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## frontlines

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A salute to role models of excellence in the Region

## The PeopleFirst Awards



**Barbara Balfour**  
COMMUNICATIONS

It was the quality of care they received for serious injuries from a vehicle collision that made Pete and Kay Martens want to give something back.

Their gratitude for the compassion shown all the way from roadside assistance to the medical care that followed prompted them to become volunteers at the Peter Lougheed Centre, where they have shown the same compassion almost daily over the past five years.

For their unwavering commitment and dedication, the couple, who are in their 70s, were honoured by the Calgary Health Region at the PeopleFirst Award ceremonies on March 23.

The Martens were among 124 award recipients, who ranged from a coalition committed to making Airdrie smoke-free, to a group of women from the PLC's Leukemia team who raised more than \$30,000 in honor of a colleague who passed away from the disease.

Though their backgrounds and causes varied greatly, what the recipients did share in common was recognition by their peers for being role models in their fields.

"Tonight's recipients have shown

leadership, enthusiasm, and compassion to those they interact with on a daily basis," said Margaret Munsch, Senior Vice-President, People & Learning.

"From recent arrivals to lifetime achievers, the people being honoured tonight have done much more than what was expected of them. They have done so through strength, teamwork, and innovation. And through it all, they have put people first."

More than 500 Region staff and volunteers were nominated for the awards



Paul Rotzinger photos

Left to right, clockwise: PeopleFirst award recipients Pete and Kay Martens, who were honoured in the Heart & Healing Hands category; Sandy Baggott of the Alberta Children's Hospital, who was honoured in the Heart & Healing Hands category; and Kari Pistore and Liz Spellen from the International Neonatal Care Team, who were honoured in the Spirit of Learning category.

this year, which covered five categories: Heart & Healing Hands, Caring for Community, Healthy Leadership, Lifetime Achievement, and Spirit of Learning.

The winners were selected by a committee who looked for evidence

of going above and beyond everyday workplace duties. Many of the nominees played an instrumental role in working with marginalized communities in Calgary and across the globe.

**SEE PEOPLEFIRST, PAGE 2**

**Dr. Steven Wheeler receives General Service Medal**

## Calgary MD honoured for work in Afghanistan

**Barbara Balfour**  
COMMUNICATIONS

On a cold bed, in the narrow hallway of a crumbling Afghani hospital, an eight-year-old child lay disoriented with only a thin blanket to keep him warm.

Only days earlier, he had been hit by a jeep in Kabul and subsequently treated for traumatic head injuries by visiting Calgary anesthesiologist Dr. Steven Wheeler.

No family members were found to take care of him in the hospital or be by his side. More than a year later, it is hard for Dr. Wheeler to remember this former patient and his uncertain fate without getting emotional.

During his two-month stay as a civilian on the surgical team at the Canadian Forces Camp Julien in Afghanistan, stories like these were not uncommon, he says. The mark from his experience treating civilians and troops in a war zone remains indelible to this day.

"I was struck that people with so little and who have such different lives from us can somehow learn to adapt in a country that has been at war for the past 20 years," said Dr. Wheeler, who works out of the Peter Lougheed Centre. "They were walking around in sandals in -20 degrees Celsius with snow on the ground, and living in mud huts with windows stuffed with only plastic to shut out the wind. It was heartbreaking in many ways."

On March 23, Dr. Wheeler was presented with the General Service Medal from the Department of National Defence for his support to the Canadian Forces in the presence of an armed enemy. He was received with a standing ovation from the crowd who had gathered to celebrate notable accomplishments by Region employees at the annual PeopleFirst awards ceremony.



Paul Rotzinger photo

Calgary Anesthesiologist Dr. Steven Wheeler was awarded the General Service Medal from the Department of National Defense for his service in Afghanistan. (l to r) Lieutenant Colonel Henry Flaman, Land Force Western area Surgeon, Dr. Steven Wheeler, Brigadier General Hilary Jaeger, Canadian Forces Surgeon General, and Colonel Russ Brown, Canadian Forces Practice Leader for Anaesthesia.

