

Courses like the EDE Ultrasound Course (page 12) and the CARE Course (page 14) help make us both better physicians and more valuable to our community. If you are a physician practicing in rural Alberta, I encourage you to get in touch with RhPAP about these and other opportunities. There is funding available for a variety of courses and their related expenses.

Finally, I would like to congratulate this year’s Rhapsody Award recipients (page 10). These new awards are a recognition of RhPAP’s renewed and expanded mandate to assist all rural health professions, and a celebration of those individuals, teams, and communities that have made significant civic and health-care contributions in rural and remote Alberta communities.

As always, thank you for your continued support of RhPAP and the important work we do to back the efforts of rural Albertans to maintain an accessible health workforce close to home.

Dr. Rob Warren

New spaces; better opportunities

Update from the Executive Director

The arrival of fall and the shedding of summer’s foliage across the province signals some big changes to come at RhPAP.

After a quarter century on Jasper Avenue, we are moving to a new office in Edmonton, overlooking the majestic North Saskatchewan River Valley. Our new location, on 110 Street, across from the Alberta Legislature, will be the foothold we need to ensure our rural voice is heard loud and clear.

The new space offers us greater access and flexibility, and we look forward to shouting our support for rural Alberta from the rooftop, while being easily within earshot of our partners in government and health.

It’s important to note that over half of RhPAP’s Board of Directors and staff members live in rural Alberta communities, and together we will continue to be a sympathetic ear, and a helpful resource, for all rural communities seeking access to health care close to home.

New office renovations will be complete in the coming weeks, and we expect to be relocated by the end of November.

Speaking of renovations, we are also launching a revamped corporate website in November, this time at the same old address: www.rhpap.ca.

The new website will offer a more user-friendly experience and will be our showcase for the great work rural Alberta communities are doing to attract and retain health professionals.

As always, our first priority is rural. Drop me a line anytime at YourOpinionMatters@rhpap.ca, and let me know your thoughts on how we can serve you better.

Bernard C. Anderson
Thorhild County’s Nurse Practitioner keeps health care close to home

A rural Alberta county adopts innovative measures to maintain local health-care services

Thorhild County, located about 80 km north of Edmonton, has stepped up to open the doors of a local clinic and has hired a nurse practitioner (NP) to ensure medical services are available to local residents.

In December, County Councillors received word that the doctor who had been coming to Thorhild would soon require his patients to begin travelling 40 minutes to Smoky Lake for appointments.

This news was potentially a big blow for the hamlet of Thorhild and the 3,200 residents who reside in the community and the surrounding rural County.

“If you lose your medical coverage in your community, that’s about the surest way to kill your community,” said Wayne Franklin, Thorhild County Chief Administrative Officer.

Recognizing that not all residents had access to transportation, a meeting was held on January 5 with various stakeholders to discuss their options. A month later, County Council passed a motion directing administration to begin the process of setting up a clinic and hiring a nurse practitioner.

As a result, a medical centre with two examining rooms and a waiting area was opened in the back area of the County Building on April 10 – a turnaround time that Franklin acknowledges was akin to “turning things on a dime”.

“It’s one thing to think outside of the box, but when you do that sometimes you have to step outside of the box and find a way to make it happen,” said Kevin Grumetza, Reeve for Thorhild County.

County staff had to overcome many challenges while trying to open the clinic. An absence of health-care expertise on staff meant county employees had to figure out how to find suppliers, navigate paperwork, and secure a Netcare FOB, which enables the user to access the provincial electronic health record system.

“As every problem cropped up, we found a solution to it,” Franklin said.

The nurse practitioner hired was Colleen Cartier, who came with 13 years of experience as a Registered Nurse, before returning to school to become an NP.

Among the services offered by Cartier are diagnosing and treating a wide variety of illnesses and injuries; ordering and interpreting lab and diagnostic tests; prescribing or adjusting medications as needed; performing minor treatments such as suturing; conducting women’s health assessments; managing chronic disease; and referring patients to specialists or local doctors.

Cartier has been very well received in the community.

“Colleen has been really great so far,” said Jessica Olchowy, who brought her one-month-old son, Tucker, in for a wellness check, adding she would definitely be sending family members to the clinic.

Paul Campbell, who lives at the Thorhild Lodge where Cartier makes visits once per week, says he was pleasantly surprised when he discovered what services Cartier could provide.
“I’m unfamiliar with nurse practitioners,” he said, but added Cartier has given him a prescription for his bad knee, and he enjoys walking to the clinic rather than waiting for a doctor’s appointment.

