

# RPAP

2015-16 Provincial Impact Report



- **What's not to love about Oyen?**
- **RPAP Awards: Celebrating Healthcare Heroes**
- **Hnatuik Bursary is 'a game changer'**
- **Measuring the impact of Rural Rotations**

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## The Alberta Rural Physician Action Plan 2015 — 2016 Annual Report

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# Welcome to the RPAP Provincial Impact Report



The RPAP vision—“having the right number of health practitioners in the right places, offering the right services”—has now become a provincial mantra. As the second year of our three year strategic plan comes to a close, RPAP continues to make progress identifying and affecting the factors that influence attraction and retention of health human resources where they are needed in rural Alberta.

Our tagline, “Health Workforce for Alberta”, recognizes that access to healthcare is not always just about seeing a physician: It’s about seeing the appropriate healthcare worker when you need him or her.

It also recognizes that rural physicians don’t work in isolation. RPAP is moving to support not just physicians, medical students, and resident physicians, but also other healthcare workers who rural Albertans need access to. Within the past year for example, RPAP has worked with a half-dozen rural communities, including remote Northern, Indigenous, and Francophone communities, on initiatives such as Medical Skills Weekends, where small groups of nursing, medicine, social work, physiotherapy, and respiratory therapy students come together for a weekend in rural Alberta to discover what rural healthcare is all about.

As a trusted partner in rural health, RPAP works with rural communities to meet their healthcare needs support and advice to rural physician attraction and retention committees. RPAP support includes networking and professional development opportunities such as the annual RPAP conference, and educational opportunities for rural healthcare professionals.

Since 1992, RPAP has come together with rural communities and our key collaborative partners—the Faculties of Medicine at the Universities of Alberta and Calgary, the Alberta Medical Association, the College of Physicians & Surgeons of Alberta, Alberta Health Services, and our funder, Alberta Health—to support the delivery of the healthcare services that rural Albertans are asking for. We extend our sincerest thanks to all of them for their vital contributions.

We also acknowledge the contributions of David Kay, who left our organization in April after nearly two decades of visionary leadership.

As RPAP enters a new era, we look forward to a continued role that builds on our quarter century focus on rural health physician needs, enabling us to have an even broader impact on rural health workforce by strategically modifying our portfolio of activities.

**Bert J. Reitsma, MD, PhD, Chair | Karen Lundgard, MD, Vice-Chair**  
**Evan Lundall, MBBCh | John Gillett, MBBCh | Rob Warren, MD | Gavin Parker, MD**  
**Dr. Jacques Magnan, Executive Director (Interim)**



# Looking back

**David Kay and RPAP have  
come a long way together.**

Twenty-five years ago, a healthcare administrator from Saskatoon named David Kay received some unfortunate news from his family physician, Dr. Rick Spooner.

"[He] told me that he was going to be leaving, going to Edmonton to be responsible for this brand new exciting program called 'RPAP,'" recounted Kay.

In Alberta, and across Canada, the attraction and retention of physicians for rural practice was a burning issue. Physicians weren't necessarily where they were needed, and weren't always performing the skills the community needed. As the ageing rural physician population moved on, there weren't sufficient numbers of physicians interested in rural practice to replace them.

In need of an action plan to attract and retain rural physicians, a provincial working group formulated 16 initiatives to influence physicians' decisions about moving to, and remaining in rural Alberta. The implementation of these recommendations would become known as the Rural Physician Action Plan, or RPAP.

Although his first contact with RPAP may have seemed innocuous, within a few years, the New Brunswick native would also find himself in Edmonton, cheering for the Oilers, and in charge of the Rural Physician Action Plan.

Through the execution of the 16 initiatives, RPAP under Kay's leadership would evolve into Canada's only integrated and comprehensive health work force agency. Over time, as data and experience were gathered, initiatives have been added or modified: Distributed rural medical education, community engagement, and Continuous Professional Development for rural physicians are among the new components that comprise RPAP's sequential series of initiatives.

The organization has grown from Kay's basement years, and now supports a roster of staff and consultants to execute RPAP programming to recruit and retain healthcare workers and their families in rural Alberta. In recent years, he has moved the organization towards providing support for other healthcare professions, in the same evidence-based manner that RPAP has done for physicians and their trainees.

"By working with a lot of really good people who understood those moving pieces, we're able to refine them, and over time grow RPAP from a quarter million dollar program that I ran from my home office, to what we see today as a very complex program of a lot of moving pieces," says Kay.

"We have done what we said we could do, not always by ourselves, but with partners, and that is grow the workforce, help distribute it to where it's needed, and help retain those healthcare workers physicians and their families in rural Alberta. **I think we have done a good job.**

— David Kay

"I would never have known that six or so years later I would be responsible for RPAP," Kay added. "So that was quite a coincidence."

Having moved to Edmonton in 1996 with wife, Dorothy, and children, Jennifer and Michael, to work for Capital Health, David was recruited for the role of RPAP Executive Director in 1998, and was presented with a miniscule budget, zero staff, and no office.

"When I started with RPAP it literally was a shoe box that I inherited. I had no clue what the initiatives were or really what it did other than help to recruit and retain physicians for the province."

Working from home, he began venturing into rural Alberta as much as possible, shadowing physicians, working with mentors, and figuring what recruitment and retention of physicians for rural Alberta was all about.

After 18 years of service, Kay has moved across the hallway from RPAP, accepting the role of Assistant Registrar and Chief Operating Officer with the College of Physician & Surgeons of Alberta. He leaves behind an organization that is a trusted partner and collaborator within rural healthcare, and has done what needs to be done for the people of rural Alberta, without the bureaucracy or bottlenecks that challenge larger organizations.

"We have done what we said we could do, not always by ourselves, but with partners, and that is grow the workforce, help distribute it to where it's needed, and help retain those healthcare workers physicians and their families in rural Alberta," Kay added. "I think we have done a good job." **JK**

OUR GUIDE TO

## Becoming a Doctor in Canada >

# BeADoctor.ca

## RPAP launches a new online tool to guide potential medical students

Alberta's next generation of physicians now have an important resource to guide them along the path to becoming a doctor.

The new BeADoctor.ca provides students, parents, and Alberta's high school guidance and career counsellors with the information young Albertans need to know to about becoming a doctor.

Created by the Alberta Rural Physician Action Plan (RPAP), the refreshed BeADoctor.ca provides up-to-date information and resources for Alberta students, including new multimedia platforms embedded within a responsive website, enabling web savvy students to ask questions and make informed choices about careers in medicine.

"Information can change very quickly, and this site is a one stop resource providing the latest, up-to-date information about becoming a doctor," says Kimberley MacKinnon, RPAP Senior Community Recruitment Consultant, and part of the website development team.

According to MacKinnon, the new BeADoctor.ca is also a valuable resource for Alberta's high school Guidance and Career Counsellors. The website provides advice to students regarding career planning, and covers topics such as medical education, residency training, and how to pay for med school.

"Both students and counsellors will find many cool new features in this refreshed site, including new multimedia platforms, an expanded social media network, informative podcasts, and access to RPAP's many school outreach video profiles on a dedicated school outreach YouTube playlist," says MacKinnon.

As part of RPAP's commitment to growing our own physicians, RPAP Consultants can often be found in classrooms and at career fairs, providing Alberta's high school and post-secondary undergrad students with information and resources regarding careers in medicine. Students can keep up-to-date on provincial school outreach events involving RPAP through the News and Events section. They can also connect with RPAP consultants via the website and social media if they have questions, or are seeking additional information and advice.

"The BeADoctor website is an important tool in RPAP's provincial school outreach strategy, so check it out, look around and connect with us," says MacKinnon. "We're here to support Alberta communities and students."

