

# Assiniboine

## REGIONAL HEALTH AUTHORITY

**Office régional de la santé**  
**ASSINIBOINE**  
**Regional Health Authority**

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**ARHA Online**  
[www.assiniboine-rha.ca](http://www.assiniboine-rha.ca)

Internet users visiting [www.assiniboine-rha.ca](http://www.assiniboine-rha.ca) will be able to access information on programs and services available, Board of Directors and Executive Team profiles, organization structure, career postings, and the latest news and events.

**THE ASSINIBOINE RHA**  
**INVITES YOU TO VISIT**  
**THEIR SITE!**

# Checking for Colon Cancer

Did you know there is a simple test you can do in the privacy of your own home to see if you could possibly be at risk for developing or having colon cancer?

Colon cancer is the second most common cancer in Manitoba, 93 percent of cases occurring in men and women over the age of 50, and 80 percent of people who get colon cancer have no family history of the disease.

There are often no early warning symptoms of colon cancer but if caught early there is a 90 percent chance that you can be cured of the disease.

The Fecal Occult Blood Test (FOBT) is a simple at home test that looks for trace amounts of blood in your stool, which may be a sign of colon cancer.

If you are between the ages of 50-74 you can request a kit from your doctor or pharmacist, or ask for one directly from ColonCheck Cancer Care Manitoba. Just visit their website [www.cancercare.mb.ca](http://www.cancercare.mb.ca) or call (204) 788-8635 or toll free: 1-

866-744-8961. They will send you a FOBT complete with everything you will need for collecting your stool sample, and submitting it to their lab.

To take the test you simply collect small samples of your stool (poop) on three different days. When you finish the test, you mail the kit in a postage-paid addressed envelope (included with the kit) to the ColonCheck lab. The FOBT kit includes a detailed instruction sheet so you will know exactly what to do.

Once the lab has checked your sample they will mail you your test results if they are normal. If they are abnormal, you will get a phone call from ColonCheck's Follow-up Coordinator and a letter in the mail. Your doctor or nurse practitioner (if you specified one when you filled out the yellow response form) will also be sent a copy of your results.

An abnormal result means that there was trace amounts of blood found in your stool. This does not necessarily mean that you have cancer. There may be many rea-

sons for blood being found in your stool. It does however mean that you should make an appointment with your doctor to discuss the next step, such as a colonoscopy.

Cancer Care Manitoba recommends that this test be completed once every two years. Colon cancer can take up to 10 years or

more to develop to an advanced stage. With early detection it is a very beatable cancer.

For more information please visit [www.cancercare.mb.ca](http://www.cancercare.mb.ca) click on "Screening & Prevention" and follow the ColonCheck link. Or call (204) 788-8635 or toll free: 1-866-744-8961 or email [coloncheck@cancercare.mb.ca](mailto:coloncheck@cancercare.mb.ca)

## Another Year of Mobile Screening Completed

BreastCheck has completed another year of mobile screening in the Assiniboine RHA. In 2011, the mobile visited 5 ARHA communities and screened 1010 women. The 2011 Assiniboine Breast Screening Follow-up Report shows that 61% of Assiniboine women 50 to 69 years of age have had a mammogram within the last 2 years with BreastCheck. This is a 2% increase from 2 years ago!

### Highlights for the Assiniboine region in 2011 include:

- The numbers stayed quite stable in regards to women screened at each mobile site as compared with two years ago. However, an additional 212 ARHA women were screened overall as compared to two years ago.
- The population of women 50 to 69 years of age in the ARHA grew by 73 women from 2 years ago.
- Congratulations to the 54 communities that managed to maintain or increase their screening rates this year!
- A special mention to the communities that have met or surpassed the 70% participation rate goal! Several communities are growing their participation rates into the mid to high sixties – great work!
- The BreastCheck Health Educator met with a group in Elkhorn. Thank you to the community organizers who took the time to set up this Wellness event.
- Part way through the visit to the region there was a big Name Change Announcement. Thank you for helping welcome BreastCheck!
- The Manitoba Breast and Women's Cancer Network local volunteers run a huge Link to Pink campaign in October – efforts like these make a huge impact on breast health awareness. Thank you for your support and hard work!

Is cancer screening *for me?* [GetCheckedManitoba.ca](http://GetCheckedManitoba.ca)

| Program                             | Who  | What Test                  | When          | How   |
|-------------------------------------|--|----------------------------|---------------|---|
| BreastCheck<br>Cancer Care Manitoba | Women starting at age 50                     | Screening mammogram        | Every 2 years | Call 1-800-903-9290 for an appointment                  |
| CervixCheck<br>Cancer Care Manitoba | All women who have ever been sexually active | Pap test                   | Every 2 years | Visit your doctor or nurse or call 1-866-616-8805       |
| ColonCheck<br>Cancer Care Manitoba  | Men and women 50-74                          | Home screening test (FOBT) | Every 2 years | Call 1-866-744-8961 to request your home screening test |

Speak to your health care provider if you have questions about screening for other cancers.

