Season’s Greetings

Instead of winding down, life tends to shift into another gear this time of year. The holidays become very busy, as we tackle to do lists and plan for festivities. As you read this issue of Inspire, I want to take the opportunity to thank you and everyone working in the Winnipeg Health Region for your dedication and commitment.

The holiday season is a time many of us reflect on the year that has passed. The holiday season offers us a time to think about the experiences we’ve had, the lives we’ve touched, and the people who have enriched our own lives.

As you know, the health care sector is a 24-7 service — and to the men and women providing care, away from family and friends during this time of festive gatherings, we thank you.

Certainly, it’s not easy to juggle it all when you’re working in health care, but it’s important to take care of yourself as well as the people you care for.

So, in the hustle and bustle of the season, I hope you will set aside time to relax and enjoy the company of others.

To everyone working in the Winnipeg Health Region, I wish you all a happy, peaceful and safe holiday season!

Arlene Wilgosh
President & CEO, Winnipeg Health Region

The StAR Program wishes you Happy Holidays!

As the holiday season gets closer, many people’s gift lists are quickly growing. This year why not use the discount program developed by the Winnipeg Health Region’s Staff Appreciation and Recognition (StAR) program, available to all staff working as part of the Winnipeg Health Region:

- If you have a sports fan at home, discounted tickets to a Manitoba Moose hockey game would be perfect.
- Got the travel bug or just want to escape Winnipeg’s harsh winter for a while? UNIGLOBE Travel has many great deals on the places you’ve always wanted to visit.
- Tired of the endless baking for the holidays? Why not use our Costco discount to pick up some delicious desserts?
- Then after all the holiday festivities, treat yourself to a one-year membership to Shapes, at a discount.

Interested in culture? Discounts are available for tickets to the Royal Winnipeg Ballet’s performance of the Nutcracker.

For further information and for more gift ideas please visit: http://www.wrha.mb.ca/professionals/star/discounts.php
ETHICS... EVERY DAY, EVERYONE

W e’re all faced with ethical questions. Sometimes, determining the ‘right’ thing to do is easy, like if you spotted a car crash and came forward as a witness, or telling a co-worker that they have a piece of their lunch stuck in their teeth.

But ethical questions in health care aren’t as easy to work through. For example, what do you do when a legally competent person who is able to make decisions for themselves refuses life-saving treatment such as refusing to be treated for a heart attack? Or what do you do when a person’s substitute decision maker demands “heroic” measures when the health-care team knows that any treatment will only prolong a painful death?

Ethics challenge us to think about what we value and believe, and why. Ethics also make us consider how the values and beliefs of others align with, or differ, from our own. Ethics committees are involved in a range of activities, including education, policy review and consideration of clinical, organizational or research ethics issues. They’re there to help guide decision making and provide tools and resources. The role of an ethics committee is not to tell others what to do.

Their role is to assist others in applying an ethics lens or framework to an ethical concern.

When Inspire asked Sheila Toews, Regional Director, Ethics Services to suggest someone to profile in this story, she was faced with an ethical dilemma: how could she possibly suggest one person and not mention so many others?

“I’ve been working in Ethics Services for over eight years. What continues to inspire and encourage me is the commitment and enthusiasm so many people in this Region have for ethics,” says Sheila. “It deeply matters to them and they want to be involved.”

However, Sheila recognized that singling out one person actively involved in ethics could showcase the commitment of many. She resolved her ethical dilemma and told Inspire about Sylvia Ptashnik. Sylvia recently agreed to “co-star” in an ethics video to ensure that an “Ethics in a Box for Long Term Care” project could be completed on schedule.

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Breaking down the language barrier

THE IMPORTANCE OF INTERPRETERS

By: Amie Lesyk & Kathryn MCBurney

It’s frustrating to not understand what health-care workers are asking of you. David Owen, an 81 year old from Pauingassi First Nation – a small fly-in community about 280 kilometers northeast of Winnipeg, has felt that frustration and fear.

“Sometimes, the older people just nod yes or no, so medical staff will leave them alone; because they don’t understand,” says George Boulanger, an interpreter and resource worker for the Winnipeg Health Region’s Aboriginal Health Programs – Health Services.

Boulanger has seen apprehension from First Nations patients who can’t understand what they are being told about their health. He says health-care providers can avoid language problems with their patients by using interpreters.

Time between interpreters and patients is crucial to help patients understand their health and care plans, and to build trust in the rest of the care team.

Owen comes regularly to the Health Sciences Centre dialysis unit, receiving a four hour treatment, three times a week. Kidney disease completely changed Owen’s life.