For more information on BeADoctor.ca and the RPAP School Outreach program, contact Kim MacKinnon at [kim.mackinnon@rpap.ab.ca](mailto:kim.mackinnon@rpap.ab.ca). *JK*



# I hear you want to Be A Doctor?

In May, RPAP teamed up with Career Transitions Lethbridge and the Chinook Regional Hospital to talk to students and answering their questions about what it takes to start a career in medicine.

“We’re connecting with Grade 11 and 12 students to bring them information and resources and to have a little bit of fun to help them see that rural medicine is a viable option as a future career,” says Kimberley MacKinnon, RPAP Senior Community Recruitment Consultant.

“Not only did the students have a chance to hear about career pathways, the educational opportunities, and ask a few questions, but then the best part is for them to do something a bit hands on,” says Judy Stolk Ingram, Executive Director of Chinook Regional Foundation for Career Transitions.

“Rural students are still underrepresented in medical schools, and that’s concerning to us,” says MacKinnon. “We don’t want a lack of options to be a barrier, we don’t want a lack of funding to be a barrier, and we don’t want a lack of confidence to be a barrier. If I can come in and in two short hours make a difference for some high school student and recruit them eight or ten years from now, than that is a morning well spent for me.”

Are you interested in hosting a Be A Doctor presentation? RPAP offers schools or career development offices in-person presentations, as well as a variety of resources for youth interested in exploring a medical career.

To find out more, contact an RPAP Consultant at [recruitmentconsultants@rpap.ab.ca](mailto:recruitmentconsultants@rpap.ab.ca) or 1-866-423-9911. *rlw*



# Hnatuik Bursary is ‘a game changer’

On 30 January 2016, RPAP | Health Workforce for Alberta and representatives of the Hnatuik family awarded ten students with full tuition for the rest of their medical studies.

“Honestly, it’s a game changer. I think the biggest stress coming into med school is that something like money could end your dream,” said Taylor Nelson a first year University of Alberta medical student from High Level. “This bursary makes a huge difference.”

The Dr. John N. Hnatuik Rural Medical Student Bursary provides full tuition including differential fees for each year of medical studies to reduce the financial burden faced by rural medical students and their families. The bursary celebrates the memory and contributions of Dr. John N. Hnatuik, who passed away in February 2010.

“My dad ... would just be thrilled,” said Margaret Yaremko, Dr. Hnatuik’s daughter. “He would have been so proud of each and every one of these recipients.”

The impact of the bursary was not lost on the aspiring doctors.

“It will allow me to be a better student because I’m not having to worry about the financial side of things, and that’s something to be so thankful for,” said Asha Varguhese a first year University of Alberta medical student from Cold Lake.

“In a community sense, I know that there’s people out there that are supporting my choice to go rural,” said Marie Decock, a first year University of Alberta medical student from Pincher Creek.

For more information on how RPAP supports Alberta-based medical students, including the Medical Student Award and Bursary program, please visit

**[rpap.ab.ca/medical-students](http://rpap.ab.ca/medical-students)** /JK & LW

“It will allow me to be a better student because I’m not having to worry about the financial side of things, and that’s something to be so thankful for.”

— Asha Varguhese



## 2015-16 RPAP John N. Hnatuik Rural Medical Student Bursary recipients

Lynn Williams  
Cardston County, AB (U of A)

Taylor Nelson  
High Level, AB (U of A)

Scott Anderson  
Lethbridge, AB (U of A)

Asha Varughese  
Cold Lake, AB (U of A)

Marie Decock  
Pincher Creek, AB (U of A)

Matthew Siray  
Millarville, AB (U of A)

Marc-Andre Filion  
Vermilion, AB (U of A)

Courtney Bailey  
South Cooking Lake, AB (U of A)

Wade Walters  
Redwood Meadows, AB (U of C)

Scott Manktelow  
Canmore, AB (U of C)

## 2015-16 RPAP Rural Medical School Award recipients

Mark Drew  
Cardston, AB (U of A)

Murray (Mack) Jacobson  
Ponoka, AB (U of A)

Marya Aman  
Medicine Hat, AB (U of A)

Bethea Shute  
Beaumont, AB (U of A)



### ‘It’s always been home, it’s always going to be home’ Hnatuik Recipient looks forward to returning to High Level

It’s not entirely true that Taylor Nelson wanted to be in High Level.

“All I wanted to do as a teenager is leave,” says Nelson, a first year University of Alberta medical student. “I wanted the city life. And now that I’m here, I’m like, can I go home, please?”

“I don’t know what it is, but it calls you back,” continues Nelson. “It’s a small town, you know your neighbours you know people, you grow up with people your whole life. Lots of us leave the community to pursue careers and to get a good education, but most of us come back. It’s always been home, it’s always going to be home”

Nelson is one of the ten recipients of this year’s Dr. John N. Hnatuik Rural Medical Student Bursary. The bursary means that Nelson will have her full medical school costs covered.

As a youngster, Nelson has been inspired by the commitment and dedication of High Level’s current doctors. She is particularly impressed by those who have taken the initiative to go into the area’s First Nation’s Communities. “Going to the patients, rather than having them come to you. That is just huge,” she explains.

“For me, [rural medicine] is about getting to know your patients,” says Nelson. “You’re not just their doctor, you’re part of their community. I really want to be part of the community.” /LW



“This is something we don’t learn at all when it comes to simulations and this kind of stuff, so a very valuable experience, 100%. I would recommend for years to come to any nursing student, and med student, and physio and RT.”

— Nursing student

# Learning Skills to pay the bills

RPAP Medical Skills Weekends provide first and second-year medical students with the opportunity to visit rural Alberta communities and experience what rural medicine is all about. **Students** learn what it is like to practice in a rural community, and discover practice sites they may wish to consider in the future. **Communities** use this opportunity to showcase their assets to medical students who typically stay for the weekend. /LW & JK



“We have a wide scope, we work in the practice, we work with the people of the town, and it’s really satisfying to see our work here. I think you make a difference if you work in rural, and you see it in your patients. They are grateful for you being here, and it’s just a fun job to have.”

— Rural Doctor





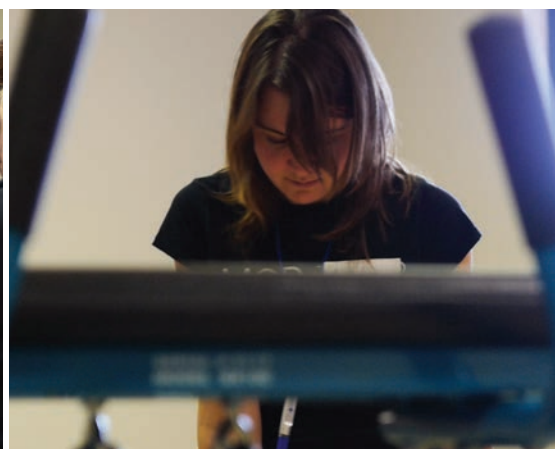
“It’s ground breaking [for our communities] to get the rural perspective to the new, prospective doctors. Rural has its benefits, and that is what we want them to see.”

— Local Reeve



“It gives me hope for the health system when I see that many people still interested and excited about helping people in their various professions; it’s nice to be a part of that.”

— Site administrator



# A slice of Rural Practice

## When promoting rural family medicine, never underestimate the importance of pizza.

For Dr. Gavin Parker, several helpings of pepperoni and cheese played a significant role in his decision to become a rural physician, now practising in Pincher Creek, 215 km south of Calgary.

Parker can trace his interest in rural medicine to the RPAP-sponsored pizza luncheons he attended over a decade ago, as an undergraduate medical student at the University of Alberta (U of A). Beginning with those first slices of rural perspective, a relationship was forged with RPAP that would serve him throughout the remainder of his education, and his professional career.

