

The
LifeLine
St. Paul's Hospital Staff Newsletter



ST. PAUL'S HOSPITAL

A Community of Health, Hope and Compassion for All

...an Emmanuel Health Organization

Compassion is Walking with Their Stone in Your Shoe

There is a lot of suffering to go around.

If you walk around Pleasant Hill for more than a minute or two, you will see there is a lot of suffering going on in the form of substance use, poverty, racism and a legion of other social ills.

Many of us have learned over the years that compassion simply means that we can look at someone who is suffering and give a sympathetic groan, "Tsk tsk, that's too bad. But there's nothing I can do as an individual. This is a social problem."

From an ethical perspective though, compassion is not simply "feeling bad" for another person. Compassion is made up of two Greek words: "Co" (with) and "passio" (suffering). Compassion is to suffer with another person.

Compassion is not **FIXING** the problem; often the problems are complex. Compassion is not "feeling bad for another person" because that the suffering is still truly theirs.

Compassion, as experienced through the lens of so many of the staff of St. Paul's Hospital, is to suffer with the people who come here.

They come from the north for dialysis; leaving their family and home to live. They arrive scared and clutching their chest. They arrive bleeding and incoherent. They are wheeled into your department with tears in their eyes.

You try to help but that help—when it works—takes time. And while you wait, they suffer. And while they suffer, you suffer with them.

You suffer their fears and anxiety. You suffer their impatience (which is only masking their fear). You suffer their moans and cries. Your heart breaks for them, and you do all you can do, but in the end, sometimes all you can do is suffer with them.

Much of parenting is simply compassion. Suffering with your child in the hospital. Suffering with your teenager who can never understand how much you love them. Suffering with your adult child going through a divorce.

Suffering is part of the human experience but we humans have the holy ability to take suffering and to transform it into compassion and empathy.

— *Blake Sittler*
Director of Mission

The LifeLine



St. Paul's Hospital

St. Paul's Hospital Mission Office



Vision Mission Values



**Emmanuel
Health**

A Catholic Health Organization

**Published for and by the
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Archives Antics

In preparation for a series of videos we are making about the culture of St. Paul's Hospital (more on page 18) we started to dig around SPH archives on the fourth floor of the C-wing.

The archives contains volumes of mundane correspondence, ledgers and official titles and documents. It is musty, crowded and smell like newspaper.

However, periodically, you will also come along terribly interesting pieces of miscellany like this ad for an early fundraiser for the hospital. Based on limited research, this appears to be circa 1915-1917.

In the future, this space will be reserved to share more of the jewels that come to light as we dig through the archives.



Executive Director, Tracy Muggli

I would like to open with a reflection of gratitude for an individual who cared deeply about St. Paul's Hospital. Les Dubé passed away on March 13, at the age of 91.

Les and his wife, Irene, made countless contributions to St. Paul's Hospital over the years. We certainly recognize the spaces that hold their name such as the Leslie & Irene Dubé Urology Centre, but they made numerous additional contributions that have ensured the delivery of safe and quality care in our hospital. They also made a significant contribution toward the construction and operations of the Hospice at Glengarda.

In recent weeks, Les and Irene gifted St. Paul's \$1.4M to support the acquisition of new Lithotripsy equipment, once again supporting kidney care.

Les served on the St. Paul's Hospital Board of Directors for 16 years! In 1990, Les was invited to the Vatican by the Grey Nuns, founders of St. Paul's Hospital, for the canonization of Marguerite d'Youville, where Les received Communion from St. John Paul.

We will be forever grateful for the love and support Les gave to our hospital as we hold Irene and her family in our hearts and prayers. May they be surrounded with love and support and may he rest in peace.



Les & Irene Dubé

Front Entry Construction Update

We remain on schedule for a September 2025 completion! We will be moving to indoor construction soon. There will be a few office moves and people traffic flow modifications that will be communicated as soon as they are finalized.

Graham construction is making good progress. The piles for the addition have been drilled and poured and the basement work is underway. We anticipate that interior work will occur this summer.