Est-ce que les tests de dépistage du cancer me concernent? [GetCheckedManitoba.ca](http://GetCheckedManitoba.ca)

| Programme                           | Qui   | Quel test                 | Quand          | Comment   |
|-------------------------------------|---|---------------------------|----------------|---|
| BreastCheck<br>Cancer Care Manitoba | Femme qui commence à 50 ans                             | mammographie de dépistage | Tous les 2 ans | Composez le 1-800-903-9290 pour prendre un rendez-vous                |
| CervixCheck<br>Cancer Care Manitoba | Toutes les femmes qui ont déjà été actives sexuellement | test de Pap               | Tous les 2 ans | Consultez votre médecin ou l'infirmière ou composez le 1-866-616-8805 |
| ColonCheck<br>Cancer Care Manitoba  | Hommes et femmes de 50 à 74 ans                         | test de dépistage (RSOS)  | Tous les 2 ans | Composez le 1-866-744-8961 pour demander votre test à domicile        |

Si vous avez des questions sur les tests de dépistage d'autres cancers, posez-les à votre médecin.



# Applying for a job with the ARHA

The Assiniboine Regional Health Authority (ARHA) employs approximately 3000 people in the southwest corner of Manitoba. With job openings in many different areas such as Health Care Aides, Dietary Services, Management, Public Health, Administration and Housekeeping.

Positions range from full time to part time, to casual.

"The ARHA offers a large array of job opportunities for so many individuals in the rural area. Safe comfortable work environments and a "Team Assiniboine" approach allows for staff to know that the entire workforce is valued; it takes the entire team to provide continued quality health service to our population," stated Larissa Kominko, Recruitment & Retention Officer for the ARHA.

To apply for a position with the ARHA you can check the website, [www.assiniboine-rha.ca](http://www.assiniboine-rha.ca), where new positions are posted every Tuesday and Friday. Available positions are also posted on site job bulletin boards, and depending on the position and its location in various local newspapers throughout the Region.

Once you find a position that you wish to apply for, you can apply online, by fax, or by email.

"Applying online has become popular and is used most often. Faxing your resume can lead to transmission problems. E-mail is a great method as it goes directly to the Centralized Recruitment Team," said Kominko.

"Ensuring that your resume has

arrived for all methods is important and if you are ever unsure if it has been received DOUBLE CHECK!! Call or e-mail, we don't mind checking," said Kominko.

"When mailing your application the date your application arrives by mail to the Regional Office in Shoal Lake is the date that we consider it being received for the position. Please ensure you allow adequate time when mailing your application, as mail can take longer than we think or want," stated Kominko

"Be sure to pay close attention to the deadlines for receipt of applications stated on each job posting. These deadlines are strictly adhered to, and late applications will not be considered," said Kominko.

Even if you are applying for a job at your local hospital be sure to submit your application to Human Resources at the Regional Office in Shoal Lake, do not send it directly to the hospital.

"If you were to take your resume to the local health centre, you will want to make sure the health centre is forwarding your application and resume to Human Resources. Applications and resumes left at the local health centre and not shared with the centralized recruitment team may not be pursued at the health centre," explained Kominko.

If you do not see an available position which you are qualified for keep checking the website until one is posted that you wish to apply for.

"It is not recommended that you send your resume in to have on file. With the vast number of resumes received on a daily basis, it is difficult to maintain & keep track of each & everyone's qualifications related to a specific qualification," said Kominko.

"If you are applying for more than one position at a time it is possible to send in one cover letter and one resume and have the information placed on both posting files, said Kominko. "However you should be completing two application forms, one for each posting you are interested in, and ensure that the applicable Human Resource Posting Number is on the application."

"If you should have questions about the position duties and responsibilities or posting details, individuals can contact Centralized Recruitment at (204) 759-4518 or [humanresourc@arha.ca](mailto:humanresourc@arha.ca) where they will assist as best as possible," explained Kominko.

"A position description can be requested for any position in the Assiniboine RHA. If there are questions directly related to a position rotation, the facility where the position is located can be contacted for assistance," said Kominko.

"I have been working with the ARHA for a total of 13 years. January 2012 will mark four years as the Recruitment and Retention Officer for the Region. I love the opportunity to promote careers in health care," said Kominko.

"The ARHA is a great place to work, they have a strong multidisciplinary teamwork environment, and offer a comprehensive Recognition Program and Health Care Benefits Plan, including a Pension Plan," said Kominko.

**"Be sure to pay close attention to the deadlines for receipt of applications stated on each job posting..."**

## Health Links Manitoba

You need information about a medication you are taking and your pharmacy is currently closed. Who are you going to ask?

Join the 482 people in the Assiniboine Region who have called Health Links in the last three months. Health Links is a 24-hour, 7-days a week telephone information service. You can call any time and speak to a registered nurse who has the knowledge to provide answers over the phone to health care questions and help you get the care you need.

They can help to evaluate

current symptoms and determine if necessary, how quickly you should access medical care. They can also help answer questions about a diagnosed illness you or a loved one might have.

In the last three months the most common things that the people of the Assiniboine Region have called Health Links about are abdominal pain or discomfort, medication questions, postoperative problems, common postpartum problems, pediatric vomiting without diarrhea and pediatric cough and colds.