**SEE COMPASSIONATE, PAGE 2**

CONTINUED FROM COVER

## PeopleFirst

Some examples of these selfless endeavours include:

- A winner in the Spirit of Learning category was the Neonatal Nursing Team (Kari Pistore, Wendy Rempel, and Liz Spellen) who traveled to Chandigarh, India as part of a collaboration with the Postgraduate Institute of Medical Education and Research. They volunteered their time and services to further develop the general knowledge and skills set of nursing and medical staff who take care of sick newborns.

- In the Lifetime Achievement category, nurse clinician Linda McCracken has been an innovator in the fight against domestic violence and was instrumental in instigating screenings for it in Emergency Departments across the city in 2003.

- The Diversity Services Team won an award in the Caring for Community category for implementing and strengthening dozens of initiatives last year, including the expansion of its Interpretation and Translation Services Team.

The evening ceremony, held at Spruce Meadows, featured a cocktail reception, live music and a stirring presentation emceed by Olympic athlete Lindsay Alcock.

During the presentation, Jack Davis, President & CEO, thanked the recipients for their hard work, commitment, and setting a new standard for health providers across the nation

"Thank you for making the Region a better place to work for all of us," said Davis. "We're able to do a better job delivering health care because of your hard work and commitment. Be proud of yourselves; you are ambassadors of the Calgary Health Region, whether you are at work, in your community – or representing the Region halfway around the globe."

Living donation provides opportunity to improve lives

# New kidney makes for the ultimate Christmas gift

Sheila Rougeau  
COMMUNICATIONS

For more than 30 years, Lance Males had been monitoring the slow decline of his kidney function, while dreading the inevitable outcome.

Then came the phone call he never expected.

"I've been trying to figure out what to give you for Christmas," said good friend Bob MacDonald. "Would you like a kidney?"

MacDonald knew that donating one of his kidneys wouldn't put him at risk; he also knew his blood type (O negative) is considered a generic donor. Males, on the other hand, had never investigated the possibility of a living donor.

Having dealt with chronic kidney failure since he was 20 years old, Males always knew it was a matter of time before he would have to resort to one of two options – a kidney transplant or dialysis, a procedure which artificially removes toxins from the blood.

But because he had already been on the kidney transplant waiting list for five years and had a rare blood type (B negative), he accepted the fact that finding a donor with the right blood type was remote. He resigned himself to going on dialysis, even prepared for it by starting his own company from home where he could be more in control.

"I was in total disbelief and shock that he would do this for me," said Males, recalling the initial conversation with his friend. Concerned about MacDonald's health, the two friends educated themselves on the issues and risks before making the final decision to proceed with the transplant.

"It wasn't just about us," explained Males. "I had to make sure it was okay with his wife, too."



For Christmas, Lance Males (left) received a kidney from his friend Bob MacDonald (right).

On Jan. 3., MacDonald underwent a five-hour laparoscopic surgery to remove one of his kidneys, while Males, in an adjoining room, simultaneously underwent a four-hour surgery to have MacDonald's healthy, functional kidney placed into his lower abdomen. Less than two weeks after surgery, Males resumed light work and MacDonald was in training to resume running. "I walked two miles on the treadmill the night I got home from the hospital," he said with a laugh. After three weeks of rest, MacDonald returned to both running and his job at Nexen, where he is employed as an exploration geologist.

For Males, his new kidney has opened the doors to a whole new life and level of activity he never before thought possible.

"I can't say thank you enough," Males empha-

sized. "Prior to the transplant I felt like I was getting old fast. I had no interest or desire in anything anymore. Since receiving the new kidney, my energy levels are up, I feel much healthier, my skin color's better, I'm not cold all the time, I can eat what I want, and my enthusiasm for life is back."

That would be MacDonald's kidney at work.

"If I had another one to spare I'd give that one away too," said MacDonald proudly.

"It really was that easy."

Unfortunately, not everyone is eligible to receive a kidney transplant. For these patients, we focus on quality of life. See story on nocturnal hemodialysis on page 3 for more information.