Helen Schreyer, another resident at the Lodge, sees Cartier in-house and has appreciated the care.

“The biggest goal for this clinic is for the community to be aware of what it is, and for people to actually utilize it,” said Carolyn Sedlowsky, Family and Community Social Services Manager with the County.

Cartier, who is a County employee, and is paid by salary rather than on a per-patient basis, said the flexibility of an independent practice gives her the ability to spend the time she needs with each patient.

“It’s an amazing opportunity for a nurse practitioner to be able to take part in something like this,” says Cartier.

— Article and photographs by Alicia Fox

Medicine Gathering and Niitsitapi wellness

Article and photographs by Julie Davis, RhPAP Community Consultant

In August I had the pleasure of spending an afternoon last with a very passionate and diverse group of folks interested in sharing and learning about the medicinal use of local plants used by the Niitsitapi (Blackfoot) people.

Piikani Elder Shirlee Crow Shoe, and Blackfoot traditional wellness worker (AHS) Sylvia Ann Fox, generously shared stories and their knowledge of these plants, as we connected, chatted and gathered medicine.

Elder Shirlee Crow Shoe developed a resource for junior high students to help them understand how topographical features influenced the lifestyle and culture of the “Amsiskaapipikani” (South Piikani tribe). The Seasonal Round, assists in understanding the concepts of time and the seasons in the historical perspective of the Amsiskaapipikani and their relationship with the land.

Many thanks to AHS, Fort Macleod Housing Coalition, and FCSS, for sponsoring the day; Karen for driving us all around the land; and Jody Francis, Fort Macleod's Housing Liaison Worker, for organizing the day. I look forward to your next Niitsitapi learning session!
Brooke Elworthy never can predict how her day will unfold when she walks in the door at Bashaw Medical Centre. As a licensed practical nurse (LPN) with the Camrose Primary Care Network, she prefers it that way. Elworthy spends two days a week at the Bashaw clinic helping Dr. Tony Mucciarone provide care to the region’s patients. During one appointment she might counsel for weight, diabetes, or high cholesterol management, while her next patient may require wart removal, an immunization, or early prenatal care.

“I like to have variety and do different things all the time,” explains Elworthy during a break in her schedule at the Bashaw clinic. “I get bored easily so it’s good to be well-rounded in different areas. The more you can broaden your horizons the better.”

An emphasis on multi-disciplinary health care — coupled with Elworthy’s enthusiasm — led the PCN to expand her responsibilities to include work in chronic disease management and prenatal care in two separate Camrose clinics a few years ago, said Colleen McKinstry, Camrose PCN Clinical Director. In addition to Bashaw, Elworthy spends one day a week at each Camrose clinic.

Traditionally, doctors and Registered Nurses may have covered some of the duties Elworthy now carries out, but McKinstry says there are many tasks that can easily be handled by LPNs.

“It enables us to have a real broad range of health-care providers working to full scope and maximizing, dollar-wise, the work we do so we can provide additional care in other areas.”

“She really adheres to the code of ethics,” said McKinstry, noting they are in contact with the College of Licensed Practical Nurses of Alberta (CLPNA), a licensing body for LPNs, to ensure she’s working to her full potential within the guidelines outlined by the CLPNA.

“IT was a bit of a sell until the RNs understood the role she would play and, once she got out there, and she rocked it, they’re now the biggest fans,” she said. “There’s a whole team that wraps care around the patient. With that complementary care, they are all learning from each other,” she said of the LPNs, RNs, doctors and other health-care providers.

Adding Elworthy to the mix has resulted in reducing the load for her colleagues Dr. Mucciarone, and registered nurses, Pam Sherman and Alysa Bartman, enabling the health-care team to spend more time with patients overall.

Sherman, an RN at the prenatal clinic, said her team now sees about 10 to 11 new patients, up from the previous maximum of six when Elworthy first came on board. Follow-up appointments, which generally take less time than first appointments, have also increased.

Elworthy often does some of the assessments when women come in for their first prenatal appointments starting by collecting their family, medical, and delivery history, making note of medications and allergies, and providing some initial prenatal education.