Thanks again for demonstrating your knack for hospitality while assisting patients and visitors to find their way to their destination!

The Ethics of Compassion

Compassion has been the core of Catholic healthcare for centuries. Yet it still amazes me how often I rediscover this value in my work and feel surprised to find it there.

The most recent moment came at a Schwartz Rounds discussion at St. Paul's Hospital (SPH) on "Contemporary Stress." As one of the facilitators, I was worried that if I let people talk too much about the negative moments, I would never be able to pull them out of their emotional nose dive. And then another St.

Paul's Hospital miracle happened: the more people listened to each other, the happier they became. Yes, you read that right: they actually left a one hour session on stress feeling happy!



Reflecting back on the experience, I realized that we had achieved the purpose of Schwartz Rounds – to promote compassionate healthcare – in its truest sense. "Compassion" means "to suffer with," and that is exactly what we did.

This compassion in action occurs throughout Catholic healthcare in a variety of contexts. Imagine, for example, two nurses walking out to their cars and sharing simply that it was a long day. Or a parish visitor coming to see someone who cannot leave their home and praying with them. Or an administrator

realizing that they cannot do anything to solve an issue, but committing to helping a frontline team member track down better supports. All of these scenarios involve people who cannot solve the problems of the person they are with, but they can take that person's hand and walk down the road with them for a little while.

Consider another example: a manager recognizes that spirits are low after the deaths of several patients who had been cared for by the team for a number of months. What can she do to help them?

It might be tempting to think that the answer is to close the unit to high severity patients, or to find some other way to shield the team. But what this team might really need is just an opportunity to be heard and to grieve the losses they have experienced.

How have you shown compassion to your colleagues? How do you show compassion to yourself? Can you think of situations where taking an extra moment to suffer together has improved your care in the long run?

It can be tempting to feel helpless after listening to the frustration of a colleague or friend. However, having a compassionate ear is often one of the most useful things we can do.

Dr. Mary Heilman, SPH Bioethicist

Easter Greetings from Bishop Hagemoen

Greetings to you all! I always find that when I come to Palm Sunday and the beginning of Holy Week, I am faced with a sense of tension and dichotomy. What unfolds is the great and loving gift of God, meeting the tragedy and complexity of human longing coupled with human failing.

In Viktor Frankl's famous work, "Man's search for Meaning," one of his quotes about suffering and meaning is: "What is to give light, must endure burning."

We begin Holy Week – having experienced this past year the call to be light – but also to endure burning. Indeed, we have even been consumed. The challenges, the tensions and conflicts, the polarizations we have all experienced – in our world and country, our communities, and our families – have been very challenging and uncharacteristic of what we would call an acceptable normal.

And yet, the feature of tension has always been part of the Paschal Mystery. It is a key feature of the Gospel – and it comes to an apex in Holy Week when Our Lord Jesus Christ offers the unexpected, ultimate, and final confrontation between light and darkness, death and life – abundant life – to the full. What we recall and witness again in the way of Jesus Christ is utterly amazing, astonishing, unbelievable!

Pope Francis has stated: "There are many

people who admire Jesus: He said beautiful things; He was filled with love and forgiveness; His example changed history. They admire Him, but their lives are not changed. To admire Jesus is not enough. We have to follow in His footsteps, to let ourselves be challenged by Him; to pass from admiration to amazement. What is most amazing about the Lord and his Passover? It is the fact that he achieves glory through humiliation...To draw near to us and not abandon us in our suffering and our death. To redeem us, to save us."

The Pope concluded that the celebration of the Passion of Our Lord needs to move us from distant admiration of Jesus Christ, to amazement at Jesus, who demonstrates the greatest love the world has known – our salvation and new life passes through the wood of the Cross! Destruction meets new life; hell meets heaven; and death meets resurrection.

Let us ask ourselves: Why did Jesus die on the cross for us? Why did humanity crucify Christ? Do we still crucify Christ? If so, what does Christ show us as a new way?