CONTINUED FROM COVER

## Compassionate medical personnel

"During 2004, the simultaneous deployment of Canadian Forces anesthesiologists in Haiti and Afghanistan took our resources beyond the breaking point," said Colonel Russell J. Brown, Canadian Forces Anesthesia Advisor and an associate clinical professor at the University of Alberta. "Steve's contribution to our surgical capability allowed us to maintain the high state of readiness that our troops deserve. Afghanistan is a dangerous place and our soldiers take great comfort knowing that should the need arise, skilled and compassionate medical personnel will be there for them."

Jack Davis, President & CEO, Calgary Health Region, said Dr. Wheeler's example of leadership and compassion is characteristic of outstanding health care providers. "We are proud to have such a quality individual practicing with us and are honoured to have him bring what he learned in Afghanistan, back to the PLC," said Davis.

A strong believer in the work of the Canadian Forces, Dr. Wheeler once told a military physician to give him a call if they ever had a shortage of medical staff. That call came in the fall of 2004.

"To be asked to go and care for our troops was an incredible honour. I felt it was important to go so that Canadian troops could be cared for by a Canadian anesthesiologist," said Dr. Wheeler.

Although the immediate reaction from colleagues and family was of concern for his safety, Dr. Wheeler said he never considered not going just because of the risks involved.

"Certain risks you can anticipate beforehand... others you can't. You can't predict someone shelling your camp or a suicide bomber. But even though I was in a war zone with armed conflict,

I was still taking much less risk than most of the Canadian Forces team members."

While providing medical care and training at the camp from Nov. 2004 to Jan. 2005, Dr. Wheeler also drew on his business background to help develop a strategic plan for a local hospital.

Armed with an MBA as well as a Bachelor's degree in engineering in addition to his medical degree, Dr. Wheeler travelled a unique path on his way to medical school.

After finishing his training in 2000, he started working as a locum in communities across Alberta, B.C. and Ontario. He has spent the last three years developing medical decision support software that would make readily available the latest in medical developments and research to physicians working in remote communities – the reality of which he is all too familiar with.

"As a provider in a larger city, I'm so much more appreciative of what we can deliver and receive in health care, including instant access to surgery and the Emergency Department," said Dr. Wheeler. "In Afghanistan, many people don't go to the hospital until they are practically dead."

"I would never hesitate to go back. I know now that all the risks I took to my personal health and safety were completely outweighed by the benefits."

**For more information on similar opportunities, contact the Canadian Forces' Senior Staff Officer for Retention and Recruitment under the Director of Health Services, Human Resources, at (613) 945-6775.**

*"To be asked to go and care for our troops was an incredible honour."*

What you can do right now

## Preparing for pandemic influenza

Krista Ellingson  
COMMUNICATIONS

In February 2006, avian cases of H5N1, or bird flu, were reported in 12 European countries, including Austria, Italy and Sweden.

While news like this can be alarming, employees can disarm the fear by personally preparing for a public health emergency. In the process, the tools that will be built can be applied to cope with any disaster.

"Preparedness begins with the individual," said Dr. Brent Friesen, Medical Officer of Health at the Calgary Health Region. "This is true with any disaster, whether it's a natural disaster such as a flood or an ice storm, or a public health emergency, such as pandemic influenza."

Although human cases of the bird flu have been limited, H5N1 has pandemic potential and could evolve into a virus that can be easily transmitted from one person to another. While all levels of government and health authorities are preparing for pandemic influenza, there are a number of things employees can also do to contribute to the preparations.

Creating a personal disaster plan is the first step. Public Safety and Emergency Preparedness Canada offers excellent online tools to help prepare your family and household, including a five-step planning guide: Emergency Planning for Your Family, available at [www.psepc.gc.ca](http://www.psepc.gc.ca)

As a second step to prepare for pandemic influenza, Dr. Friesen recommends incorporating the following considerations and items into your family's emergency plan:

- A two-week supply of water and non-perishable food.