“I lived a simple life,” he explains about life before his illness, talking through his interpreter. Having spent his whole life in the community, speaking only Ojibway, it was difficult for him to come to terms with his necessary move to Winnipeg for treatment.

“The first year was the hardest,” says Boulanger for Owen. “It was culture shock.”

As if dealing with a life-changing disease wasn’t enough, Owen was uprooted from his home community and faced a language barrier when he arrived. He moved into subsidized housing at the Quest Inn on Ellice Avenue and has since adjusted to his new routine. It’s been several years now, and while it’s still difficult for him to be so far from friends and family, he says he is grateful to be alive.

“I’m most thankful for treatment, my subsidized transportation, and my interpreter,” says Owen through Boulanger.

Boulanger can relate to his patients. He grew up in Berens River First Nation and relocated to Winnipeg due to a family member’s illness back in 1985. Having spoken Ojibway as his first language his whole life, it was a natural fit for him to take an interpreter course at Red River College.

But even with that training, interpreting health care in First Nations languages isn’t easy. While the Winnipeg Health Region provides interpreters in Ojibway, Cree, Island Lake dialect and OjiCree, in many cases there are simply no First Nation language words to describe medical procedures and terminology.

Health Service interpreters are trained to verbally break down medical procedures, describing the process to patients. “We’re all really careful. It could be a life or death error if we interpret the wrong information,” says Boulanger. “We repeat ourselves so they know exactly what is being done.”

Apart from interpreting, Boulanger also works with patient’s home communities to ensure patients and families have access to appropriate lodging or other necessary items.

“I enjoy it,” he says about being a part of a patient’s health-care team. “When everything goes well, you feel you’ve contributed.”

Aboriginal language interpreters are on site at HSC and SBGH. Mobile Interpreter/Resource Workers provide service at the other Winnipeg hospitals, Deer Lodge Centre and Riverview Health Centre. They can all be accessed by health-care providers by calling Aboriginal Health Programs at 940-8880.

(Above) George Boulanger and David Owen.
Kris Robinson has been working in the area of maternal and newborn health in the Winnipeg Health Region for 25 years. She is a practicing midwife and has spent the last five years as the Clinical Midwifery Specialist. Like many midwives, she had to get her training out of province, travelling to England, as training was not offered in Manitoba at the time. Fortunately in 2010, prospective midwives will be able to be educated through the University of the North. This will help fill the resource gap for a health service that is in growing demand.

Midwives are also looking forward to the opening of the Birth Centre at the corner of St. Anne’s and St. Mary’s Road. This will be the fifth practice site for a new midwifery practice group. The site will be a clinic and will offer a range of services including space for women who wish to have a midwife-assisted birth. There will be four birthing rooms which can be used 24/7. The 16,000 sq. ft. facility is slated to open in 2011.

“There are 20 midwives in the region. Midwifery is very popular,” says Kris. “The demand for the type of care that a midwife supplies is much higher than the current supply.”

Many people may think of midwife-assisted birth taking place at home. In fact, 80 per cent of clients choose to have their babies in the hospital under the care of their midwives. The relationship between midwives, doctors and nurses in the region is very collegial, says Kris. “If a mom has a complication or we need any help, the team is available to provide assistance.”

Midwives provide care to the mother throughout the entire pregnancy. The mom gets home visits before and after the birth of their child, the midwife is there throughout the labour and birth, and visits the mother and new baby at home. Throughout this time, the client gets to know the midwife and moms closely.

The role of a midwife

Megan Wilton has been a midwife in the Health Region for three years at Access River East, and is also the President of the Midwives Association of Manitoba. She says that every day is different. Some days they do clinics, other days they do home visits. Midwives are also on call. “We do primary care for pregnant women. We are with them early in their pregnancy all the way until after the baby is born,” says Megan. “Many moms come back again and again for our services.”

Midwives look after roughly 30 to 40 women per year through the entire pregnancy, birth and a several visits to check up after birth. The hours are unpredictable and they always need to be available, which can have a huge impact on their personal lives. But there is a plenty of job satisfaction, says Megan.

“A lot of what makes our care special is the close relationship we have with our clients and other midwives. We get to see the difference we make in people’s lives and how much our clients grow and change from their first baby to the next. We are always learning as midwives; it’s a fascinating job.”
In recognition of Midwifery services in the Health Region the following are some acronym terms used in the profession.

DO YOU HAVE ACRONYMS OR SHorthand YOUR Workplace USES THAT MAKES OTHER PEOPLE SHAKE THEIR HEAD? SEND THEM TO US, AND WE MAY FEATURE THEM IN AN UPCOMING ISSUE.

E-MAIL TO inspire@wrha.mb.ca

We ALL have a DUTY to protect ourselves and those we care for...