Parker credits an RPAP-sponsored weekend in Hinton, that he attended with his wife and fellow U of A Rural Medicine Interest Group (RMIG) members, with sparking his interest in becoming a country doctor.

“I was quite convinced I was going to be a neurosurgeon, but I saw the opportunity to have a free mountain weekend, and RPAP was kind enough to take us and our spouses skiing at Jasper on a Sunday, so I thought, ‘oh sure, I could do some skills stations and learn about this career, and go skiing. It sounds like a fun weekend’.”

It proved to be a life altering experience.

“It was the first time I had ever saw a doctor wearing jeans, not wearing a stuffy suit and shirt and tie, and it really opened my eyes to how happy rural doctors were,” said Parker. “A lot of them would introduce me to their first wife, not their third wife, so I thought that was a pretty good sign that rural medicine is where it’s at.”

Thereafter, with every Rural Rotation he participated in during his medical school clerkship, his desire to practice this kind of medicine grew stronger. Upon graduation, Parker entered the RPAP-supported Rural Alberta South (RAS) rural family medicine program, which solidified his decision to practice in a smaller community.

“It’s really the only career available in medicine where you get to practice the broadest scope of skills,” says Parker. “I don’t want to say I’ve delivered my last baby [and] I don’t want to treat my last abscess, or fracture, or prenatal in a clinic.”

After spending time travelling the province as a locum physician, the Parkers settled on Pincher Creek, where he began permanent practice in 2007. Since then, he has received RPAP grant funding for a year long anaesthesia fellowship, and has also received RPAP funding for enrichment training in cardiac stress testing. In addition to this, RPAP has supported the annual Society of Rural Physicians of Canada (SRPC) conference, which Parker has helped organize; and the British Columbia based Comprehensive Approach to Rural Emergencies (CARE ) course, a multidisciplinary simulation course for rural healthcare professionals, in which Parker and Pincher Creek colleagues serve as instructors.

Having received many advantages through his involvement with RPAP over the years, Parker joined its Board of Directors in 2013 as an Alberta Medical Association representative, with the hope of helping others discover the joys of rural medicine.

“I’m a city kid born in Winnipeg, Manitoba, and I didn’t know anything about working as a country doctor,” Parker explains. “RPAP is singularly responsible for where I find myself today, and so anything I can do to help the organization I’m very happy to do so.” /JK



“A lot of [rural doctors] would introduce me to their first wife, not their third wife, so I thought that was a pretty good sign that rural medicine is where it’s at.”

— Dr. Gavin Parker

# The Right Fit

“Being a rural doc is not easy, and very different from urban family medicine, and I would not have been ready to practice in this sort of environment without RPAP’s programming and support.”

— Dr. Rob Warren



## How rural medicine helped Dr. Robert Warren regain order outside the court

There was a time when life in the big city appealed to Robert Warren. Born and raised in Calgary, Rob is the son of a successful city lawyer who hoped to follow his father’s footsteps into the courtroom.

While attending law school at the University of Alberta, Warren met his future wife—a medical student named Michelle. Soon he was a husband, father, and a successful solicitor at law practices in Edmonton and Calgary. Everything seemed to be going according to plan, except for one thing: Being a big city lawyer was no longer part of the plan.

“Being a lawyer in a downtown law office is a very demanding job, and it has a high burnout rate,” explains Warren. “It’s a very fulfilling job, but it’s not the kind of job that’s compatible with having a lot of other things going on in your life. And when you’re in the middle of it, it’s sometimes hard to see that.”

Looking for a change of pace, the Warrens moved to Sundre in 1999 following the completion of Michelle’s residency, where Rob says they found a community that moved at the pace they did.

“It’s a cliché, but it’s true, the small town lifestyle is still a very traditional lifestyle that has some of those cowboy values that if your neighbour needs help, you drop what you’re doing, and you go to help,” says Warren. “You’re part of a bigger community, you’re more than your job - you’re a person, and a father, and a spouse, and a neighbour, and that spoke to both Michelle and I.”

Leaving law behind, Rob stayed at home with the kids, while Michelle grew her practice in Sundre. Giving themselves six months to see if the community was the right fit, the couple soon bought a house, and have been there ever since.

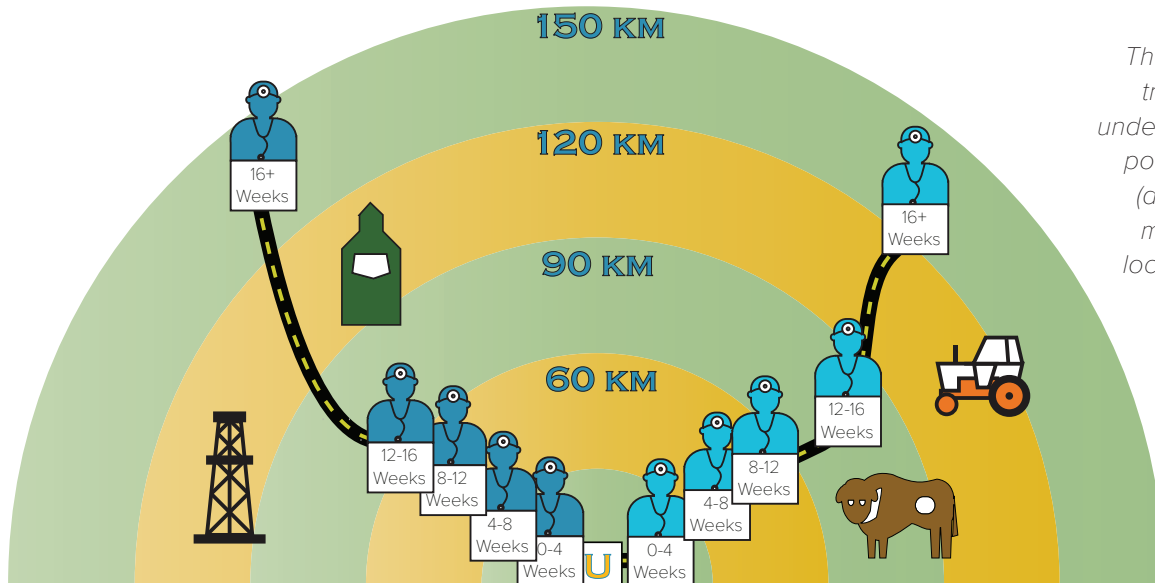
When it became time for the kids to go to school, Rob decided rural medicine offered him a fulfilling way to contribute to the community. He applied and was accepted in the University of Calgary faculty of medicine in 2006, while at the same time forging a relationship with RPAP that endures to this day.

Warren says RPAP provided him with “invaluable support” throughout his training, starting with tuition support from an RPAP Rural Medical School Bursary, and continuing through the RPAP-sponsored Rural Alberta North (RAN) residency training program in Red Deer.

“It’s scary and intimidating to contemplate entering a job like this,” adds Warren. “Being a rural doc is not easy, and very different from urban family medicine, and I would not have been ready to practice in this sort of environment without RPAP’s programming and support.”

A practising physician since 2011, and co-owner, with Michelle, of Sundre’s Moose and Squirrel Medical Clinic since 2013, Warren says RPAP remains “a valuable ally”, providing recruitment support, and educational initiatives for practising and future physicians. His involvement with RPAP continues today as an Alberta Medical Association representative on the RPAP Board of Directors, and through his involvement with medical students and the RAN and Rural Alberta South (RAS) residency programs.