- A two-week supply of pet food, if applicable.
- Ensure important prescriptions are filled and that you have a two-month supply of important medicines, if possible.
- Keep fever medication and a thermometer in the home.
- If you have dependants, have a backup caregiver identified in case you become ill.
- Know what work or job options are available when you are ill or caring for a sick family member, such as working from home.

"It is very important to plan ahead in case you or your family members become sick with influenza," noted Dr. Friesen. "This is especially important if you live alone or are a single parent or caregiver."

Employees and the public can also take steps to protect their health both now and during a pandemic. Wash your hands, cover your cough and if you're ill, reduce your contact with others.

"I urge you to stay informed about H5N1 avian flu and pandemic influenza," Dr. Friesen said. "Don't be afraid to visit the World Health Organization web site for the most recent and accurate updates. Educating yourself is key in preparing for any emergency."

In a pandemic, information and advice on how to best protect individual citizens and their families will be made widely available through information leaflets, websites and the media. Such advice will include where and how to seek medical assistance.

"Pandemic influenza will greatly impact our community," concluded Dr. Friesen. "By planning ahead as organizations and individuals, we will help protect ourselves, our families and our communities."

**Improving access and patient care**

# Province invests in funding bone and joint pilot project

**Jennifer Lomas**  
COMMUNICATIONS

Provincial Health Minister Iris Evans has announced dedicated funding for several projects aimed at improving access and enhancing the quality of patient care.

In total, \$54 million has been allocated across the province for innovative models of health services such as the Alberta Hip and Knee Replacement Project, cardiac care and breast and prostate cancer care.

“Access to services remains our top priority and these funds will help us address this challenge in the future,” said Janet Umphrey, Senior Vice-President, Operations, Professional Practice and Chief Nursing Officer. “We appreciate the commitment that the province is showing to reduce wait times in critical areas such as hip and knee replacements, breast cancer care, MRIs and CT scans, coronary artery bypass surgery and prostate cancer care.”

\$12 million of the overall funding will go directly to further development of the Alberta Hip and Knee Replacement Project, a pilot launched in 2005 that introduced a centralized model of care and a streamlined referral process. Of this, \$5 million will be provided to the Calgary Health Region to implement the project as the standard of care for hip and knee replacements. The remaining \$7 million will be allocated to Capital and David Thompson health regions who also participated in the pilot project.

While the formal evaluation of the hip and knee pilot won't be complete until July, an interim report on the

project released in December shows many encouraging signs of success including a 90 per cent reduction in wait times for surgery. The report also noted a 30 per cent reduction in hospital stay and overall faster recovery for patients.

“The early success of the Alberta Hip and Knee Replacement Project in reducing wait times and improving quality of care for Albertans demonstrates the incredible value of our initial investment,” said Evans. “This new funding underscores our commitment to supporting innovative and sustainable advances in public health care delivery. Over the next three years I look forward to seeing similar improvements in other areas of care.”

The hip and knee pilot is a collaboration between the Alberta government, Capital, Calgary and David Thompson health regions, the Alberta Bone and Joint Health Institute, the Alberta Medical Association and the College of Physicians and Surgeons.

It utilizes a central assessment clinic staffed by physicians, nurses, therapists and specialists to quickly pinpoint a patient's condition and identify their treatment options. If it's determined that a patient requires surgery, they are assigned a multi-disciplinary care team that works with them right through to post-surgical care.

“We are hopeful that the lessons learned from the pilot project will provide the insight and impetus needed to apply this model to other care areas over the next few years, ultimately reducing wait times in many sectors of the health care system right across the province,” added Umphrey.

**Empowering patients to self-manage treatment**

# Nocturnal hemodialysis steadily gaining popularity



Dr. Nairne Scott-Douglas, Medical Director of the Southern Alberta Renal Program, chats with dialysis patient Dan Burton while nurse Colleen Churchill looks on.

**Sheila Rougeau**  
COMMUNICATIONS

For hemodialysis patient Dan Burton, life was a balance of alternating good and bad days.

The bad days announced their arrival three times a week with a 5:30 a.m. wake-up call and an hour-long commute to Calgary from Strathmore for treatment. When he returned home around 2 p.m., he was often too exhausted to do anything more than sit in his chair for the rest of the afternoon and evening.