In 2009, H1N1 flu stirred in us a fear like we had never felt before. Thousands of health-care workers lined up to get the flu shot to protect themselves, their loved ones and their patients.

The reality is that every year we face a flu season that has no known outcome. We are never sure how serious this disease may be and how it will affect our system and the public in general. Influenza can be a serious illness in working adults. Vaccination can lower the risk of getting influenza by about 75 per cent and decrease the likelihood of spreading the disease to others. Each year, some of the most vulnerable people in our health-care facilities die from complications related to influenza. The simple act of getting a flu shot can keep our health-care workers healthy and reduce the risk to our patients, residents and clients.

Despite this knowledge, some health-care workers do not take this simple step to protect themselves, their loved ones and those we serve. The Winnipeg Health Region’s Board has recognized the importance of this protective measure and our duty as health-care workers by setting a target vaccination rate of 60 per cent. We still have a long way to go to reach this important milestone.

There is still an opportunity to get your shot either at scheduled staff clinics (which are listed on Insite) or through the Occupational Environmental Safety Health Office at their site, or by going to your doctor.

Please get your vaccination today and be part of the solution and demonstrate to everyone our daily commitment to a patient-first focus. Thank you for your ongoing commitment.

Thousands of health-care workers lined up to get the flu shot to protect themselves, their loved ones and their patients.

For you. For them.
GET your Flu SHOT!

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BBB/BBG
Bouncing baby boy/bouncing baby girl

ARM Artificial Rupture of Membranes (when the doctor or midwife breaks the waters)
CNM Certified Nurse-Midwife; a midwife that is a nurse before becoming a midwife. Mostly does birth center and hospital births; can do most medical procedures (but not surgery)
DEM Direct-Entry Midwife; a midwife that does not become a nurse first
EFM External Fetal Monitoring; checking the heartbeat of the baby, usually through an elastic/velcro band placed around the mother’s belly in labor.
NST Non-Stress Test, a prenatal test near term to determine the condition of a baby at risk for problems, using EFM equipment
PROM Premature Rupture of Membranes. This is when waters break before term
VBAC Caesarian Birth after caesarian.
SNS Supplemental Nursing System; a way to feed the baby formula while the baby is nursing at the mother’s breast.
Celebrating Long Service Employees

Starting a new job can be a mixture of excitement, fear and anxiety. But for this year’s Winnipeg Health Region Long Service Award recipients, the feelings of starting a new job are long gone and have been replaced with pride. Approximately 400 people received recognition this year; some serving 30 or more years in the health region.

There are a wide variety of people who work in our region; however, not all positions are direct care service. There are many employees like Teresa Hallem, who work in areas such as administration and finance. She is beaming with pride for having worked in the Winnipeg Health Region for 30 years.

Teresa has taken advantage of the ability to move around in the health region. During her eight years in Emergency and Admitting, she worked at the Children’s Hospital, Rehabilitation Centre, Women’s Hospital and the Health Sciences Centre. “I got to see more than most people do.”

In 1989, Teresa applied for a finance position at the Health Sciences Centre, and was hired to manage the signing authority list, send out reports, and work in Medical remuneration and a few other jobs.

“In 1980, we didn’t have computers, so I had to type patient’s information manually. Now, everything is computerized and makes the job much easier. I’ve met people in all walks of life and got to know some of the regular patients. I’ve learned a lot about people,” says Teresa.

Shirley Robinson is another long service employee who has spent 35 years with the Winnipeg Health Region, working in Pharmacy. She started working at the Grace Hospital on January 2, 1975.

“The Grace Hospital employees are like one big family, I have worked here over 35 years, and much of our time has been spent at our jobs. I have seen many colleagues get married and have children. We have also experienced the loss of loved ones and have been there for each other through these difficult times.”

Shirley could have retired in 2003, but stayed at the Grace for a number of reasons. “The people I work with are great and we have been through many changes together, both in our department and in our personal lives. I would miss the people I work with if I left.”

While these two employees have dedicated their careers to the Winnipeg Health Region, their advice to new employees is short and simple.

Shirley’s advice to newcomers in the pharmacy department is to always work hard and not to give up. She says there are always new things to learn and training may be time-consuming, but once new employees get the hang of things, they are part of the team!

Teresa’s main tip for people interested in health care is to first get your medical terminology certificate. “Having my medical terminology certificate helped me a lot; I was able to learn the job very quickly. Now my daughter is exploring working in health care. I’ve told her many stories and about the kind of people I’ve met and she’s very interested.”

“Roughly 400 people received recognition for their service this year.”

(RIGHT) Teresa Hallem and her award.