““There’s a whole team that wraps care around the patient. With that complementary care they are all learning from each other ...”
— Colleen McKinstry
“She’s one of the team here and I’ve completely seen it as a positive,” said Sherman. “To see Brooke’s growth in this role is absolutely amazing. She’s completely embraced the opportunity and wants to soak in all the information.”

Bartman agrees Elworthy’s role is similar to the other team members in chronic disease management, but she knows her limits as an LPN, leaving the complex cases to the RNs and physicians to oversee.

Back in Bashaw, Dr. Mucciarone said patients in the surrounding communities of Ferintosh, Donalda, and Alix also really benefit by having Elworthy on their side.

“It’s a matter of working as a team and everyone has a role. ”
— Dr. Tony Mucciarone

“I have a limited amount of time, but Brooke can sit down with them for an hour,” he said, noting she handles everything from initial discussions, to sleep studies, to lifestyle management counselling, including 24-hour blood pressure monitoring. She’s also taken additional courses to expand her knowledge in specific areas of care.

“Whatever services we can bring to a small community is a bonus,” said Dr. Mucciarone. More than half his patients are over 55, so it makes it less stressful for them if they don’t have to travel to larger centres for medical services.

While Elworthy has been a gem for Bashaw, and a cost saving for the PCN, Dr. Mucciarone and McKinstry agree not all LPNs want to tackle such a broad scope of practice or travel to multiple clinics. And that’s just fine.

“It’s always a matter of hiring the right person and there has to be community buy in,” adds Dr. Mucciarone. “It’s a matter of working as a team and everyone has a role. Brooke and I work very well together.”

“Brooke is very passionate about caring for her patients … and that is evident,” adds McKinstry. “She puts her patients first and gives them what they need to be successful.”

Elworthy said working in three different clinics with a range of ages and health issues keeps her engaged.

“It’s fresh and new so it keeps me on my toes. It’s good to challenge yourself all the time. I don’t think we learn unless we challenge ourselves.”
— Article and photographs by Lorena Franchuk

‘Rural medicine wasn’t even on my radar’

Medical students had their eyes opened to rural opportunities at the annual Rural Shadowing Luncheon sponsored by RhPAP at the University of Calgary Cumming School of Medicine on July 16.

The 170 first-year students enjoyed presentations and lunch on the Foothills Hospital campus which provided them with an opportunity to interact with RhPAP staff like Charlotte DeLaet, Physician and Allied Health Programs Coordinator.

DeLaet said the response to the information about shadowing and skills events was positive.

“Even just walking through the crowd of people, I could hear people expressing their excitement,” she said. “We just opened their minds to what’s available.”

First-year medical student Stephanie Gartner agreed.

“Rural medicine wasn’t even on my radar, so I think it’s great that we have this opportunity, and it’s something that I will make my priority to include in my medical education,” says Stephanie.

Gartner said she is interested in getting more hands-on, one-on-one experience by shadowing with a rural preceptor. She’s also curious about the skills events.

“I think it’s great that there’s a multidisciplinary approach with the skills events,” she said.

Her peer, Malek Hannouf, said the luncheon has already influenced his choices moving forward.

“I think it opened my eyes on how I can link my interest in medicine with a rural practice,” he said.

Hannouf signed up for skills weekends and shadowing opportunities.

“That’s exactly what I wanted,” he said. “I wanted to get that kind of exposure to rural medicine.”

DeLaet and her RhPAP colleagues Shawna Banman and Lara Harries, alongside Dr. Aaron Johnston, Director of Rural Medicine with the U of C, spent the afternoon introducing students to the rural opportunities that are available to them.

“They can go all over the province, and we’ll support them and help pay for the expenses they accumulate for their shadowing,” said DeLaet.

Find out more by visiting the Medical Skills Weekends or Weekend Shadowing pages on rhpap.ca.

— Article and Photo by Britton Ledingham
Edgerton. The first ever Rural High Schools Skills event was put on in July by the villages of Irma, Chauvin and Edgerton. Each skills stations was taught by alumni from the area.

Swan Hills. On September 25, more than 40 students experienced simulations ranging from airway management to working in the STARS Mobile Education Unit. Students also enjoyed local activities such as curling and ice-fishing.