But since starting nocturnal dialysis in the comfort of his own bedroom while he sleeps at night, there have been many more good days than bad.

“Conventional hemodialysis can take

too much fluid too quickly, which leaves you feeling light-headed and woozy,” Burton explained. “Because nocturnal dialysis is done over eight hours, it is a slower, gentler treatment that leaves me feeling good the minute I wake up.”

The acceptance and popularity of nocturnal dialysis has been steadily increasing since it was first introduced in June 2004. The recent purchase of an additional 40 machines brought the total number of new units up to 76, helping decrease the wait time for the 30 patients currently on the wait list.

“There are currently 801 patients on dialysis in Southern Alberta,” said Dr. Nairne Scott-Douglas, Medical Director of Southern Alberta Renal Program. “Our goal is to have at least

25 per cent of our eligible patients participating in self-care in their homes.” So far, 28 patients have completed the prerequisite four-to-six-week training and are using nocturnal hemodialysis at home.

Nocturnal hemodialysis empowers patients to safely self-manage their disease and improve their quality of life, while increasing capacity at the hemodialysis units for those patients needing nursing or medical support. Other benefits include increased energy levels, fewer medications, additional daytime hours and no dietary restrictions.

“I like being responsible for my own health and body,” summarized Burton. “I'd recommend anyone currently on hemodialysis to try nocturnal hemodialysis at home.”

**More jingle in your jeans for upcoming benefit year**

# Benefits premiums drop by 1.7 per cent in 2006-07

**Janice Harvie**  
COMMUNICATIONS

Region employees will have a bit more money in their pockets for the upcoming benefit year as a result of lower group benefits premiums.

Effective April 1, the aggregate decrease in the cost of all benefits will be 1.7 per cent. Only one specific plan in the group of individual plans (vision care for nurses in UNA) experienced a rate increase. All other plan rates remain the same as last year or have decreased.

The Region's group benefit premiums are negotiated with our plan carriers each year. Rates change based on the plan experience, administrative charges, pool demographics such as average age, and the plan funding arrangements. It has been more than four years since the Region has seen an overall decrease in plan rates. Last year rates increased by 7.4 per cent overall.

“The net premium decrease is a result of positive plan experience over the past year, skilled negotiators and taking what actions we can to help stabilize and improve claims experience that in turn affects costs,” said Carol Graham, Executive Director, Employee Relations and Total Compensation.

Fewer claims in some plans has contributed to significant plan savings. For example, the most common long term disability (LTD) claim in the Region – musculoskeletal injury – saw a significant decrease from 20.5 per cent to 10.5 per cent of all disability claims, likely a result of the Region's progressive injury prevention and return-to-work programs. Optional life insurance claims decreased from nine in the previous year to one this year, which also results in plan savings.

Employees share the annual \$45 million cost of benefits with the Region. The 1.7 per cent reduction is a saving of approximately \$765,000 in 2006-2007.

**For further information visit the human resources internal website at <http://www.crha-health.ab.ca/supp/hr/benefits/index.htm> or call the Benefits Service Centre at 699-0732 or toll-free at 1-888-943-1333.**

BENEFIT PLAN	RATE CHANGE
Basic Life	-(7.0)%
Optional Life	-(10.0)%
Voluntary Life (Member)	-(10.0)%
Voluntary Life (Dependent)	No change
Accidental Death and Dismemberment (AD&D)	No change
Short Term Disability	No change
Long Term Disability	-(5.0)%
Extended Health	
Health:	No change
Pooling:	No change
Vision: • UNA*	+7.3%
• Non UNA	-(10.7)%
Dental Care	No change
Spending Account Fees	No change
Overall Change	-(1.7)%

\* includes increased utilization and additional \$600 benefit effective 01-01-06

# Interim expenditure plan approved

COMMUNICATIONS

The Calgary Health Region board has approved an interim expenditure plan, pending further discussions with the province on funding for the 2006/07 fiscal year.