These are questions that must be faced and asked. Don't rush the answer... sometimes that is the problem. Let us ask the questions, and stay in the eerie, mysterious silence of the response of Jesus Christ on the cross, before rejoicing in the unbelievably good news of Easter.

21 Things You May Not Know About the Indian Act—A Book Review

What began for Bob Joseph as an article and some “take aways” about the Indian Act on his Blog “Working Effectively with Indigenous Peoples” turned into this book.

Joseph had selected 21 contradictory statutes and policies, from the Indian Act, that were not common knowledge and wrote about them on his Blog. He understood the interest that they generated as a desire to know and learn more.

“This response showed there was a real lack of information about First Nations and non-First Nations but, more importantly, a real interest in learning about the Indian Act and its impacts”.

Joseph’s book is accessible as he outlines how The Indian Act was to work and informative as he describes the impact it had on the First Nations Culture, socio-economically and politically.

He also illustrates that the Indian Act was not just an Act to control First Nations people but a fluid Act that could be adjusted and altered as needed, to impose more and/or stronger controls. The end of World War II brought an awareness of basic human rights generally and specifically, people were becoming aware of the treatment of First Nations people in Canada. The awareness of basic human rights continued to grow and changes to the Indian Act continued to take place.

Joseph discussed “Dismantling the Indian Act” in the second part of his book. He states that it is no longer just a matter of “making it go away”. Since it did exist there are government responsibilities that still need to be fulfilled and settled. Self-government for First Nations people will be an ongoing process of rebuilding or re-establishing a way of life that pre-existed before settlement occurred. Self-government is a right that is viewed as continuing to exist.

I heard a news report in 2019 that the Hereditary Chiefs in B.C. opposed the Pipeline crossing their territory. I never heard of the Hereditary Chief before or how it was they had this ability to make this decision over elected Chiefs and councils. Bob Joseph’s explanation of an imposed elected chief and band council system and why it was forced helped me to understand the role of Chief and council and where Hereditary Chiefs fit into the picture.

This book of “things” I probably don’t know about the Indian Act got me thinking about a few things I hadn’t considered before. Bob Joseph’s book is both accessible and informative and I encourage you to give it a read.

Noreen Hareuther
Spiritual Care Associate

Interested in reading this book? The SPH TRC Committee is heading up a book club in April. SEE PAGE 7!

Book Club Opportunity

On behalf of the SPH Truth & Reconciliation Committee, Michelle Murphy & Julie Bergen will be hosting a book club for all those wishing to read *21 Things You May Not Know about the Indian Act* to discuss in community.

When: April 23 & 30, May 7 & 14 from 12:00-12:30

Where: In-person at SPH – Room# TBD

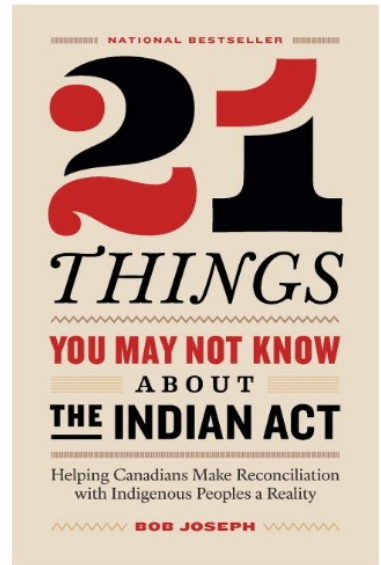
Register by April 17 with Bonnie Hope at 5383 or

Bonnie.Hope@saskhealthauthority.ca

You will be provided with a copy of the book and our reading schedule upon registration.

For those who wish to join the conversation but can't join us in person, we will be offering an online forum that will follow alongside our book club.

Looking forward to seeing you there! Julie & Michelle



A Lasting Legacy

In end-of-life and palliative care, legacy projects are an important part of the work that music therapists offer and create with patients on the unit.

One of the ways in which music and legacy work go hand in hand, is through the creation of heartbeat recordings. With the technology of a digital stethoscope, the music therapist can record a patients' heartbeat and preserve it by embedding it within a song that's meaningful to the patient or their loved ones.