“We find teaching very rewarding—it’s energizing to work with young intelligent people who want to do the same kind of job that you do, but also because we are proud of what we’ve got here in Sundre,” Warren adds. “We want to share that and show it off to people who might be looking for a place that fits well for them.” **JK**



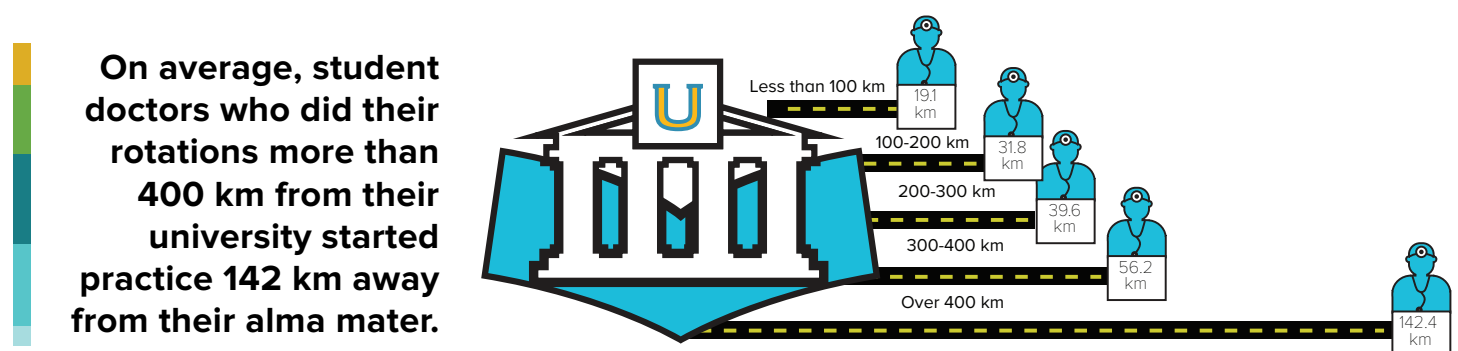
The more weeks an Alberta trained physician spent on undergraduate (light blue) and postgraduate rural rotations (dark blue), the further their medical practice would be located from an urban area.

# Measuring the impact of Rural Rotations

Exposing students and residents to rural life and rural practice increases interest in practicing in rural communities

An upcoming study by RPAP has revealed the Rural Rotations program to be highly effective at increasing the interest and likelihood of physicians practicing in a rural or remote community, particularly when combined with the RPAP's RAN and RAS program.

This effect is possibly due to Rural Rotations serving to dispel false ideas and stereotypes about life and work in a rural context.



**On average, student doctors who did their rotations more than 400 km from their university started practice 142 km away from their alma mater.**

The statistics show that, on average, student doctors who did their rotations more than 400 km from their university started practice 142 km away from their alma mater. Postgraduate resident physicians are also more likely to take part in Rural Rotations when they are part of the Rural Alberta North and Rural Alberta South (RAN & RAS) programs funded by RPAP. These programs alone accounted for 39 per cent of included trainees (85 of 216) and 55 per cent of weeks of postgraduate rotations (1651 of 3012 postgraduate weeks).

The Rural Rotations program arranges for medical students and residents to do mandatory and elective rotations with rural and regional preceptors. By participating in a rural or regional rotation, Alberta medical students and residents experience the diverse roles enjoyed by rural and regional physicians in their community and health care facilities as part of the local health care team.

For more information on the Rural Rotations program, visit [rpap.ab.ca /lw](http://rpap.ab.ca/lw)



Big country

# Bigger solutions

How creating a presence online helped  
a rural Alberta community stand out

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How do you get a doctor if you don't tell anyone you want a doctor? Your community is exactly the same as everyone else's. How do you make this community an interesting place for one physician out of a million physicians?

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The Special Areas of Alberta is big country. Spread over 20,000 km<sup>2</sup> of southeastern Alberta range, the three rural municipalities comprising the Special Areas is home to big skies, sweeping plains, and close-knit farming and ranching communities.

Being a physician in this big country is a big job. The hospital and medical clinic in Oyen, a town of just under a thousand souls three hours east of the city of Calgary, service 6000 people within an area that includes half-a-dozen rural and smaller urban municipalities.

In years past whenever Oyen clinic needed a physician, the remaining doctors would work within their professional networks to find a replacement. However, when two of three physicians left suddenly in 2011, there was no replacement waiting in the wings. Oyen Medical Clinic found itself one physician left to serve area residents, a daunting prospect for the remaining physician and community, leaving the Big Country Dental Medical Board with a big problem.

Having no direction, no experience, and no idea where to begin, the outlook for finding a physician for the community was bleak. As they would discover, the answer to their physician woes was literally at their fingertips.

## **It's not just about social media and technology, it's about building relationships.**

Realizing they were having problems, Big Country hired community economic development consultant, Christie Dick, to develop a strategic plan. The challenge, according to Dick, was to find a way to connect prospective physicians from around the globe with this rural Alberta community.

“How do you get a doctor if you don't tell anyone you want a doctor? Your community is exactly the same as everyone else's. How do you make this community an interesting place for one physician out of a million physicians?”

Looking to emulate the success of the Return to Rural initiative, which connects young professionals and families with work and lifestyle opportunities in Alberta's Special Areas, a marketing strategy was developed to grow an online presence for the community, venturing down a path seldom taken by rural communities at the time.

In 2011, the Physician Careers in Oyen website was developed, with funding from the SAMDA (Special Areas, MD of Acadia No.34, Village of Cereal, Village of Empress and the Town of Oyen) Economic Partnership. A social media management strategy was also developed, with an RPAP Community Physician Attraction & Retention Grant helping to cover a one-year contract for social media management of the “Physician Careers in Oyen” Facebook and Twitter channels.

In the months that followed, a locum physician became permanent, and Dr. Akinseinde Osakuade, known locally as “Dr. Akin”, was attracted to the community from the United Kingdom, specifically as a result of Big Country's website and social media campaign.

Although his decision to work in a rural community had already been made, Dr. Osakuade agrees that the advertising and information he received online swayed his decision to come to Oyen.

“I think the website for recruiting doctors was excellent, because I virtually could get all the information I wanted and needed to know about Oyen on the website,” said Dr. Akin. “I could watch videos about the physicians working here, what the people have to say, what the doctors have to say, what the pharmacists have to say. Pretty much all I needed to know was available”

Spurred on by Oyen's success, several other rural Alberta communities have launched online recruitment efforts, with projects from Milk River, Vulcan, South Peace, and Drayton Valley receiving assistance from the RPAP Community Grant program since 2014.

Although launching a website and social media campaign was critical to Oyen's recent success, Dick cautions communities venturing online that just building a Facebook page to recruit a physician isn't going to work.

“It's not just about social media and technology, it's about building relationships, and we try really hard to do that, to be supportive,” Dick added. “You know we've worked alongside Dr. Akin, for example, this entire way, so if he needs something we're there, we're texting, we're calling, we're emailing, so we're there, and you have to close the loop on all these things, and you have to continue building relationships with the people that you're working with or recruiting.”

“Without that, it doesn't matter what you do in social media or online, it's not going to resonate with people, and they're not going to become a part of your community or buy into your community.” **JJK**

# A soft landing

In the spring of 2014, the Bonnyville community was facing a crisis. The loss of five physicians in quick succession left the community facing potential service disruptions, ER coverage shortages, and the possible closure of the obstetrics program.

At the urging of Alberta Health Services, and with the assistance of RPAP | Health Workforce for Alberta, the Bonnyville Physician Recruitment and Retention Committee was formed.

According to committee member, Catherine Sandmeyer, a presentation by Dr. Hendrik van der Watt to the committee—which consisted of representatives from the Town and MD councils, Bonnyville Health Foundation, Bonnyville Health Centre administration, and local physicians—was the first step in developing a comprehensive physician attraction and retention strategy.