Rimbey. On August 25 and 26, the Rimbey and Area Attraction and Retention Committee hosted more than 50 students from the University of Alberta. After an intensive day of skills training, students were treated to dinner, music, and dancing at Tumbler Field’s Farm. The following morning, students toured Pas Ka Poo Museum and Park and enjoyed a track-side barbeque lunch while watching passes at Central Alberta Raceways.
Skills & Appreciation Events

Over the last few months, RhPAP has worked with Attraction & Retention Committees throughout the province to host Skills Weekends, Rural High School Skills Days, and Health Professional Appreciation Events. There have been events held in Cold Lake, Edgerton, Rimby, Peace River, Sundre, Flagstaff, Wainwright, Brooks, and Rocky Mountain House.

We look forward to working with even more communities this winter!

Cold Lake. In July, 55 post-secondary health-care students came to the Cold Lake Health-Care Centre for skills training and to learn more about the region.

Brooks. Students from St. Joseph’s Collegiate, Brooks Composite High School, Bassano High School, Duchess High School and Rosemary High School came together at the Brooks Campus of Medicine Hat College on May 15.

Flagstaff County. On April 21 and 22, more than 50 medical, nursing, physiotherapy, respiratory, and paramedic students from the U of C, MRU, and SAIT travelled to Killam and Galahad for a Skills Weekend.
Rhapsody Awards celebrate excellence in rural Alberta health care

Committed, impressive, innovative, and wonderful—these are some of the words used to describe the 2018 recipients of the Rural Health Professions Action Plan (RhPAP) Rhapsody Awards. Launched this year, the Rhapsody Awards celebrate individuals, teams, and organizations who have made significant civic and health-care contributions in rural and remote Alberta communities.

Rhapsody Award recipients were recommended for selection to the RhPAP Board of Directors by a review committee, composed of rural Alberta community members and medical professionals.

According to RhPAP Board Chair, Dr. Rob Warren, all recipients and nominees have provided rural Alberta communities with outstanding patient care, making notable contributions to maintaining quality health care close to home. “Like a rhapsody, this year’s award recipients have left their communities feeling great, and we’re proud to sing their praises with this new and exciting initiative,” Warren added.

Recipients will be honoured at RhPAP-sponsored events in their communities, with each recipient presented with a unique award, created by Firebrand Glass Studio in Black Diamond. Details on events, and profiles of 2018 recipients, will be posted on www.rhpap.ca as they become available.

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Rhapsody Awards

Rhapsody Community Award

Recognizes a rural Alberta community that has developed innovative and collaborative approaches to successfully attract and retain health professionals in their area.

Pembina Physician Recruitment & Retention Committee (PPRRC), Drayton Valley and Brazeau County

Pembina was selected for its use of innovative practices to successfully attract new physicians and its ongoing efforts to retain the physician cohort within the Drayton Valley community. Possessing strong leadership from local health professionals and community members, the PPRRC is an integral part of the community.

Rhapsody Physician Award

Recognizes the contributions of a rural physician who provides his/her rural Alberta community with outstanding patient care and makes notable contributions to that community and medical practice.

Dr. David S. Welch, Peace River

Dr. Welch has gone above and beyond the call of duty, making significant contributions to medical practice, and ensuring ongoing local access to cardiac stress testing and diabetes treatment. Dr. Welch takes care of himself, his colleagues, and his patients, while also finding time to stay involved in the community. As an active member of his church, Dr. Welch has also provided medical missionary services to underprivileged populations around the world.

Rhapsody Health-Care Heroes Award (Three recipients)

This award is new this year and recognizes rural Alberta health professionals or teams that demonstrate superior commitment to their patients, health-care team, and community.

Hythe Continuing Care Centre

The compassion and loving care exhibited by the health-care team at Hythe Continuing Care Centre has earned them the status as highest-rated long-term care facility in the Alberta Health Services North Zone, as determined by a 2017 Health Quality Council of Alberta survey of families experiencing long-term care across Alberta.

Operating Room Team, Peace River Community Health Centre

The Operating Room Staff at Peace River work well together, taking care of their patients and each other. A wonderful, cohesive group with a proactive focus on teamwork, they are there for each other and their patients, resulting in outstanding care for the residents of Peace River and area and a readmission after-surgery rate that is substantially lower than the national average.

Sundre Hospital & Care Team

In a facility that has faced much uncertainty, there is one constant at Sundre Hospital: a cohesive rural health team. In the face of adversity, the team has stepped up to find solutions, seek purpose in their roles, and provide leadership when called upon. The team has undertaken unusual, extensive, and strategic efforts to ensure the quality of patient care they provide remains appropriately high.