Kay Best, the Region's Executive Vice-President, Risk Management and Chief Financial Officer, said the Region is projecting first quarter operating expenditures of \$627 million, which represents an uplift of approximately 9 per cent over Q4 fiscal 2006 spending. Earlier this month, the province announced the Region would receive an increase of 6.4 per cent for the 06/07 fiscal year. The government budget announcement also identified planned provincial expenditures directed towards wait list reduction and increased long term care services. The allocation of these amounts to RHA's has not yet been finalized.

The Region's 2006-2007 operating budget has not yet been finalized. Best explained that Region staff members have not had a chance to review the provincial funding commitment in detail, nor have they concluded discussions with provincial officials about funding issues.

Interim expenditure plans have been used in the past to provide health care to the more than one million people living within the Region while work

continues on a final budget. This ensures any important initiatives currently underway can continue. The final budget for the 2006/07 year will be presented to the board for approval later this year.

Earlier, Board Chair David Tuer said the province's funding announcement was appreciated. “Our priority is to ensure the public receives the care they want when they need it,” said Tuer. “But as Calgary continues to grow rapidly and the population ages, we are finding it tough to keep up with the demand.”

Tuer said that population growth of over a quarter million people in the last decade has strained all city services – roads, schools and especially health care. And as the community grows, the population is aging. Over the next 10 years, the number of people 65 and older is expected to increase from approximately 104,000 to 146,000, an increase of 41 per cent. Add increasing demand for new and better treatments, higher drug costs and expensive equipment, and we have a system under strain.

“It is no secret we are feeling the effects of a vibrant and growing economy,” said Jack Davis, President & CEO, Calgary Health Region. “But we are working to make the system more efficient and are taking steps to expand our facilities and programs.”

# in the loop

## What's Up

A **CHILD & YOUTH HEALTH PROMOTION UNDERGRADUATE INTER-PROFESSIONAL COURSE** is being held this spring at the University of Calgary. The course is open to all students and health professionals seeking an undergraduate elective course at the U of C, and involves a blended learning approach including Saturday workshops, field observation and 17 hours of online time at students' convenience.

The six-week course starts May 13. Registration is ongoing for unclassified students. For registration information, see NURS503.24 at [www.spring-summer-session.ucalgary.ca/guide.html](http://www.spring-summer-session.ucalgary.ca/guide.html) or contact Sandra Reilly by email at [smreilly@ucalgary.ca](mailto:smreilly@ucalgary.ca)

**THE 7TH ANNUAL BIENNIAL WESTERN CANADIAN SEXUAL HEALTH CONFERENCE** will be held May 4 to 5 at the Red & White Club, University of Calgary. It is co-spon-

sored by the Alberta Society for the Promotion of Sexual Health and the Community Health Nursing Unit, University of Calgary, in affiliation with the Calgary Health Region and in partnership with the Public Health Agency of Canada. Email [aspsh@shaw.ca](mailto:aspsh@shaw.ca) with questions or see [www.aspsh.ca](http://www.aspsh.ca) for conference registration and program details.

A seminar called **COMMUNICATING UNANTICIPATED MEDICAL OUTCOMES TO PATIENTS AND FAMILIES** will be held on April 6 from 11:30 a.m. to 1 p.m., at the Coombs Theatre at the Foothills Medical Centre. Daniel O'Connell, PhD, a consultant to the Bayer Institute for Health Care Communication, will share his expertise in training healthcare providers in how to be an effective communicator when disclosing harm to patients and families. This seminar is open to anyone who is interested but may be of most value to physicians, patient care managers and other direct care providers.