The selected song can be anything from a favorite pre-recorded song to an original composition created by the patient and/or a loved one.

Throughout this process, the music therapist works with the patient and their loved ones to create a unique and personalized piece of music that can become a tangible expression of love. This legacy project can be a powerful memory making experience for all involved in someone's end-of-life journey and can offer a comfort that lasts beyond a persons' death.

Mylandra Zielinski-Douglas, Music Therapist

AEDs Installed

AED stands for Automated External Defibrillator. It is a portable and lightweight device that delivers a shock to restart the heart and restore its natural rhythm. ONLY an AED can restart a heart, CPR cannot. The machine will not administer a shock if it is not needed. AEDs detect if someone needs a shock by checking the heart's rhythm before shocking. An AED is used in the event of a sudden cardiac arrest.



The AED is to be used by those who have training on use of these devices. Training is available through Heart and Stroke, Canadian Red Cross and St. John's Ambulance Canada

Saskatoon HeartSafe stickers will be put on the SPH main doors so that medically trained personnel entering SPH will know there is an AED in the building.

Thank you to:

- SPH Foundation for funding the AEDs
- Clinical Engineering team for providing ongoing maintenance of the AED
- SPH Maintenance team for installing the AED cabinets
- SPH Protective Services team for daily audit of the AEDs
- Shari Watson for coordinating the purchase and deployment of the AEDs

If someone experiences a cardiac arrest inside the hospital:

- Call 3-2-1 from a hospital phone or 306-655-5499 from a cell phone to call a Code Blue to your current location.
- Stay with the person until the Code Blue Team arrives.
- Use an AED if you have training on use of these devices and there is one nearby.

If someone experiences a cardiac arrest on the hospital grounds:

- Call 911 immediately and give your location.
- From a cell phone, call 306-655-5499 to call Code Blue.
- If you are able, start performing CPR to keep blood flowing. If you have training, use AED as soon as one is located.
- Stay with the person until EMS arrives.

Submitted by Site Lead, Clare Johnston

Donate to the Book Cart

Our writer-in-residence, Dan MacDonald, is looking for a few good books for his trusty volunteers to share with patients.

Here are our most popular book items, as well as a simple wish-list when it comes to types of books. Large print are always in high demand and paperback/large print are even better.



Paperbacks in general are preferable over hardcover.

The most popular genres are:

- Thriller,
- Mystery and detective;
- Romances;
- Westerns;
- Horror

Books in clean, decent condition can be dropped off at the Mission Office and will be put on the Book Cart for distribution to many a grateful patient throughout the hospital.

Pink Shirt Day

In 2007, after a new student at their New Brunswick school was bullied for wearing a pink shirt, two grade 12 students bought 50 pink shirts and encouraged their classmates to wear pink. The next day they went to distribute the shirts and to their surprise the majority of students arrived wearing pink! With that act of kindness, Pink Shirt Day was born.

Now a national event, the last Wednesday each February is Canada's national Pink Shirt/anti-bullying day. The movement continues to grow.

-From www.pinkshirtdaycanada.ca



Ronald (N&F) and Barbara (4B) represent!



St. Paul's Hospital Foundation Inc.
Annual General Meeting

You are invited to attend the
Luncheon and Stakeholders Meeting

Thursday, April 25, 2024

Lunch at 11:30

Program starts at 12:00 noon

St. Paul's Hospital C-Wing, Room G30
(230 Avenue R South, former SPH Nurses Residence)

Please RSVP by Thursday, April 11, 2024 to
306-655-5861 or Jennifer.Bow@sphfoundation.org

Thank you and hope to see you there!

If you are unable to attend in person there will be a virtual option please contact for details.

SPHFoundation.org

Give Generously

Under the “O”... Olmesartan

On March 24th, the St Paul’s Hospital Pharmacy Department held their second annual Drug Bingo in the cafeteria over the noon hour.