(LEFT) Shirley Robinson has been working in Pharmacy for over 35 years.
It looked like an open and shut case. The client’s wound appeared to be a venous ulcer. Nurses determined what they thought was the right treatment, but something just didn’t add up.

Imagine a detective job in health care where you’re asking questions, looking for clues, and investigating how to best treat your patient’s wounds. You’ve just described working in wound care.

Because wounds can look very similar, with only subtle differences that a trained eye in wound care can discern, the initial treatment plan for this case was for a venous ulcer. However, after treating it, nurses noticed that they weren’t getting the expected healing results. But thanks to wound care training, they found the right questions to ask, and just before the commercial break, found the smoking gun: they were dealing with blastomycosis. (cue dramatic music, cut to commercial).

After station identification, and, establishing a new treatment plan, the results were quick and dramatic. (cue high pitched scream by Roger Daltry: “we won’t get fooled again.”)

The dramatic passion surrounding wound care is infectious, causing nurses like Doug Kuny to take wound care education courses offered by the Winnipeg Health Region. He started taking Level I courses, beginning with Wound Healing Overview in September, 2009. Since then, he’s taken Wound Scene Investigation and Level II courses: Venous Leg & Arterial Ulcers and Advanced Pressure Ulcers.

Doug plans to write the Region’s Home Care E1 Competency Exam in January 2011, which would classify him as an E1 Competent Home Care Wound Care Best Practice Team Member. It will also enable him to assist with performing wound care consultations on home care clients by assessing and initiating appropriate evidence-based wound care products, as per the Region’s Wound Care Policy.

Wound Care courses helped Doug build his awareness of wound care. That, combined with what he’s learning on the job from his experienced colleagues, has contributed to an exciting time when coming to work. “It is fun because you never know what discovery you’ll make.”

Statements from wound care “detectives”

Celine, a nurse who works out of the wound clinic at Mount Carmel Clinic, says: “I like a challenge. Why isn’t something healing? Let’s try this and figure it out.”

Darcy, who has been working in wound care for three years and is passionate about helping clients understand the products used to help treat them and why: “For every type of wound what we do to help is different,” she says. “When you figure out what’s going on and see it get better, it’s great.”

Did you know?

- Wound care education offered by the Winnipeg Health Region is free.
- It applies toward a competency credit.

Visit www.wrha.mb.ca/osd/wound-care for details and to register.
New research suggests that late pre-term babies might be more vulnerable to certain health issues than previously thought. Now, Winnipeg Health Region staff at St. Boniface Hospital are developing new approaches to care to ensure these newborns get off to a healthy start. You can read more about their work in the next issue of Wave.

You can read Wave online at www.wrha.mb.ca/wave or pick up a copy at McNally Robinson Booksellers or a health care facility near you.

The Winnipeg Health Region celebrated the official opening of ACCESS Downtown at 640 Main Street September 27, 2010.

Staff and volunteers roll up their sleeves to get the seasonal flu shot.

Graduation Celebration! Certificate of Achievement Event held on November 3, 2010 recognized staff who completed the WRHA/RRC Health Services Management Collaborative Program.

John Van Massenhoven, Vice President and Chief Human Resources Officer; Winnipeg Health Region, and Arlene Wilgosh, President & CEO, Winnipeg Health Region take top honors at this year’s United Way Chili Cook Off held at 650 Main.

Sylvia works full time at Deer Lodge Centre as Director of Resident Services. She chairs the Deer Lodge Centre Ethics Committee and is also a member of the Regional Ethics Council. She always looks forward to challenging questions and interesting discussions with family and friends. She believes ethics are for everyone.

“It’s in every breath you take and thought you make. Counting the hours I devote to ethics each day is impossible,” she says. “It’s in every choice I make.”

Sylvia’s enthusiasm for ethics blossomed when she entered into nursing, partly because when caring for people, she found it requires you to thoughtfully reflect on others’ points of view, that you may not fully understand or agree with, yet respectfully accept when helping them. Ethics are central to this work. Doing the right thing is important to Sylvia, and as a person working in health care, she believes ethics are part of the job description.

Sylvia knows that many others see ethics this way because she hears it in many discussions at Regional Ethics Council or Deer Lodge Ethics Committee meetings.

“Members bring out many different perspectives on almost every issue. We get to think deeply about what we believe is right and wrong. Why do we believe what we do? Why others believe what they do? We are exposed to all sorts of thoughts and beliefs and I often leave the meetings feeling more rounded and truly honoured to be a part of a group who are dedicated and committed to providing ethical care for everyone by remaining open to other viewpoints and beliefs!”

“It’s about all aspects of life and caring for each other, and it is the fundamentals/foundation of what health care service is all about.”