358 of the calls came from females, with the majority being between the ages of 25-34.

Upon first phoning Health Links 41 people were considering going to the Emergency Room. After discussing their symptoms with the registered nurse on the phone 37 of the people were able to avoid a trip to the Emergency Room.

For more information or to contact Health Links with medical questions please call 204-788-8200 or toll free 1-888-315-9257 24 hours a day, seven days a week.



## ASSINIBOINE REGIONAL HEALTH AUTHORITY

# DONATIONS

FOR THE PERIOD ENDED SEPTEMBER 30, 2011

| Account Name                       | Amount                 |
|------------------------------------|------------------------|
| Baldur Health Centre               | \$ 23,721.84           |
| Birtle Health Centre               | 57,393.96              |
| Boissevain Health Centre           | 23,750.49              |
| Boissevain - Westview PCH          | 25,624.31              |
| Carberry Health Centre             | 36,921.09              |
| Davidson Memorial Health Centre    | 6,968.94               |
| Deloraine Health Centre            | 183,670.63             |
| Elkwood PCH                        | 8,042.82               |
| Erickson Health Centre             | 5,263.23               |
| Glenboro Health Centre             | 35,212.82              |
| Hamiota Health Centre              | 33,095.15              |
| Hartney PCH                        | 43,278.66              |
| Killarney - Tri Lake Health Centre | 45,588.37              |
| Melita Health Centre               | 225,443.28             |
| Minnedosa Health Centre            | 43,600.93              |
| Minnedosa PCH                      | 16,953.39              |
| Neepawa Health Centre              | 87,507.31              |
| Neepawa PCH                        | 175,632.08             |
| Reston Health Centre               | 28,127.25              |
| Rivers Health Centre               | 86,520.86              |
| Rosburn Health Centre              | 29,502.52              |
| Russell Health Centre              | 122,271.95             |
| Russell PCH                        | 5,982.33               |
| Sandy Lake PCH                     | 18,156.78              |
| Shoal Lake Health Centre           | 263,502.06             |
| Souris Health Centre               | 64,439.07              |
| Tiger Hills Health Centre          | 251,167.31             |
| Virten Health Centre               | 36,726.20              |
| Virten - The Sherwood              | 15,782.63              |
| Virten - Westman PCH               | 23,714.67              |
| Wawanessa Health Centre            | 18,199.62              |
| Regional Programs                  | 188,940.97             |
| EMS in total                       | 134,488.87             |
| <b>Total</b>                       | <b>\$ 2,365,192.39</b> |

Find a career where you can be part of a "Team"

# Find a career with the ARHA

View current career opportunities on our website

**ASSINIBOINE RHA**  
**JOBS**  
[www.assiniboine-rha.ca](http://www.assiniboine-rha.ca)



Human Resources Services (204) 759-4518

# Smoking Cessation

As 2012 approaches, we begin to think of goals and resolutions for the New Year to come. A popular resolution is often “I want to quit smoking.”

The Assiniboine Healthy Living Team is here to help turn that resolution into a reality.

There are several effective resources available to current smokers, smokers who are in the transition phase, and past smokers to help through the challenging feat of quitting smoking.

The “Smoker’s Help Line” is a program of the Canadian Cancer Society. The Smokers Help Line offers free, confidential, bilingual assistance to anyone who calls the line or connects on-line via [www.smokershelpline.ca](http://www.smokershelpline.ca).

The phone number is 1-877-513-5333 and Smokers Help Line information is also available through Christa Veitch, Health Promotion Coordinator, tel. 1-204-764-2412 ext 268.

The Assiniboine Regional Health Authority (ARHA), in conjunction with the Registered Nurses Association of Ontario, is hosting two 1-day Smoking Cessation Champion Workshops. ARHA nurses and other health professionals will learn how to utilize best practice techniques called “brief interventions” in their everyday interactions with clients and patients. This workshop has been offered twice before in ARHA, and the health professionals who attended are

prepared and willing to discuss smoking cessation with patients and clients.

Manitoba smokers who want to quit also now have access to a treatment option called Champix. This drug has been added to the Manitoba Drug Formulary. When a physician gives a patient a written prescription, the cost of this drug is eligible for benefit coverage through Pharmacare once the income-based family deductible has been met.

Please feel free to discuss your goals, concerns, and/or questions around quitting when talking with your health care provider; they can support you and offer resources that will help you through your journey.

## Keep Your Kids Smoke-free

Excerpted from Health Canada  
Website: [www.hc-sc.gc.ca](http://www.hc-sc.gc.ca)

### Guide to Protecting your Child Against Tobacco Use

As children grow, their view of the world changes. As these changes occur, children pass through stages in their awareness and use of tobacco. A variety of factors can lead to tobacco use and to regular smoking among youth.

By being aware of the potential risk factors for tobacco use, you can be better prepared to support healthy tobacco-free choices for your children. This section provides strategies and tips that you can use at various stages of your child's development, in order to help them steer clear of smoking.

6 Years Old and Under: Children begin to form their attitudes and beliefs about tobacco at an early age. Be aware that the peo-

ple your child sees on a daily basis will influence their perception of the world around them and shape their attitudes and beliefs about tobacco.