Patients, staff, and physicians were all welcomed to come to the space between 11:30-13:00 to play their luck at Bingo, looking for drug names on the sheets as they were called out in order to achieve blackout.

There were approximately 50 participants in the sessions total, with many of them being excited patients. The pharmacy department looks forward to sharing their love for medications with the SPH community for years to come!



Green Light on Organ Transplant

The green light that illuminates the C-wing entrance is to mark Organ Donation Awareness Month.

Registering your decision for organ and/or tissue donation is easy – all you need is your Saskatchewan Health Services Card number, first and last name and date of birth.

You can choose to donate all organs and tissues needed for transplant; or select organs and tissues of your choosing. All options are outlined in the registry.

Register your decision online today! Save a life!

ED Gets a Sunroof!

In November 2024, the SPH Green Thumb Committee worked with Novatex Graphics to install Four Season sky ceiling murals as part of our initiatives to incorporate nature and green

spaces into healthcare delivery. The intention is to improve healing and provide soothing and comforting environments for patients, families and staff.



March is Music Therapy Month

There are nine Certified Music Therapists working across the province in many healthcare settings. These positions are made possible in SPH thanks to the Foundation's generous donors.

They use music-based activities to assist individuals in achieving their health care goals and increasing their overall quality of life. Activities like songwriting, improvisation, music games, listening, and relaxation are used to provide a tailored experience for each person.

At JPCH in Saskatoon, Ruth Eliason (top left) works with patients of all ages and their families to help them adjust during hospitalization.

In Regina, Amanda Schenstead (top right) provides care in the Extended Care and Veterans Programs at Wascana Rehabilitation Center. Rebecca Farthing and Mylandra Zielinski-Douglas, Tinaya Entz and Lisa Wutch (bottom L to R), work in the Healing Arts

Program and Palliative Care to support patients, families, staff, and community at SPH in Saskatoon.

To learn more about music therapy in the SHA,



Robert Steane Research Chair Update *Submitted by Simon Lasair*

Since September 2021, Simon Lasair, the Robert Steane Holistic Research Chair, has been working to study how best to integrate spiritual care and healing arts services onto the frontlines of St Paul's Hospital and the Hospice at Glengarda.

After designing a mixed-methods study and seeking proper approvals during 2022, data collection rolled out in 2023. Three focus groups were conducted with the spiritual care and healing arts professionals from St. Paul's Hospital and the Hospice at Glengarda. Surveys were distributed to patients, family, and staff at both sites. All data collection ended in October 2023, and the result was a dataset that shows how people experienced spiritual care and healing arts services at the time the data was collected. The data shows how people's experiences of these services might be enhanced.

One clear theme emerging from the focus groups was that spiritual care and healing arts professionals approach their work very differently from many biomedical professionals. While many biomedical professionals prioritize caring for patients' bodies, spiritual care and healing arts professionals invite patients to consider how they can integrate their medical experiences into their lives as a whole.

Among the survey data, an overwhelming majority of patients confirmed the value of this holistic approach by indicating that after seeing a spiritual care or healing arts

professional they felt less anxious, more at peace, and could see their situation differently. A majority of patients also shared they even felt physically better after receiving these services!

Staff at the hospice and hospital similarly affirmed of the value of these services, indicating they felt comfortable referring to spiritual care and healing arts. Staff could also see how patients benefitted from receiving these services. Few staff indicated, however, that they understood the training necessary to practice spiritual care or healing arts. Staff results were also mixed regarding the value of these services' chart notes, even though many staff could see the potential value of having these services attend rounds and patient-family conferences.

In light of these results, SPH and the Hospice at Glengarda have begun collaborating with the SHA's strategy and innovation department to explore how these services can best communicate the nature of their training and care. These services have begun exploring how to enhance their charting and collegial communication practices. The research team anticipates taking further measures to determine what effects this work might have had on how these services are perceived and experienced among the various groups surveyed previously.