“I don’t think we knew the intricacies of immigrating to a country. In a Power Point presentation, [Dr. van der Watt] explained, literally right down to the dollars and cents, all the difficulties of leaving the country and arriving in two suitcases,” Sandmeyer explained. “Dr. van der Watt made it quite clear to us that the problem had specifics we could sink our teeth into.”

The presentation outlined a formal structure of recruitment and retention that could be undertaken, and several goals were identified that were critical for success. These goals included financial support for recruitment activities, loans and accommodation support for physicians and locums, physician training in C-sections, a welcome committee for physicians, and ongoing physician appreciation activities.

Once implemented, these efforts had a dramatic impact. Bonnyville went from a shortage of five physicians in 2014, to recruiting six new doctors in less than two years. According to Dr. van der Watt, full credit for the turnaround belongs to the committee and all the stakeholders.

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**[Dr. van der Watt] explained, literally right down to the dollars and cents, all the difficulties of leaving the country and arriving in two suitcases.**

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“The fact that we contacted the town, we contacted the MD, we told them, “Listen, we need help, we need resources, we’re going to go into crisis mode if we’re not able to attain this”, and they immediately came on board, provided the support, [and were] willing to listen, went above and beyond what we asked of them.”

In recognition of its well rounded approach towards attracting and retaining physicians, the Bonnyville Physician Recruitment and Retention Committee was selected as the 2015 recipient of the Alberta Rural Community Physician Attraction and Retention Award. **JJK**

# Mother. Wife. Physician. **Hero.**

Dr. Liesl Lewke-Bogle of Milk River describes herself as a mother, a wife, and a physician. You can add “hero” to the list.

After her retirement in 2005, following nearly 30 years of medical service within her community, Dr. Lewke-Bogle expected to travel with her husband, Robert, and spend time with her adult children and grandchildren.

However, when the town’s remaining two physicians left the community in 2009, Milk River found itself in crisis. Presented with the idea that Alberta Health Services would temporarily close their 24-hour emergency department to cope with the doctor shortage, Dr. Lewke-Bogle stepped up and stepped in, coming out of retirement until a new physician could be found.

“I realized that with the way the medical services are delivered, once you lose one little piece of medical services, especially in a rural community, you never get it back,” said Dr. Lewke-Bogle. “If I hadn’t come out of retirement, the chances are that we would’ve lost our emergency department and that would be a great detriment to our community.”

The plan was to stay for six months to allow time for recruitment. Six months turned into five years. During this time, a new physician came and left after less than a year, and a physician assistant was added to staff in 2013 to help the Milk River medical team with the round-the-clock responsibility of running an emergency department.

Thanks to Dr. Lewke-Bogle’s steadfast commitment to her community, and with support from Milk River’s healthcare team, the Rural Locum Program, the Quad Municipalities Physician Recruitment and Retention Committee, and RPAP, medical services in Milk River were maintained until two new physicians, Dr. Pieter Krog, and Dr. Adaku Ifebuzor, arrived.

In 2015, Dr. Lewke-Bogle was selected by the RPAP Board of Directors to be the Physician of Distinction Award’s 13th recipient. On 27 Feb 2016, over 400 people gathered at the Milk River Civic Centre for an evening of heartfelt thanks and glowing tributes for the distinguished Milk River physician.

Dr. Lewke-Bogle offers thanks to many for their support personally and professionally over the years, first among them being her husband of almost 40 years. “Without him it would not have been possible because I could not have balanced the life, the work and family life.”

As for the RPAP Physician Award, 2015’s recipient says there are many worthy recipients practising throughout the province. “I think it’s a recognition of the need to recognize the people who do serve rural Alberta, and I’m very honoured to have received this award.” /JK



(Above) Alberta’s Associate Minister of Health, Hon. Brandy Payne (left) presented Dr. Liesl Lewke-Bogle with the 2015 RPAP Rural Physician Award of Distinction.





Larry Samoil with the distinctive award he sponsors. (Above) Dr. Llewellyn Schwegmann (L) accepts the 2011 RPAP Rural Physician Award of Distinction from Dr. Clayne Steed.

# An award worthy of the distinction

The Alberta Rural Physician Award of Distinction is truly something to behold.

Constructed of sandstone and etched glass, the award has been presented to a dozen distinguished rural Alberta physicians since the program's inception in 2002.

The story behind the award is that it's a celebration of the 'unsung heroes' who provide Alberta rural communities with outstanding medical services, and who make huge contributions to medical practice and their communities. However, it's within the appendix that you'll learn a little bit about Larry Samoil.

“Big or small, we should try to put something back wherever we can. If we all do a little bit, it ends up being a lot collectively.”

— Larry Samoil

The sponsor of the RPAP Rural Physician Award owes his involvement in the program in large part to a lifesaving intervention by a rural physician over 50 years ago.

“I grew up in a rural area just outside of Vegreville, and when I was just starting Grade 12, I had a pain in my side... I had acute appendicitis,” explains Samoil, who now lives on Vancouver Island.

Samoil was in the operating room when his appendix ruptured midway through the procedure. Pumped full of penicillin, Samoil slipped into an unconscious state. Emerging 48 hours later, the Grade 12 student was minus an appendix, but full of enduring gratitude for his surgeon, Dr. Jan Stefancik, and the staff at Vegreville's St. Joseph's General Hospital.

Over the next 50 years, Larry built successful careers in telecom and promotional products, but never forgot the operation, or the physician who saved his life. So when Samoil's company, GRM Business Services, was contracted by RPAP 35 years later to create an award honouring rural physicians, sponsoring it seemed like the right thing to do.

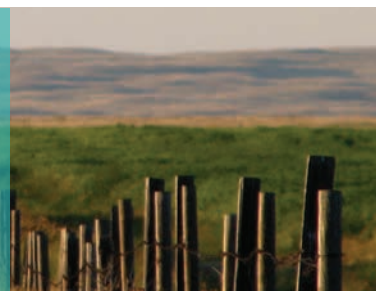
“I brought up the story when we were in the room with David Kay trying to put it all together,” Samoil adds. “It's my little contribution to how important it is to us, not just individually, but as a society, to make our world a little bit better.”

“Big or small, we should try to put something back wherever we can. If we all do a little bit, it ends up being a lot collectively.” **JK**

## RPAP REVIEW

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# All about RPAP

## The Alberta Rural Family Medicine Network

The Alberta Rural Family Medicine Network (ARFMN) offers dedicated Family Medicine residency training to prepare competent physicians for the broad demands of rural practice. The Network is a unique collaborative venture of The Alberta Rural Physician Action Plan (RPAP), the Family Medicine departments of the Universities of Alberta and Calgary, Alberta's rural physicians and Alberta Health Services.

Through the Network, a rural based Family Medicine residency training program is offered collaboratively through two branches— Rural Alberta North (RAN) and Rural Alberta South (RAS) – which are units of the University of Alberta and University of Calgary Family Medicine residency programs.

The two-year Family Medicine curriculum provides training, mainly located (or situated) in rural and regional community and hospital practices within rural Alberta. The curriculum is taught largely by rural based family physicians and specialists attached to the Family Medicine and Royal College specialty departments of the Universities of Alberta or Calgary.

Rural Alberta North and Rural Alberta South work collaboratively and offer a number of joint programs using the academic resources of both units, both parent Family Medicine departments and both Faculties of Medicine.

Rural Alberta North and Rural Alberta South each accept 10-15 residents per year through the Canadian Resident Matching Service (CaRMS).