7 to 11 Years Old: Up until they are about 7, most Canadian children do not experiment with tobacco, but they may be exposed to older youth and family members who smoke or use chewing tobacco. However, by the time they are about 10 or 11, they begin to move toward the

stage of experimenting with tobacco.

12 to 14 Years Old: Youth may have moved from experimenting with tobacco to occasional use (i.e. on weekends or at a party) by this age. This is also the age when youth start to test their parental authority and it is an extremely risky time for smoking to start. Peer pressure begins to build at this stage and it is quite possible that your child will have friends who smoke.

15 to 19 Years Old: The period between 15-19 years is a critical time for young people who are most at risk for taking up smoking. Fortunately, recent Canadian statistics show that the percentage of youth aged 15-19 who smoke is decreasing. While this is encouraging, it's important to note that over half of smokers have tried their first whole cigarette by age 15, and 90% of smokers have smoked their first whole cigarette by age 19.



## Conservez une vie sans fumée pour vos enfants

Excerpted from Health Canada  
Website: [www.hc-sc.gc.ca](http://www.hc-sc.gc.ca)

### Guide pour protéger votre enfant contre le tabagisme

À mesure que les enfants vieillissent, leur vision du monde change. Lorsque ces changements se produisent, la prise de conscience du tabagisme et l'usage du tabac passent également par diverses étapes. Une gamme de facteurs peuvent entraîner l'usage du tabac et la consommation régulière de cigarettes chez les jeunes.

En étant sensibilisés aux facteurs de risque possibles relatifs à l'usage du tabac, vous pourrez mieux vous préparer à appuyer des choix sains sans tabac pour vos enfants. Cette section vous propose des stratégies et des conseils pratiques que vous pouvez utiliser à diverses étapes de la croissance de votre enfant, afin de

l'aider à ne pas fumer.

Enfants de six ans et moins : les enfants commencent à un jeune âge à façonner leurs attitudes et opinions au sujet du tabac. Bien qu'ils ne soient pas sur le point de commencer à fumer, les gens qu'ils voient quotidiennement agissent sur leur perception de leur environnement et, par le fait même, influent sur le développement de leurs attitudes et opinions au sujet du tabagisme.

Enfants de 7 à 11 ans : pour la plupart, les enfants canadiens ne font pas l'expérience du tabac avant d'avoir sept ans environ, mais ils peuvent être en contact avec des jeunes plus âgés et avec des membres de la famille qui fument ou qui chiquent du tabac. Mais vers 10 ou 11 ans, ils sont à l'âge où ils pensent à faire l'expérience de la cigarette.

Enfants de 12 à 14 ans : À ce moment, votre enfant aura peut-être dépassé l'étape de l'expéri-

ence proprement dite pour faire un usage occasionnel du tabac (les fins de semaine ou lors d'une fête, par exemple). C'est aussi l'âge où les jeunes testent l'autorité parentale, période qui se prête particulièrement à l'apprentissage de la cigarette. C'est à cette époque que la pression des camarades commence à se faire sentir et il est très probable que votre enfant aura des copains qui fument.

Adolescents de 15 à 19 ans : La période se situant entre 15 et 19 ans est critique pour les jeunes les plus à risque de commencer à fumer. Heureusement, des statistiques canadiennes récentes montrent que le nombre de jeunes de cet âge qui fument diminue. Même si cela est encourageant, il est important de noter que plus de la moitié des fumeurs ont essayé leur première cigarette entière avant 15 ans, et 90 % des fumeurs l'ont fait avant 19 ans.

## National Non-Smoking Week (NNSW) 2012

### Breaking up is hard to do

The Canadian Council for Tobacco Control (CCTC) is pleased to announce the 2012 NNSW theme - “**Breaking up is hard to do**”.

As you may be aware, NNSW has been observed for more than 30 years and is one of the longest running and most important events in the CCTC's ongoing public education efforts regarding the consequences of tobacco use. Its goals are:

- to educate Canadians about the dangers of smoking;
- to prevent people who do not smoke from beginning to smoke and becoming addicted to tobacco;
- to help people quit smoking;
- to promote the right of individuals to breathe air unpolluted by tobacco smoke;
- to denormalize the tobacco industry, tobacco industry marketing practices, tobacco products, and tobacco use; and
- to assist in the attainment of a smoke-free society in Canada.

### Why do We Continue to be Concerned about Tobacco Use?

Tobacco remains the leading preventable cause of disease and death in Canada, killing 37,000 Canadians annually. Direct health care costs from tobacco exceed \$4.4 billion per year, and total

economic costs are greater than \$17 billion per year. For every premature death caused by tobacco, there are at least 20 people living with a tobacco-related illness. The burden of tobacco disease is an epidemic, and must be treated as such.

For more information about NNSW please visit [www.nnsw.ca](http://www.nnsw.ca) or to learn more about the CCTC and its services please visit [www.cctc.ca](http://www.cctc.ca).



## Semaine nationale sans fumée (SNSF) 2012

Dur, dur de rompre. Mais il faut mettre fin à cette relation malsaine.