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“Like a rhapsody, this year’s award recipients have left their communities feeling great, and we’re proud to sing their praises with this new and exciting initiative”

— Dr. Rob Warren
Rural High School Skills Days

Grow Your Own Health Professionals

What is a Rural Skills Day?
Rural High School Skills Days are one-day events for high school students to learn about rural health care. Held during school hours, between 40 - 50 students experience hands-on, interactive, and engaging medical skills stations taught by local health professionals. The event is held at the local health-care facility, school, or other community gathering places. Rural Skills Days are designed to highlight the positive aspects of a community and to address current and future local health-care needs.

What kind of skills are taught?
Students are taught a variety of skills by local health professionals, including:
- Suturing
- IV Starts
- Injections
- Physiotherapy
- EMS
- Lab/X-Ray
- Respiratory/Airway Management

Why host a Rural Skills Day?
Rural Skills Days are an opportunity for rural communities to:
- Let local students see the wide range of careers found in rural health, hear practice stories from rural professionals, and understand the scope of practice within a rural setting
- Plant a seed with students to consider returning to the community they grew up in to work as a health professional
- Create collaborative and sustainable partnerships with the local health-care community/facility

Who plans a Rural Skills Day?
With the support of an RhPAP Community Consultant, a Rural Community Attraction and Retention Committee can plan a Skills Day with their local or regional:
- High School(s)
- Health-care facility site manager
- Municipal leadership

What does a Rural Skills Day look like?
Students arrive at the venue at the beginning of a school day to engage in the hands-on skills stations until lunch. The lunch hour is an opportunity for the students to enjoy lunch provided by the community and listen to guest speakers talk about why they work, live and play in a rural setting. A few more skills stations before the end of the school day will send them home with new experiences and a better understanding of what a career in rural health has to offer.

What you will need to host a Rural Skills Day
- Six to eight rural health professionals to serve as instructors
- A venue to hold the skills stations (e.g. health centre, community hall, school)
- Capacity to host the lunch and have one to two health professionals with experience and a passion for rural health care as guest speakers

How to get involved
If this sounds like an opportunity for your community, contact your RhPAP Rural Community Consultant to get started!

Contact RhPAP at:
2601 10020 - 100 Street NW 1-866-423-9911
Edmonton, Alberta info@rhpap.ca
Now approaching the 1000th time it has been taught, the continually-improving and intensive Emergency Department Echo (EDE) Course is still raising the bar for medical care and training in Canada.

EDE founder, Dr. Ray Wiss, wanted to train the average doctor to use ultrasounds to look for basic things that could have a dramatic effect on patient care.

“We want to use ultrasounds the same way that nurses use stethoscopes,” explained Dr. Wiss.

After discovering the training available in Canada at the time was insufficient, the internationally-recognized physician from Sudbury, Ontario designed and launched the EDE course in 2001. Since then, the EDE Course has grown rapidly in popularity due to its complete approach: from picking up the ultrasound probe for the first time, to scanning for life-threatening complications that may not be visible from a preliminary external examination.

Dr. Wiss said doctors often have to make a decision on care based on risk level, particularly in rural hospitals, essentially “rolling the dice” due to the cost, distance, or availability of equipment or specialists outside of communities.

This leaves the doctor wondering if they made the right call, even if the risk for complication is small.

For example, perhaps a patient in a rural location comes in with belly pain.

“There’s no way they’ve got an aneurysm – but (as a doctor), you’ve thought about it,” Wiss said, adding the risk is low so the doctor may decide against calling in a specialist or sending the patient to another community for additional tests if they show no other concerning symptoms.

Dr. Wiss says this is “a huge deal,” and any mistakes – understandable mistakes – will live with the doctor forever. “They do think about it, and it stresses them out, and that decreases the longevity of a rural health professional.”

However, with bedside ultrasound, the doctor can change the conversation to, “I’m going to take a look at your aorta”, and accurately assess risk at the patient’s bedside.

“That’s the huge benefit of EDE: it turns a low-risk patient into a no-risk patient,” Dr. Wiss added, which improves the prognosis for patients as well due to early detection.

Point-of-care ultrasound turns low-risk patients into no-risk patients

“Ultrasound will transform the way we practice medicine in virtually every way.”

— Dr. Ray Wiss
Bedside ultrasound can determine if there are complications from blunt trauma to the chest or abdomen, take a look at the heart, check for fluid in the stomach from liver or kidney failure, detect ectopic pregnancies, or look for enlarged livers or spleens.