## Attraction Support

RPAP directly supports the attraction of physicians to rural Alberta communities. RPAP Community Recruitment Consultants work in tandem with provincial physician recruiters to act as case managers for practice-eligible candidates; while offering continued support to rural communities to assist their efforts to attract and retain rural physicians.



## Recruitment Support

RPAP works with provincial government departments, local and provincial agencies, and partner groups to support recruitment of physicians for rural Alberta communities. RPAP also provides APLJobs.ca: The “one-stop” provincial recruitment website for healthcare practitioners wanting to find jobs and practice opportunities in Alberta's rural and urban centres.

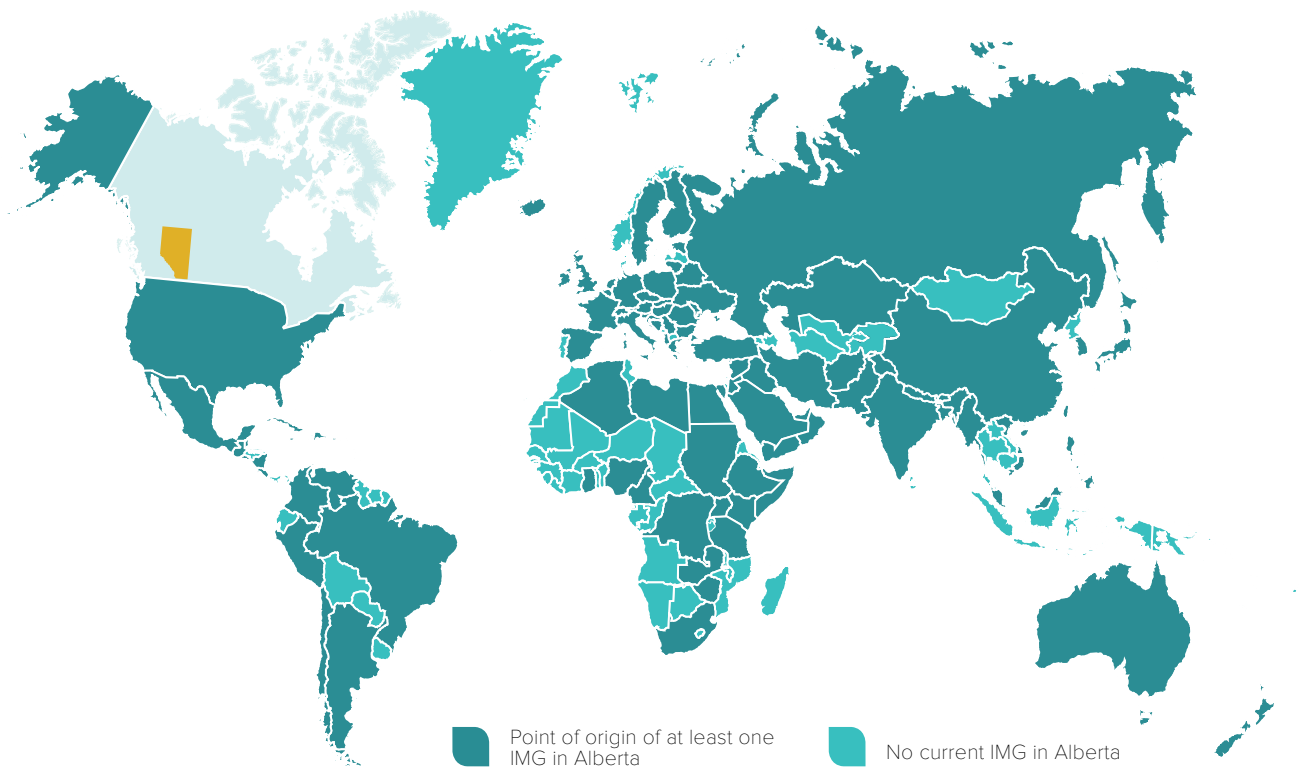


## Retention Support

RPAP offers resources to new and existing rural community physician attraction and retention committees, including online tool kits, workshops, and community grants, and the annual RPAP Community Physician Attraction and Retention Conference. RPAP Community Recruitment Consultants connect with physicians who are new to rural Alberta, offering educational resources and assistance with the transition into their new community.

## Education Support

RPAP assists students who are considering or pursuing a career in medicine through school outreach programs and financial support. RPAP also ensures practising rural Alberta physicians have the training and resources they need to enhance their medical skills, regardless of where they live.



## Going places: RPAP’s Western Canada Collaboration

The Western Canada Collaboration, consisting of provincial recruiters and regulators from British Columbia, Alberta, Saskatchewan, and Manitoba, worked together in 2015 to attract and recruit international physicians from Ireland, the United Kingdom, and the United States.

The partnership was formed in 2012, when agencies from British Columbia, Alberta, and Saskatchewan shared costs and focussed resources on attracting larger numbers of individuals at targeted international career fairs. Manitoba joined provincial recruiters and regulators from the other western provinces at career fairs and events in Denver, Dublin, and London in 2015, where Western Canadian representatives shared the advantages of practicing in our respective provinces, with the RPAP delegation providing a distinct focus on rural opportunities within Alberta.



According to Junetta Jamerson, RPAP Community Recruitment Consultant, turbulence within the Irish and British health authorities is prompting a large number of physicians to consider relocating to places with stable practice opportunities and better compensation.

“Although some prospects had no idea where Alberta was on the map, for most the word was out that we offer better pay, respectful work environments, great education for their kids, and an overall improved quality of life,” Jamerson added.

With the most recent statistics indicating that half of the doctors currently practising in rural Alberta have originated from beyond Canada’s borders, RPAP will continue to work regionally to seek out, screen, and support high-quality candidates. For more information visit [westerncanada.org](http://westerncanada.org)



# A behind the scenes look at Physician Attraction and Retention

**Register now for the 2016 RPAP Community Physician Attraction and Retention Conference | 28-29 September 2016**

Join us in Vermilion for a “Behind the Scenes” look at the work that contributes to successful physician attraction, support and retention.