Le Conseil canadien pour le contrôle du tabac (CCCT) est heureux d'annoncer le thème de la SNSF 2012 – « **Dur, dur de rompre. Mais il faut mettre fin à cette relation malsaine.** ».

Comme vous le savez sans doute, la SNSF existe depuis plus de 30 ans et est une des plus longues et plus importantes activités tenues dans le cadre des efforts continus d'éducation publique du CCCT au sujet des conséquences de l'usage du tabac. Ses buts sont les suivants :

- éduquer les Canadiens sur les dangers du tabagisme;
- éviter que les gens qui ne fument pas commencent à fumer et deviennent dépendants du tabac;
- aider les gens à cesser de fumer;
- promouvoir le droit des gens de respirer de l'air non pollué par la fumée du tabac;
- dénormaliser l'industrie du tabac, ses pratiques de marketing et ses produits, de même que le tabagisme; et,

- contribuer à l'atteinte d'un Canada sans tabac.

### Pourquoi l'usage du tabac continue-t-il à nous inquiéter?

L'usage du tabac demeure la principale cause évitable de maladie et de décès au Canada et tue chaque année plus de 37 000 Canadiens. Les coûts directs de soins de santé liés au tabac dépassent annuellement 4,4 milliards de dollars et les coûts économiques totaux sont de plus de 17 milliards de dollars par année. Pour chaque décès prématuré causé par le tabac, on compte au moins 20 personnes souffrant d'une maladie liée au tabagisme. Le fardeau des maladies liées au tabac est une épidémie et doit être traité comme tel.

Pour un supplément d'information sur la SNSF, visitez le site [www.SNSF.ca](http://www.SNSF.ca). Pour en savoir davantage sur le CCCT et ses services, rendez-vous au [www.cctc.ca](http://www.cctc.ca).

# Have you had a Home Health and Safety Check?

According to the Public Health Agency of Canada, one in three people over the age of 65 have a slip or fall each year. For many, a fall can lead to a permanent loss of independence. Most of the falls occurring in a person's home are preventable.

"The Home Health and Safety

Check (HH&S) program is designed to help people recognize fall hazards and make simple changes to their homes so that they can be safer, and reduce the risk of a fall," explained Jonathan Lovegrove, coordinator for the program across the Assiniboine Regional Health Authority (ARHA).

"The program is operated by the Emergency Medical Services (EMS) program in the ARHA. Participation in the program is voluntary and solicited via phone contact from EMS personnel," said Lovegrove.

"Once a visit is booked two EMS personnel will go to the resident's home. They will begin by checking all areas of the home for falls safety concerns using the HH&S Checklist. The resident is encouraged to accompany the EMS personnel during the check," said Lovegrove.

"Smoke detectors within the home are also checked, and the batteries for the detectors are replaced free of charge. For those that don't have an Emergency Response Information Kit (ERIK), one is provided at no charge," said Lovegrove. "The aim is to make the check educational, and let the resident know what we are checking and why it is important."

"After the check is completed

the resident is provided with the Idea List. Any areas of concern are highlighted on the Idea List which provides the resident with helpful ideas to improve home safety inside and outside of the home. The

resident is not under any obligation to make any changes, these are just things that the EMS have noticed while being in their home where improvements could be made for their safety," said Lovegrove.

"Thirty days after the visit the resident will receive a follow-up phone call. The phone call is an opportunity for the resident to ask any questions they may have about the program," said Lovegrove.

"Additionally, the follow-up phone call is used by EMS to conduct a brief survey asking three short questions: was the visit helpful, how aware of home safety issues are you now, and have any safety improvements been made following the visit. The phone call

to the resident concludes the program for the resident," explained Lovegrove.

"The program also seeks to build community connections. During the HH&S visits information is provided for other health services available in the community. This helps link people to other services they may require, like Home Care, Public Health and other medical professionals in their community such as Dentists, Physiotherapists, Chiropractors, etc." said Lovegrove.

"With this program we want to help people to remain living safely in their own homes. We hope to achieve a greater awareness of falls prevention and an increased awareness of simple steps that people can take to reduce the risk for injury from a fall," stated Lovegrove.

The program is currently operating in Carberry, Deloraine, Souris, Boissevain, Minnedosa, Treherne, and Erickson, with plans of expanding to additional communities in the works. If you would like more information on the program please contact your local EMS, or Jonathan Lovegrove, program coordinator at 204-636-6804.

## Snow Shoveling

While shoveling snow in the winter can be a great form of exercise, please take caution to make sure you do it as safely as possible. Below are some tips and guidelines to help keep you safe this winter while shoveling.