“Ultrasound will transform the way we practice medicine in virtually every way,” Wiss said.

In October, RhPAP sponsored a “boot camp” style course in Claresholm. Area doctors participated in the first of two of four days designed to introduce, train, and equip doctors to use ultrasound equipment. The final two days will be held early in 2019.

“After four days, if you’ve done all your homework and you’ve qualified, you get your certification,” said Dr. Roisin Dempsey, organizer of the Claresholm event and local doctor.

The Claresholm Hospital has a portable ultrasound machine, donated by the Claresholm and District Health Foundation, but none of the doctors are trained.

“It seems very silly to have a very valuable machine and not have the skills to use it,” she said. After being inspired by seeing the outcome of a recent RhPAP-sponsored course in Brooks, she began the process of bringing one closer to home.

RhPAP Board Chair, Dr. Rob Warren, a practising physician in Sundre, is a huge advocate for the course.

“In my rural hospital, we are at least an hour by ambulance from the nearest CT scanner,” says Dr. Warren, adding that bedside ultrasound allows him to know immediately whether a patient is low-risk or whether they are in need of urgent transport.

According to Dr. Warren, the EDE Course is the “gold standard course for introducing bedside ultrasound skills, troubleshooting, and humility — when to be certain of your ultrasound findings and when to be cautious.”

“The focus of the EDE Course is to introduce safe scanning techniques to physicians, and encourage them to continue practicing and developing their skills to the point of achieving Canadian certification, which is recognized as being the highest and most rigorous certification standard in the world,” Warren said.

For more information on the EDE Course, visit www.edecourse.com.

— Article by Alicia Fox

RhPAP is here to support Alberta’s rural physicians

Enriching Your Skills
RhPAP supports skills development for rural health professionals. Rural physicians can access funding to upgrade existing skills or gain new skills in order to meet the medical needs of their community.

RhPAP offers a number of programs, including:

- A customizable Enrichment Training Program to assist physicians training in rural or regional communities in courses up to one year long;
- Emergency Medicine Enrichment (EME) and General Emergency Medical Skills (GEMS) courses; and,
- Various continuing medical education and continuous professional learning (CME/CPL) opportunities.

Finding You a Place to Live
RhPAP’s Accommodations Program provides resident physicians and nursing students with a place to call home while experiencing life and career opportunities in rural communities.

Coordinating Locum Relief
RhPAP supports AMA Physician Locum Services® by providing short-term locum coverage to rural physicians practicing in communities with four or fewer physicians.

An Opportunity to Give Back
RhPAP’s Shadowing Program is an excellent way to promote your practice and community to students considering working in rural Alberta. You get to pick the time and dates that work for you and RhPAP will take care of the rest.

For more information on these opportunities, visit rhpap.ca/physicians
Caring for your friends and neighbours

How the CARE Course helps support Alberta’s rural health professionals

Erin Welke-Martens knew long before she completed her nursing education that when you work in your own community, your patients are your neighbours, friends, and family.

“It’s an incredible feeling to walk into a delivery room and the patient says, ‘oh you look exactly like your mother!’,” says Welke-Martens, a Registered Nurse. “My Mom was the lab supervisor at the hospital in Pincher Creek for more than 20 years, and our family has been farming the land in the area for even longer.”

When Welke-Martens had the opportunity to return to Pincher Creek after graduating from the University of Alberta’s nursing program, she felt like she’d won the lottery. One of the many things Welke-Martens appreciates about practicing in a smaller community is the variety of care she gets to give each and every day.

“You get to be every kind of nurse in one day. It can be overwhelming at times but it’s such a special opportunity to have. I might be giving end of life care for a patient at the beginning of my shift and then bringing life into the world by the end of my shift,” says Welke-Martens. “In bigger centres, it can be easy to feel like just another nurse, but in a rural setting, you’re often ‘it’. It’s you and there’s no one else.”

While being ‘it’ comes with moments of elation, it often comes with its fair share of lows.

“When I was 30 weeks pregnant, I was part of the trauma team who cared for a young child who died as the result of a tragic accident,” says Welke-Martens. “The stress of caring for this child and his family led to my being put on bed rest for threatened preterm labour and I was not able to return to work prior to the (safe) delivery of my child. I struggled with anxiety and flashbacks related to this case prior to, and following, my son’s birth and especially leading up to my return to work.”