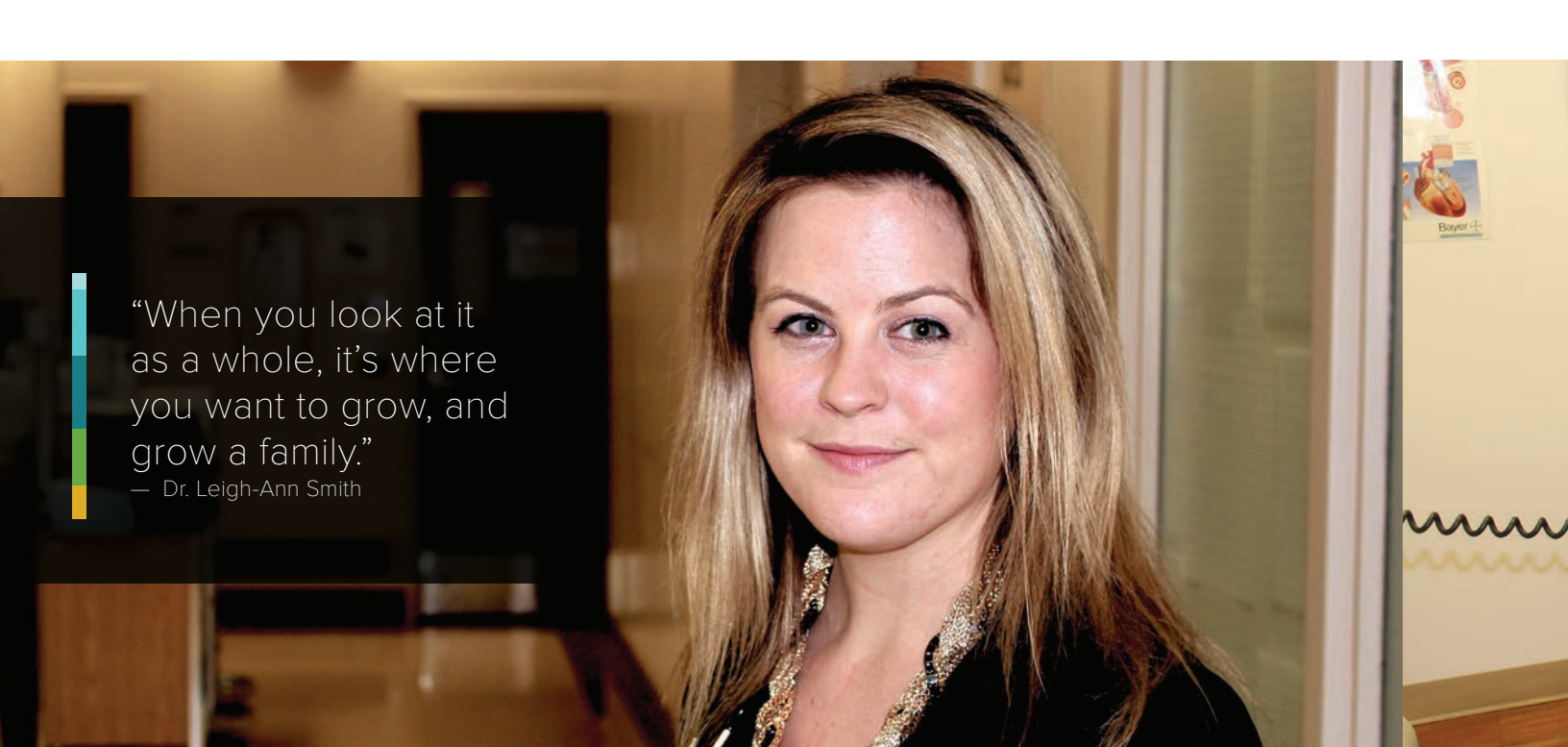
The RPAP Rural Community Conference is a place where representatives of rural Alberta physician attraction and retention committees, as well as interested community members from across the province, gather to share experiences and learn about new initiatives related to the attraction and retention of physicians, and which can be considered for other healthcare professionals.

The 2016 RPAP Rural Community Conference will focus on the roles played by not only community committees, but also individuals such as site managers, clinic managers, PCNs, doctors, municipal leadership, etc. – all which contribute to the work of attraction and retention supported by community committees.

Taking place over two full days, 28-29 September 2016, at Vermilion’s state of the art Regional Centre, the 2016 Conference will feature keynote speakers, facilitated workshops, organized outdoor activities, and a celebration of this year’s RPAP Award recipients. Networking opportunities and entertainment will also be provided for all who attend. All meals and refreshments will be provided on-site. **JK**

Visit [rpap.ab.ca/Conference2016](http://rpap.ab.ca/Conference2016) for event details and registration information





“When you look at it as a whole, it’s where you want to grow, and grow a family.”

— Dr. Leigh-Ann Smith

## Love at first site visit

### South African physicians find ‘a new country, new family, and new friends’ in Bonnyville

From the moment she arrived, Dr. Leigh-Ann Smith says she fell in love with Bonnyville. Smith, along with husband and fellow physician, Stefan Palkowski, first came to Bonnyville as medical students, both for a site visit, and to visit her brother, who was a practising physician at the time. Impressed by what they saw, the couple returned home to South Africa to complete their training, and after a few years of family practice, they returned to Bonnyville to become part of the community.

“Bonnyville was a loving, caring community from the moment we arrived here,” explains Smith. “I can truly say that we felt welcome and safe, not only amongst the physicians, but all the other health care workers, and the staff, and even the community as a whole have really opened their arms, embraced, and helped us out from the moment we arrived.”

According to Dr. Palkowski, upon arriving in Bonnyville their fellow physicians, the local physician attraction and retention committee, and the community ensured a support structure was in place to allow them to have a soft landing.

“On our first day here we had a dinner with the mayor, the town, and all the hospital staff. We got offered interest free loans to pay off over three years. We kind of got given the names of the people to be in contact with regarding home loans, car loans, banking accounts, cell phones. And they kind of helped to establish our practices with us,” says Palkowski.

Although rural living isn’t without speed bumps, Dr. Palkowski says that the kind of lifestyle a rural community can offer you is second to none.

“When you look at it as a whole, it’s where you want to grow, and grow a family.” Palkowski adds. “Bonnyville offers a lot more than what you just see on the surface, and really it’s community and the spirit of the community that in the end swayed us to relocate and move from our country, family and friends to a new country, new family, and new friends.”

Although the paperwork may at times be frustrating, and the process to come to Canada can be a long one, Dr. Smith says in the long run, the benefits far outweigh the frustrations.

“Don’t be scared. I know big changes are usually quite scary. But really, the Canadian culture and all the community, they make it really easy for you to adapt and call a rural town your home.” **JJK**





“I imagined I would be a doctor working in a clinic and emergency room, and I got to do that here. **It reminds me of why I wanted to be a doctor when I was a kid.**”

— Dr. Beren Hollins

## Alberta is “everything we’ve been looking for”

**Dr. Beren Hollins of Vegreville traded a city practice in Scotland for the challenges of life in rural Alberta.**

While working in a city practice in Scotland in 2012, Dr. Beren Hollins decided he needed a new challenge. He began discussing opportunities in Canada with other physicians and family members in British Columbia.

Deciding Alberta offered the excitement and diversity of practice he was looking for, Dr. Hollins began speaking with Alberta Health Services about making the jump across the Atlantic.

Although he had assumed he would end up in the big cities, a visit to Vegreville, a town of close to 6,000 people, 90 km east of Edmonton, changed that. Dr. Hollins learned about Vegreville from the blog, GP in Canada ([gpincanada.tumblr.com](http://gpincanada.tumblr.com)) authored by English expat, Dr. Daniel Edgcumbe, who practices in the community.

His interest piqued and Dr. Hollins and his spouse, Melanie, came to Vegreville in August 2013 to have a look. For three (very hot) days they were introduced to the best Vegreville had to offer. The community had done their homework prior to the Hollins’ arrival, looking into the kind of lifestyle the couple wished to lead.

“When it came to doing a site visit I knew this would be the place. They paid a lot of attention to what I wanted, not what they wanted.”

The decision was made to come to Vegreville, and in the spring of 2014, the couple arrived, ready to start a new life in Vegreville. Immediately the community found the newcomers accommodations for themselves and their canine companions.

“When we came here they were really fantastic at getting us accommodation.”

While Dr. Hollins was away on a three month practice assessment, the community stepped up, making Ms. Hollins feel at home.