Simon Lasair is the Robert Steane Holistic Research Chair here at St. Paul's Hospital

End-of-life Care Educational Opportunity

SPH Foundation's Close to Home Campaign raised funds to advance end-of-life care education in our community and our province, and we continue our commitment to support the Saskatchewan Hospice Palliative Care Association Biannual Conference.

This year's conference is titled: **Connections 2024** and will be hosted on June 4 & 5th in Regina at the Conexus Art Centre.

Keynote Speakers include Dr. Carmen Johnson, Dr. Paulette Hunter and Dr. Abigail Wickson Griffiths. Dr. Johnson will explore new approaches to palliative care education delivery and how this has a potential impact in linking urban and rural health care providers. Drs. Hunter and Wickson Griffiths will walk us through a toolkit for

strengthening a palliative approach in long-term care and how this encourages a more responsive and engaged end-of-life care team. Registration information can be found at saskpalliativecare.org under Events.



Traditional Indigenous Medicine Grows Respect

In collaboration with Vernon Linklater of First Nations and Metis Health, the Green Thumb Committee grew and dried tobacco this past growing season. Chair, Marlessa Wesolowski, gathered volunteers to bag the traditional medicine and designed a tag noting that it was grown on-site for ceremonial use. In the next LifeLine, there will be a full article about the importance of this project for SPH.



IPAC Canada National Conference

From June 9-12, 2024 in St. John's, Newfoundland and Labrador IPAC Canada's annual conference attracts infection prevention and control professionals of all backgrounds, including nurses, physicians, epidemiologists, environmental services managers, medical laboratory technologists, dental professionals, pre-hospital/ emergency services professionals, and many other healthcare sectors across the spectrum of care.

This is a premier event for companies providing, but not inclusive to, hand hygiene products, cleaning and disinfection products, antiseptics and antimicrobial agents, personal protective equipment, purification systems, software, and healthcare construction and renovation services.

Hybrid Conference

It is important that our conference reaches its largest audience and that our sponsors get the most value for their contribution - a hybrid model offers the best of both worlds. The main conference will take place in-person in St. John's, and our Industry Showcase in the exhibit hall will provide you with the opportunity to showcase your products or services and engage with your stakeholders.

Select sessions will be live streamed and attendees and industry representatives will be able to interact on the virtual platform and conference app.

Take advantage of this format with more avenues than ever before to connect, learn, and grow.



Pleasant Hill Winter Festival

On a sunny, snowy Saturday, March 9, over 300 people came out to the park behind the old Pleasant Hill School for the Pleasant Hill Community Association's Winter Festival.

The day began with a smudge and included games, races, hot dogs and drinks as well as prizes. Over 40 volunteers from the community came out to ensure the day was a success.



The festival began with a smudge led by Collin Starblanket and stepson, Caem

Thank you to our very own Tim Horton's for their generous support they offered through donuts, coffee, gift cards and swag! This is the third year of support for this event.

Event organizer, Ruth Reimer noted after, "I can't think of a better community to live in, or better people to work side by side with to enrich the lives of our neighbours. Thanks for what you do every day, and thanks for coming out today."

An advertisement for the National Suicide Prevention Lifeline. The background is a close-up of a smartphone dial pad with the number 988 highlighted. Overlaid on the dial pad is a blue square with the text "988 SUICIDE & CRISIS LIFELINE" in white. To the left of the square is a green arrow pointing right with the text "QUICK DIAL" in white. In the top left corner, the text "NATIONAL SUICIDE PREVENTION LIFELINE" is displayed in green and black, with the phone number "1-800-273-TALK (8255)" and the website "suicidepreventionlifeline.org" below it.

Bringing Beauty To A Patient Waiting Area

In partnership with the SK Arts Loan Program, two amazing pieces of artwork were installed in the Patient Waiting Area adjacent to the accessible Avenue R Entrance (as below).

“P.J. Bad Bear’s Excuse” (1986) was painted by Bob Boyer, an artist of Metis descent originally from Prince Albert, SK. Boyer was a painter, installation artist, powwow dancer, social activist, educator, author and national and international exhibitor. Boyer is best known for his painted blankets, as is the piece on display, completed between 1983 and 1995.