Telehealth sites are:

- ACH – 3524
- RGH – Fisher Hall
- Banff Mineral Springs – Cafeteria Annex
- Black Diamond – Medical Library
- Canmore – Medical Library
- Claresholm – Multipurpose Room
- Tom Baker Cancer Centre – CC 105
- SPT – 1103
- PLC 3121

For more information please visit <http://iweb.calgaryhealthregion.ca/qshi/oconnellposter.pdf>

A forum called **SHADES OF GREY 2006: DELIRIUM: A MEDICAL EMERGENCY** (The 15th Annual Interdisciplinary Assembly of Health Care Providers to Seniors), will be held June 17th from 7:30 a.m. to 4:45 p.m. The fee to attend is \$60. For entire brochure, please email [beverly.forbes@calgaryhealthregion.ca](mailto:beverly.forbes@calgaryhealthregion.ca)

## Transitions

I am pleased to announce the appointment of **ARUNA MITRA**, M.Ed., B.Sc.OT, to the position of Brain Injury Program Manager, effective April 17. This is a new regional role towards improving the quality and integration of care across the spectrum of services for clients and their families experiencing brain injury. Please join me in welcoming Aruna to this new regional role and to the Neurosciences team.

*Cathy Edmond, Director,  
Clinical Neurosciences*

I am pleased to announce the appointment of **HOLLY CROWE** to the position of Assistant Patient Care Manager, Emergency Department Foothills Medical Centre, effective April 10. We are very pleased to have her join our team here at FMC in this new capacity. Please join me in welcoming Holly to her new position.

*Kathy Howe, R.N., B.N., Patient Care Manager,  
Emergency Department, Foothills Medical Centre*

It gives me great pleasure to announce the appointment of **DAVID POTTS** to the position of Assistant Patient Care Manager for the FMC Peri-Anesthesia Care Unit (PACU), effective March 20. David holds a degree in Nursing and has clinical experience in the Critical Care and Recovery Room areas of nursing. Please join me in welcoming David to his new position.

*Sarah-Beth Rasmussen, PCM,  
FMC PACU*

Surgical Services is pleased to announce the hiring of **LORI GERVAIS** to the Assistant Patient Care Manager position at FMC Operating Rooms.

*Brenda Huff, PCM (acting),  
FMC OR*

I would like to welcome **JACQUELINE SIMMS** to the position of Program Manager, Surgical Inpatients and Trauma Services, effective May 1. Jacqueline's office will be located at North West II and can be contacted at 944-2363. We are delighted to have her join our team!

*Marg Semel, Director,  
Surgical Inpatient and Trauma Services*

I am pleased to announce the appointment of **KAREN TRNKUS** as Administrative Assistant, effective April 5. Karen will report directly to me and Jennifer Painter, Development and Conference Project Manager. She will play a major role in supporting the bi-annual International CDM Conference and the newly formed Canadian CDM coalition. Please join me in welcoming her in her new role in Chronic Disease Management.

*Dr. Sandra Delon,  
Director, CDM*

We are pleased to announce the following appointments in the Strategic Service Planning portfolio:

**MYRNA DOELL** joined the Outpatient Strategy Implementation team on April 3 in the role of Administrative Secretary.

**JACKIE PATEY** joined the Inpatient Strategy Implementation team on April 3 in the role of Clinical Project Coordinator for the Sheldon M. Chumir project.

**SHELLY PHILLEY** will be joining the Outpatient Strategy Implementation team on April 17 in the role of Clinical Project Coordinator for the Richmond Road Diagnostic & Treatment Centre project. Please join us in welcoming Myrna, Jackie and Shelly into their positions.

*Jennifer McCue, Director,  
Inpatient Implementation Strategy*

*Nancy Hughes, Director,  
Outpatient Implementation Strategy*

## Congrats & Thanks

### THE CALGARY HEALTH REGION PERINATAL EDUCATION PROGRAM

is the recipient of the Publishers Award of Distinction this year. The Publishers Award of Distinction was awarded by Calgary's Child Magazine for the Perinatal Education Program's tireless and unending support of families in Calgary, and the dedicated limitless energy and enthusiasm in their quest to educate and support expectant and new parents.

More than 30 different courses, including healthy lifestyles in pregnancy, preparing for childbirth, preparation for the new baby, and parenting classes are offered free or at a very low cost by the program to ensure all families receive the support they need. Their mandate is to provide resources and care that nurture and support pregnant women and families and give newborns the best possible start to a healthy life.