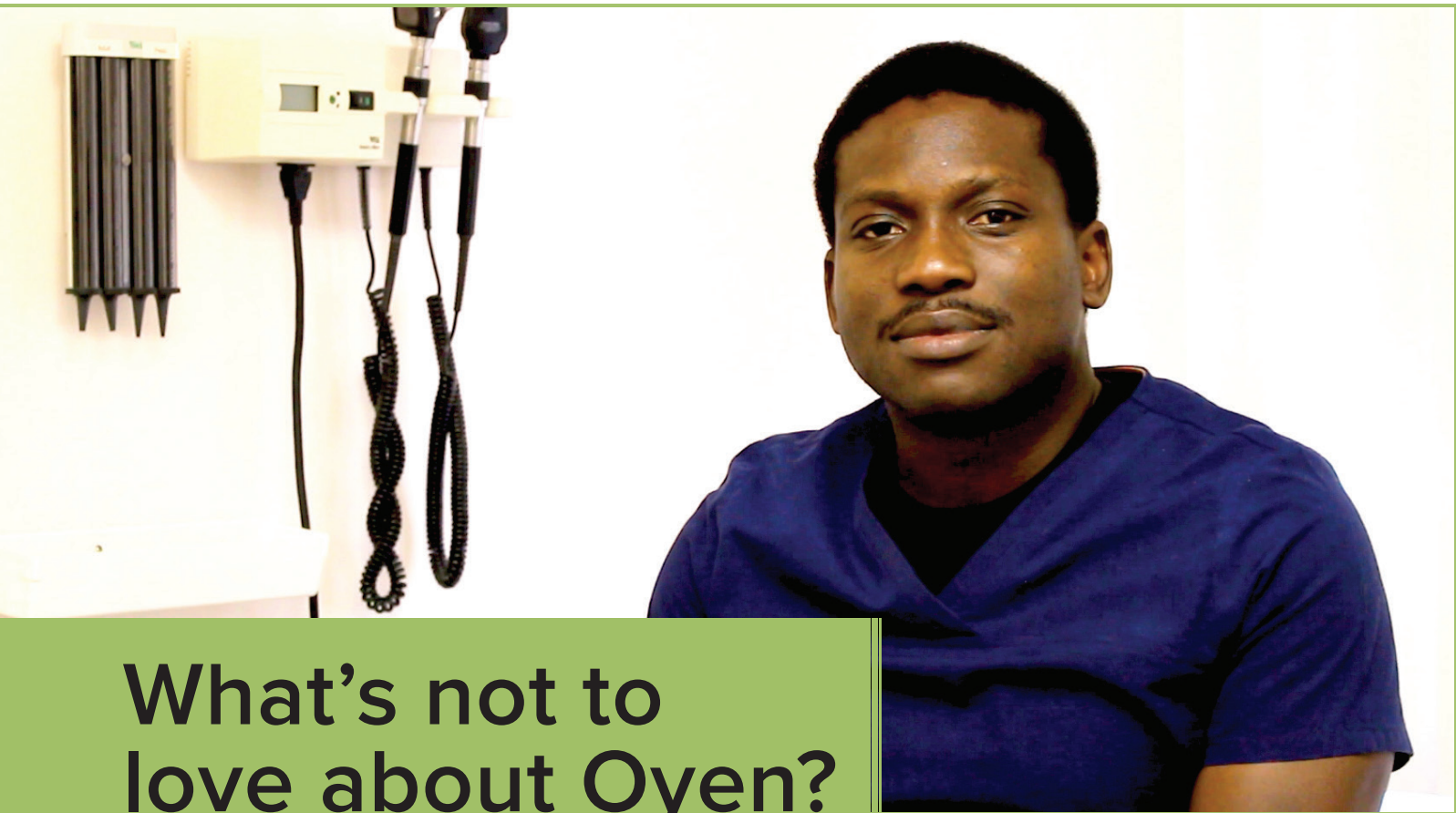
“My wife was by herself, it could have really been a tough time, but the town was super supportive. They never let her be alone, unless she wanted to be.”

A year after making the move, Dr. Hollins says his family has adjusted to life in rural Alberta:

“Neither of us are homesick. It has everything we’ve been looking for.”

If you like a challenge, Hollins says Alberta is a great place to come and work.

“I imagined I would be a doctor working in a clinic and emergency room, and I got to do that here,” says Hollins. “It reminds me of why I wanted to be a doctor when I was a kid.” **JK**



## What's not to love about Oyen?

### **As a young man, Dr. Akinseinde Osakuade knew he wanted to fix people.**

Coming from a family of engineers in his native Nigeria, Osakuade saw physicians as “human body mechanics”, and from the age of 14, knew that was what he wanted to be.

“That aspect of being able to look at an individual, identifying what’s wrong with them, fixing them, they get to go home, they get to go home to become moms, dad or kids, I think that attracted me,” explained Osakuade. “[It’s] a job that makes a difference, a job that puts a smile on people’s faces, a job that you get a lot of personal satisfaction with, being a physician ticked all those boxes for me.

Osakuade moved to the United Kingdom to do his postgraduate training, and afterwards practiced medicine there for several years. However, as the desire to return to a rural community similar to the one where he was raised grew stronger, the family physician found the right fit a world away, in the Special Areas of southeastern Alberta.

“I appreciated the fact that Alberta had put a lot of investment into providing healthcare, good quality healthcare for people. As well, there was a lot of support for doctors,” explained Osakuade. “Literally everything I needed as a physician to be able to provide good quality healthcare was within reach, and I can easily access additional services if it’s required, so that’s generally what made me fall in love with working in rural medicine here in Alberta.”

Having discovered Oyen through their recruitment website ([physiciancareersinoyen.com](http://physiciancareersinoyen.com)), the Osakuade family arrived in Oyen in 2015, and was immediately impressed with the support they received from the people of Oyen and the Big Country Medical Board.

“When I first got to Oyen the house was ready, I got a wonderful welcoming, a huge big basket with virtually lots of goodies, virtually everything I needed, we didn’t buy groceries for the first two weeks,” says Osakuade. “Effectively we got in, started making dinner, and were ready to start our new life here in Oyen.”

“Dr. Akin”, as Osakuade is known within the community, says his family has adjusted well to life in Canada. With great schools and plenty of activities for his children, Osakuade says Oyen has everything his family needs.

“My daughter talked about how people here are friendly, and it’s true,” he added. “People are absolutely friendly, the healthcare team that I work with [is] fantastic - so what’s not to love?” **/JK**



# From South Africa to Northern Alberta

**From his start in South Africa, to northern BC and now in High Level, Dr. Heinrich Brussow has always had a passion for rural medicine.** And as his more than 25 years in physician recruitment testify, it's not a passion that he keeps to himself.

"Initially it was challenging," says Brussow, "but then you get the guys in and the people in that will work. And, in our last two years, every resident that was here would have wanted to have come back, if we'd had a spot for them."

One of Dr. Brussow's recruits and coworkers is Dr. Paul Jordaan, who also came from South Africa in February 2014 to serve the people of High Level.

"It exposes you to so many new things ... that you never even knew existed," says Dr. Jordaan.

"It was a bit of a gamble coming to a small town that you've never seen or heard of before. [But it's been an unbelievable experience.](#) I've never had any regrets."

— Dr. Paul Jordaan



"[I]t's not everybody that likes rural medicine, but it's horses for courses you know, and most of the good recruiting is done by word of mouth, it's a physician knowing somebody that he wants to bring in. I think another thing that has really helped a lot is the resident program, because people come out here and they see that it's not so scary, and it's actually very nice."

A family physician, Dr. Jordaan has a special interest in emergency medicine, orthopedics and surgery.

"It was a bit of a gamble coming to a small town that you've never seen or heard of before," says Dr. Jordaan. "But ... it's been an unbelievable experience. I've never had any regrets." /LW



High Level's  
Dr. Heinrich  
Brussow (left)  
and Dr. Paul  
Jordaan (right)





**RPAP**

RPAP | Health Workforce for Alberta is the Alberta Rural Physician Action Plan: An integrated and comprehensive rural health workforce agency that has developed initiatives to address the factors influencing physicians' decisions about moving to and remaining in rural Alberta communities.

An independent, not-for-profit company funded by the province of Alberta's Ministry of Health, RPAP supports the ongoing efforts of Alberta's rural physicians, their families and communities to improve the quality of rural health care.

**Find out more**

Complete audited financial statements and Key Performance Indicator (KPI) data for 2015-16 are available online at [rpap.ab.ca/reports](http://rpap.ab.ca/reports)