“The Buffalo Hunt” (1971) was painted by Henry Beaudry. Beaudry, grandson of the legendary Chief Poundmaker, was born on the Poundmaker Reserve in 1921. Beaudry, a Canadian Armed Forces Veteran, began painting after health problems forced his

retirement from the Canadian National Railways in 1958. A self-taught painter, his paintings reflect his experience at war and his strong ties to Cree culture. His narrative paintings reflect stories passed on by elders, recollections of his life on reserve, and his spiritual connection to the land.

We are so grateful to the SK Arts Loan Program for loaning us these beautiful pieces. The program currently includes more than 3,000 works of 750 artist and continues to grow. SK Arts Loan Program’s goal is to represent contemporary art practices of artists within the province for the purpose of public access.

We look forward to welcoming additional pieces into SPH in the future.



Michelle Murphy (L.) and Belinda Harrow of SK Arts Load Program. The acrylic on the left is Bob Boyer’s “P.J. Bad Bear’s Excuse” (1986) and of the right is Henry Beaudry’s “The Buffalo Hunt” (1971).

Celebrating Who We Are

St. Paul's Hospital has a particularly special culture. Not a bureaucracy or structure but a culture. The Mission Office is currently filming a set of three videos that will highlight just a few of the aspects of our culture, our history and legacy and will introduce and celebrate a few of the aspects of what makes SPH a unique workplace.

The videos aim to be 5-minutes long and can be shown at huddles, meetings, retreats and will be ready for use and distribution by Fall 2024.



First Signs of Civilization by Ira Byock

Years ago, anthropologist Margaret Mead was asked by a student what she considered to be the first sign of civilization in a culture. The student expected Mead to talk about fishhooks or clay pots or grinding stones.

But no. Mead said that the first sign of civilization in an ancient culture was a femur (thighbone) that had been broken and then healed.



Anthropologist, Margaret Mead

Mead explained that in the animal kingdom, if you break your leg, you die. You cannot run

from danger, get to the river for a drink or hunt for food. You are meat for prowling beasts. No animal survives a broken leg long enough for the bone to heal.

A broken femur that has healed is evidence that someone has taken time to stay with the one who fell, has bound up the wound, has carried the person to safety and has tended the person through recovery. Helping someone else through difficulty is where civilization starts, Mead said.

We are at our best when we serve others.

Getting to Know You: An Interview with Ernest and Renae

Tell us a bit about yourself and how you ended up becoming a PT/OT assistant.

Renae: I attended physical therapy sessions with a family member after he had an accident. I was interested in the profession ever since watching him progress.

Ernest: I have worked as a massage therapist for five years and enjoy the job very much. When COVID hit, I felt the effects of burnout that I didn't realize I had before. During that time, I realized I needed to do something else which wasn't as physically demanding but still focused on client-centred care. I found out about the Physical and Occupational Therapy Assistant in Medicine Hat College and decided to pursue the course.

Tell us a bit about your role here at SPH

Renae: I work with physical therapists helping patients improve their mobility and functional abilities. I provide hands-on treatment, assist with therapeutic exercises and support patients in their recovery process.

Ernest: Essentially my role as a Therapy Assistant is to perform the treatment intervention plan that the OTs have for a patient and is mainly focusing on their ADL's (activities of daily living). Considering that I am the only OT assistant in the hospital, my caseload consists of patients from different wards from ICU all the way to Palliative.



Renae Goudal and Ernest Tornado

Share with us one fond memory you have of being at SPH

Renae: I have worked at SPH for 15 years and enjoy the people and small town atmosphere of our hospital, [like the] Foundation Draws, Christmas meals and Community Day. Also our physical therapy team and our famous YouTube videos!

Ernest: Other than the Love Cart, the support system that SPH has towards both patients and staff. One particular event are the Schwartz Rounds. I have never heard of a platform or space, to this scale and within the other hospitals, where people can safely share their experience in their current line of work and some of the frustrations they have, but also the adaptations that they've implemented within their staff to support each other.