Congratulations to **KAREN DANIELS**, the winner of the iPod Video for completing the Information Privacy and IT Security Survey. The answers to the survey have been posted on the IT Security home page at <http://iweb.calgaryhealthregion.ca/security/>

## Classifieds

**For Rent:** Looking for roommate downtown to share large 2 room apartment. Must be mature, quiet, neat, clean, NIS, like cats. Secure 24th floor with mountain view. On-site laundry, pool, sauna and fitness facility. Secure underground parking. Close to amenities, 17th Ave, paths, buses and LRT. Available May 1. \$430 rent/DD. Utilities included. Call 462-7319 or [amber\\_burridge@yahoo.com](mailto:amber_burridge@yahoo.com)

**For Rent:** Large, clean 2 bedroom condo (unfurnished), 1100 sq feet, fireplace, huge deck, washer/dryer, quiet neighborhood, 1 parking stall, lots of street parking. Close to U of C, FMC and new ACH! Definitely worth a look! Available June 1. Please call Cory at 284-4427 for more info.

**For Sale:** 2001 Grand AM SE. Red, fully loaded, 4-door, 6-cylinder, rarely driven. Only 37,000 kms. Excellent condition. Asking \$11,000 OBO. Call Bernie at 585-5260.

**For Sale:** Maternity clothes. All clothes are in like-new condition, coordinate with one another well and were bought new (kept most receipts). Buy 5 or more items, get an extra 10 per cent off. Pictures of clothing available via email. Please call if you're interested in trying some on! Call Anita at 207-2653.

**For Sale:** Truck and Okanagan 5th wheel trailer. 2003 Dodge 250 Laramie. 65,000 km. 2000 32.5 ft V carpet, hardwood floors, solid oak cabinets, fully winterized, 20 volt solar panel, large rear window. Shows like new-great snowbird model. \$83,000 OBO. Call Bill at 225-1782 or cell 852-8464 or Louise at 943-3529. Will consider selling 5th wheel separately at \$48,000.

**Wanted:** Accommodation in Maui from Aug. 26 to Sept. 2, 2006. Call Karen or Steve at 901-0804, evenings.

To submit an item or for the complete list of classified ads, including vehicles for sale and homes for rent or purchase, please visit News You Can Use on the internal Web.

## Bella event supports heart health for women



Top models and world-famous clothing designers were featured at Bella 2005, the Calgary Health Trust's newest fundraiser.



**Peter Zuurbier**  
CALGARY HEALTH TRUST

Women's heart health in the Region will receive a major boost thanks to Bella 2006, the Calgary Health Trust's newest fundraiser.

The New York-style fashion event, featuring internationally-renowned models and clothing from the world's top designers, had 800 guests in attendance at the Hyatt Regency.

Proceeds from Bella are being directed through the Trust in support of education, research, and leading edge technology for women's heart health.

Although approximately 30 per cent of patients admitted for cardiac disease are women,

research studies in cardiac care primarily focus on men. By performing research that is specific to women, the Region will be able to more accurately identify and ultimately help address the unique needs of women with cardiac conditions.

Since women often experience different signs of cardiac problems, it's important to provide education on symptoms, risk factors and prevention. Using funds from Bella, "how to" newsletters, videos and workshops will be designed to assist women in their diagnosis and recovery.

Bella proceeds are also supporting a new system called Echo Pacs, which will allow cardiologists to view cardiac images online from anywhere within the Region, effectively reducing treatment time in urgent cases.

## Patient Thank You's

*I underwent surgery at the Foothills Hospital on March 10, with Dr. Lloyd Mack as my surgeon. I would like to compliment the doctor and the hospital staff for treating me so well. I was treated kindly and attentively for the duration of my stay, in surgery, in recovery, and on unit 102. The nurses (and the household staff) were most congenial, giving me all the care I needed even when they were*

*quite busy. Most particularly friendly were Julie and Patsy, but all the nurses were great. And what can I say about that amazing 'Versicare' bed! It was sooooo comfortable! I have never before had a hospital stay with absolutely nothing to complain about, and I want you to know it.*

*Laurel Roberts, Calgary*

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