- 1. Talk to your doctor:** For your own safety, ask your doctor if he/she feels snow shoveling is safe for you. A shovel full of wet snow can weigh as much as 25 pounds.
- 2. Listen to your body:** Stop if you feel pain or observe heart attack warning signs. These may include chest pain as well as shoulder, neck or arm pain; dizziness, fainting, sweating or nausea; or shortness of breath. If you think you're having a heart attack, seek medical help immediately.
- 3. Warm up:** Be sure your muscles are warm before you start shoveling. Stretch your arms and legs, go for a short walk, or march in place for several minutes. Cold, tight muscles are more likely to sprain or strain than warm, relaxed muscles.
- 4. Keep hydrated:** Take a bottle of water out with you and keep it accessible, either in the car or on the front stoop or somewhere else convenient. Take a break and have a drink when needed.
- 5. Dress appropriately:** If it is cold outside, wear multiple layers for insulation, and so that you can shed layers if you become overheated. Be sure to cover your extremities to guard against frostbite. Wear shoes and boots with solid treads on the soles to help minimize the risk of slips and falls.
- 6. Lift properly:** Lift with your legs not your back. Bend your knees and keep your back as straight as possible so that the lifting comes from your leg muscles, not your back. Never bend at the waist. Step in the direction that you are throwing snow. This will help prevent the lower back from twisting and will help alleviate any back soreness that you might typically experience the day after a hard shoveling job.
- 7. Avoid caffeine or nicotine before beginning:** These are stimulants, which may increase your heart rate and cause your blood vessels to constrict. This places extra stress on the heart.
- 8. Pick the right shovel:** A smaller blade will require you to move less snow at a time, putting less strain on your body. Use a lightweight, non-stick, push-style shovel.
- 9. Push. Don't lift:** Save your back and your energy by simply pushing the snow to the side instead of lifting the snow and throwing it off to the side.
- 10. Don't let the snow pile up:** Removing small amounts of snow on a frequent basis is less strenuous in the long run.



If you think you are unable to shovel snow safely consider hiring a student or using a volunteer service if you are a senior. Contact your local town office for your available options of safe snow removal.

*"Once a visit is booked two EMS personnel will go to the resident's home..."*

## How Did We Do?

Have you accessed an ARHA service lately?  
**WE CARE WHAT YOU THINK**



**Click here!**

**Have you recently received a service from the ARHA?**

Please go to [www.assiniboine-rha.ca](http://www.assiniboine-rha.ca)

to complete the

**Client Satisfaction Questionnaire.**

**Did we exceed your expectations?**

**Could we improve our services?**

**We care what YOU think.**



Our last public newsletter featured a gentleman many of us had the pleasure of meeting. We learned upon publication of the newsletter that Mr. Beaulieu had passed away. Mr. Ernie Beaulieu was one of those people who brought joy and a smile to those he met. He will be missed by the staff at the Russell dialysis unit and by many of us in the region who met him as he celebrated the grand opening of the dialysis unit in Russell with us.

# The Assiniboine Regional Health Authority Meets 95% of National Standards and has Achieved Accreditation through Accreditation Canada

## How do we know that?

External peer reviewers came to assess the quality of our services based on national standards of excellence. The peer review is completed by Accreditation Canada and is referred to as “the Accreditation process”.

## Why do we go through the Accreditation process?

We are committed to quality improvement, patient safety, improved efficiency and demon-

strating our accountability. Accreditation is one of the most effective ways for health services organizations to consistently examine and improve the quality of their services. Health care organizations that participate in Accreditation Canada’s accreditation programs are evaluating their performance against national standards of excellence.

## When does this happen in the Assiniboine Regional Health Authority?

Every three years surveyors

from Accreditation Canada visit our region to see how we compare to the national standards. They look at all of our programs and services, and let us know from their perspective what we are doing well and provide us with recommendations for improvement. We use these recommendations to ensure we are providing the best possible care for our patients, residents, and clients.

During the week of November 27th to December 2nd 2011 peer reviewers from Accreditation

Canada toured many of the facilities and programs in our Region. They spoke with staff, patients and volunteers to determine how well our processes are working. They also observed the care we were providing. Out of 1767 criterion used by Accreditation Canada, the preliminary report indicates that we met 1672 criterion.

## What Next?

Quality Improvement teams within the Region will be working closely together with patients, residents and staff of the Assiniboine Regional Health Authority to review and develop action plans to address any areas for improvement that were identified by Accreditation Canada.

For more information on Accreditation Canada you can go to their website: [www.accreditation.ca](http://www.accreditation.ca)

## PCH Standards 2011

In 1997, a resident in one of the personal care homes in Manitoba was attacked and seriously injured by a fellow resident and subsequently died of the injuries. This incident prompted the Minister of Health to ask for an investigation into the state of personal care homes in the province of Manitoba. One of the recommendations to come from this review was to initiate new standards and to monitor compliance of the standards within each personal care home in the province. After extensive consultation with the Department of Health and personal care homes, 26 minimum standards of care (including 324 separate measures) were identified and put forward as The Personal Care Homes Standards Regulation

(2005) under the Health Services Insurance Act.

The Assiniboine Regional Health Authority has 28 Personal Care Homes which have undergone review visits in 2006, 2009 and 2011. In 2006 62% of the measures were met, in 2009 67% were met and in 2011 compliance improved to 90%.

At the present time the recommendations from 2011 are being addressed with the goal of meeting and exceeding all of the standards during the next review in 2013.