That anxiety was put at ease after Welke-Martens attended a continuing medical education course brought to Pincher Creek by RhPAP.

The CARE Course was designed by two rural physicians from British Columbia, Dr. Jel Coward and Dr. Rebecca Lindley, who were sought out to come up with an educational experience that was led by rural physicians, for rural physicians.

“The learning outcomes that occur from failure are often the ones that are the most valuable and resonate the most with health-care professionals.”

— Dr. Gavin Parker
“Rural providers have a very wide scope of practice. Working in a rural emergency department means being prepared for anything that comes through the doors,” says Lindley. “A rural team is small. When a patient is critically unwell, there is not a large team that comes running in to assist. Given this small team, the need for excellent teamwork and inter-personal skills is accentuated.”

This sentiment is echoed by Welke-Martens’s colleague, Pincher Creek physician, Dr. Gavin Parker.

“The CARE Course is tailored for your community’s needs and is run in your own facility. Continuing medical education budgets are tight for a lot of health professionals so being able to attend a course on the weekend, in your own city and experience it with your own health-care team is rare,” says Parker, who is also an instructor for The CARE Course, and an RhPAP board member.

“You get to be every kind of nurse in one day.”
— Erin Welke-Martens

“It’s great that RhPAP sees the value in and provides funding for these opportunities for learning. Getting to learn alongside your colleagues improves communication between everyone which is vital in high stress situations.”

For Welke-Martens, the hands-on learning sessions provided a safe environment for her to regain her confidence and refresh her skills.

“Because there’s no formal testing in The CARE Course, you don’t have that added pressure of failing like you do with other acronym courses,” says Welke-Martens. “The scenario-based setting allows you to just relax, concentrate on learning and gives you the freedom to ask as many questions as you like.”

Exploring High Acuity Low Occurrence (HALO) scenarios in a safe learning environment also allows for failure, which is a good thing, says Parker.

“Even the most experienced doctor, nurse or paramedic has that feeling of doubt and inadequacy when presented with an unfamiliar situation,” says Parker. “Getting comfortable with that failure is important and something I try to impart when I’m teaching. The learning outcomes that occur from failure are often the ones that are the most valuable and resonate the most with health-care professionals.”

Welke-Martens enjoyed her experience so much she’s hoping to get involved in teaching of The Care Course in the future and hopes more opportunities like it come to rural communities in the future.

“It’s always so lovely to hear from friends or family members who will tell me about a friend of theirs who I cared for,” she says. “Getting to care for your neighbor, family friend or someone from your community is such a privilege. It really matters what you do and the care that you provide.”
— Article and Photos by Meagan Williams

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**Helping out down south**

RhPAP is supporting five Medicine Hat College (MHC) students with accommodations in rural Alberta as part of the college’s Rural Health Course.

Bailey Bohach, Viktoria Wince, Caitlyn DeMars, Cole Smith, and Lissette French will stay at RhPAP-sponsored accommodation in five rural Alberta locations—Canmore, Strathmore, Bassano, Three Hills and Hanna. The five are pictured at a MHC Skills event for nursing and paramedic students, which took place September 25 at Bow Island Health Centre.

The MHC Rural Health Course runs for 13 weeks in total, with students placed off campus for eight of those weeks for clinical experiences in rural hospitals in southern Alberta, British Columbia, and Saskatchewan. According to JoDee Wentzel, MHC Nursing Instructor, other students who organized their own accommodation will be in Blairmore, Pincher Creek, Raymond, Taber, Claresholm, Oyen, and locations in British Columbia and Saskatchewan.
Alberta Rural Health Quarterly is published four times a year by the Rural Health Professions Action Plan (RhPAP). 
Quarterly is distributed by mail to rural health-care and government stakeholders throughout the province of Alberta.
Issues of the Quarterly are also free to download from the RhPAP website, rhpap.ca/quarterly.

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If you have any questions, comments, submissions, or suggestions regarding Alberta Rural Health Quarterly, please email Jonathan Koch at communications@rhpap.ca.

About/Alberta Rural Health Quarterly

In November, RhPAP is moving our corporate office to a new location in Edmonton. Check out our website, RhPAP.ca, and subscribe to our RhPAP Review e-newsletter, for updates and details about our big move.

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Launching November 2018

Screenshots from the new rhpap.ca

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