No Parking, Please

In a release dated February 23, 2024, SPH staff are asked to not have their drivers park outside of stores and receiving when being dropped off or picked up for their shift.

In an effort to maintain safe hospital operations, please be advised that the area directly adjacent to Stores and Receiving on the north east side of SPH (see picture) is a no parking/no idling zone. Please ensure no parking or waiting in the area.

If you are being picked up or dropped off to enter the hospital via the receiving door, we ask that your ride does not wait in the area, and upon pick up or drop off, exits immediately.

We thank you for helping us maintain safety for all at SPH.



Foundation Draws Deadline Approaching

St. Paul's Hospital Foundation is part of the reason that this place is so special. One of the ways they continue to bless our team of teams is through the annual Draws.

The purpose of the Draws is to benefit SPH patients, families and staff by providing departments with minor equipment items or program costs that have limited alternate sources of funding.

Applications must be in the Foundation Office

by 4:00 PM on May 10, 2024. Draws will be made on June 18. For more information, please contact Mariette Jean at 6027 or mariette.jean@sphfoundation.org



New Intersite Shuttle Schedule

1. These are departure times
2. Service to Ave C lot shuttle will be with regular daily inter-facility shuttle

SHA Employees should confirm with shuttle driver which direction shuttle is going before boarding.

RUH to SPH (or SPH to RUH) riders will need to transfer at SCH

Shuttle 1	
RUH	SCH
7:00	7:10
7:20	7:30
7:40	7:50
8:00	8:10
8:20	8:30
8:40	8:50
9:00	9:10
9:20	9:30
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17:00	17:10
17:20	17:30

Departure Lot Ave C	Departure SCH	Departure SPH
6:00	6:10	6:30
6:20	6:50	7:00
6:40	7:20	7:10
6:50	7:30	7:40
7:00	8:00	7:50
7:10	8:10	8:20
7:20	8:40	8:30
7:30	9:20	9:00
7:40	10:00	9:40
7:50	10:40	10:20
8:00	11:20	11:00
8:10	12:00	11:40
8:20	12:40	12:20
8:30	13:20	13:00
8:40	14:00	13:40
8:50	14:40	14:20
9:10	15:00	15:00
9:30	15:20	15:20
9:50	15:40	15:40
10:10	16:00	16:00
10:30	16:20	16:20
10:50	16:40	16:40
11:10	17:00	17:00
11:30	17:20	17:20
11:50	17:40	17:40
12:10	18:20	18:40
12:30	19:00	19:20
12:50	19:40	20:00
13:10	20:20	20:40
13:30		
13:50		TO SPH
14:10		TO SCH
14:30		TO SPH & SCH
14:50		
15:10/15:10		
15:30/15:30		
15:50/15:50		
16:10/16:10		
16:30/16:30		
16:50/16:50		
17:10/17:10		
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19:10		
19:30		
19:50		
20:10		
20:30		

SPH Hospitality Campaign

Over the next three years, the staff of St. Paul's will be invited departmentally to dream up a way that they can highlight hospitality in their work as a team.

Some may feel that hospitality is more associated with restaurants or casinos. When you think about it though, hospitality is about feeling welcome and safe.

One of the reasons that there is a huge health discrepancy between the health markers is people not feeling welcome or safe in a



traditional hospital setting. One of the simple but important things that we can do is to let people know, "You are welcome here. You are safe here".

On the boards outside the cafeteria, you will see a unique way of how we will be measuring participation in the program. Every time a department starts a project, St. Marguerite will plant a seed in the garden. Over the months and years, we hope to see this garden grow and flourish.

Hospitality will not do away with poverty, racism and other health barriers but it is a good way to prepare the soil!

Canadian Transplant Association's Green Shirt Day

GREEN SHIRT DAY

OTSSKOI SOOKASIM MIIKSISTIKOO

APRIL 7

HUMBOLDT STRONG



#LoganBouletEffect



REGISTER • TELL YOUR FAMILY • BE INSPIRED