As part of a climate of increasing vigilance for the quality of care and services provided to the residents of Manitoba’s PCH’s, Manitoba Health has identified the importance of placing conditions on PCH licenses

where warranted. Each year Manitoba Health reviews the results of the most recent Standards Reviews and follow-up, the most recent accreditation report, critical incident reports, Protection For Persons In Care Office reports and any other outstanding concerns for resident wellbeing. The region is pleased to report that all PCH’s in the ARHA have received full operating licenses for 2012 with no conditions attached. The care and safety of our residents continues to be a high priority for the ARHA Board and staff.

For further information call the applicable Site Manager, Garlen Maxwell, Executive Director of Facility Services or Lori Jones, Coordinator Facility Program Standards.



## Winter’s SAD Times

Winter got you feeling like you don't want to get out of bed? That's probably nothing to worry about — unless you find your mood slipping around the time the clocks go back in October until they spring ahead in March.

You could be suffering from Seasonal Affective Disorder (SAD), a form of depression that follows a seasonal pattern.

The Canadian Mental Health Association estimates that one to three per cent of Canadians suffer from cases of SAD that are bad enough to affect their ability to cope with life.

Of patients suffering from a major depression, 11 per cent are also likely to develop SAD as the longer daylight hours of spring and summer fade into autumn and winter's longer hours of darkness.

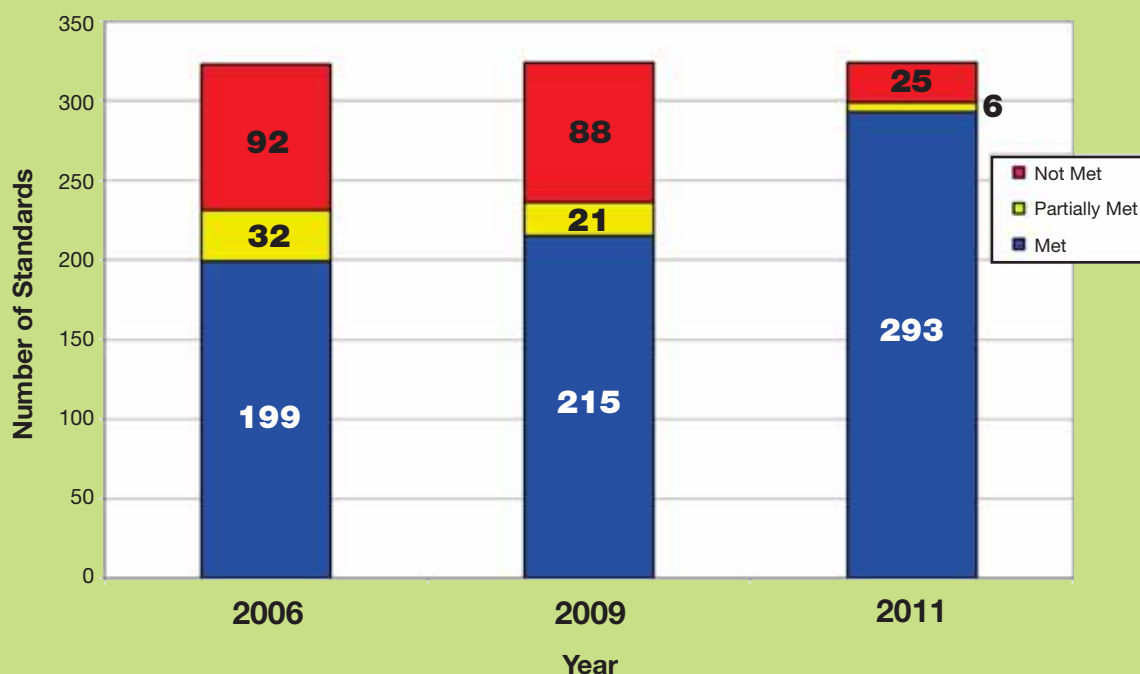
SAD was recognized as a disorder in the early 1980s, but researchers have been aware of its symptoms for 150 years. One of the problems with diagnosing SAD is that its symptoms are similar to other types of depressions. Those symptoms include:

- Loss of pleasure in activities.
- Persistent sad, anxious or "empty" mood.
- Irritability and desire to avoid social contact.
- Depression that subsides in the spring and summer months.
- Changes in appetite, especially increased cravings for sugary or starchy foods.
- Weight gain.
- Decreased energy
- Difficulty concentrating.
- A tendency to oversleep.

Many people don't realize there's anything wrong. They may dismiss their symptoms as the winter blahs, which might peak in January and February and go away as the daylight hours get longer. But if the symptoms return two years in a row, it may be time to seek medical attention.

Canadian Mental Health Association

ARHA Personal Care Home Standards Met, Partially Met & Met 2006 – 2011 comparison n=324



Source: ARHA PCH Standards Data Summary 2006-2011 via MB Health

# Primary Care Program

The ARHA Primary Care Program provides access to a broad range of health care services. For communities that might have difficulty accessing a family physician, Nurse Practitioners- RN(EP)s are available to provide a wide spectrum of prevention, assessment and treatment services. The program offers a variety of screening options for clients as well as one on one health education to support healthy lifestyle choices. These services are delivered by RN (EP)-Nurse Practitioners who work collaboratively with regional physicians and a team of nurses trained to provide cervical screening throughout the regional network of Women's Wellness Clinics.

The designation of RN (EP) refers to a nurse who is registered on the extended practice registry. He/she has completed advanced nursing education and has passed an approved examination on extended practice competencies. RN (EP)s can prescribe medications, order and manage the results of screening and diagnostic tests and perform minor surgical and invasive procedures. RN (EP)s can practice in a variety of community, acute and long term care settings. They provide nursing services in the areas of health promotion, illness prevention, management of specific illnesses, palliation, and rehabilitation.

The Rivers, Wawanesa, Carberry, Rossburn and Erickson Medical Clinics as well as the Neepawa (Country Meadows) Personal Care Home are staffed with RN(EP)s - Nurse Practitioners.

An important component of the primary care program is the Electronic Primary Care Record. Nurse Practitioners and Family Physicians use the electronic record currently. Sixteen clinics across the region share the Electronic Primary Care Record. This includes those working in the communities of Russell, Birtle, Hamiota, Souris/Hartney, Erickson, Treherne, Rossburn with access from Waywayseecappo, Wawanesa, Virden with access from Canupawakpa, Baldur, Boissevain, Rivers, Melita, Deloraine, Glenboro and the Beautiful Plains Community Medical Clinic in Neepawa. The in-

creased availability of medical information to specific health care providers throughout the region improves continuity of care, lessens duplication of lab tests or services and result in better quality health care services for all clients.

The Women's Wellness Clinics have been established on a rotating basis across the region to improve access to cervical screening (PAP tests) and clinical breast examinations completed by a trained female provider. A complete schedule for the Women's Wellness Clinics is available on the Assiniboine RHA website.

The newest addition to the Primary Care Program is that of Patient Navigator- Cancer Services. The Patient Navigator is a trained nursing professional with cancer care experience, who provides guidance and support to patients and families through their entire cancer journey and improves access to services, community supports and resources in a timely manner. The Patient Navigator will establish partnerships with community based care providers, oncologists and other health professionals to help patients and families affected by cancer address a wide range of physical, psychological, social, emotional and practical needs. The Patient Navigator serves as a link between patients and the cancer care system, and helps bring care closer to home to improve the patient journey, whenever possible. The Patient Navigator is based out of the Deloraine Community Cancer Program site and can be reached by calling 204-747-2243. The days that she is available are Wednesday, Thursday and Friday.

The RN (EP)s work in collaboration with the Diabetes and Heart Health Program staff to assist client attainment of healthy lifestyle and self- management skills regarding diabetes, heart health and related risk factors.

For further information about the Primary Care Program or the services it provides- please contact the Primary Care Practice Manager at 204-859-5304.

*"Primary Care – A Partner in Your Care!"*



**Pat Gibson Exalted Ruler of Killarney Elks Lodge # 238 presented a cheque for \$500.00 to Public Health Nurse Lori-Dee Anderson. \$250.00 was obtained from the Elks Foundation and matched by the local Lodge for the purchase of a portable electronic scale. The Nurses use this scale when assessing newborns on their post partum follow up visits.**

## Communities that the Nurse Practitioners visit and their availability:

### COMMUNITY

Rivers Medical Clinic  
 Birdtail-Sioux First Nation Health Unit  
 Wawanesa Medical Clinic  
 Canupawakpa Dakota Nation Health Unit  
 Sioux Valley First Nation Health Unit  
 Country Meadows Personal Care Home - Neepawa  
 Carberry Medical Clinic  
 Rossburn Medical Clinic  
 Waywayseecappo First Nation Health Unit  
 Erickson Medical Clinic  
 Keeseekoowenin First Nation Health Unit

### DAYS AVAILABLE

Two/Three days per week alternately  
 Once a month or upon request  
 Monday, Wednesday and Friday  
 Tuesday  
 Once a month or upon request  
 Monday and Wednesday  
 Tuesday and Thursday  
 Tuesday, Wednesday and Thursday  
 Friday  
 Tuesday, Wednesday, Thursday and Friday  
 Once a month or upon request

### TELEPHONE

204-328-7941  
 204-568-4545  
 204-824-2993  
 204-854-2990  
 204-855-2690  
 204-476-2383  
 204-834-2126  
 204-859-2566  
 204-859-5080  
 204-636-6809  
 204-625-2043

# Just Clean Your Hands

## Improving on Hand Hygiene Practices in the Health Care Setting

Submitted by ARHA Infection Control

In the Assiniboine Regional Health Authority (ARHA) we give the message to all of our staff that hand hygiene is the single most important way to prevent health care acquired illnesses and infections to the clients we provide care to. We also promote hand hygiene to visitors entering our health care settings by having hand sanitary gel stations available for their use.

Despite education and awareness efforts, it is globally recognized that hand hygiene technique and compliance is not as good as it should be in health care settings. This has been determined through the hand hygiene auditing process.

Excerpt from Accreditation Canada Guidelines:

“Hand hygiene audits allow organizations to monitor compliance with hand hygiene protocols, improve education and training on hand hygiene, evaluate hand hygiene facilities, and benchmark compliance practices across the organization. Studies have shown that improvements in compliance with hand hygiene practices has decreased the number of health care associated infections.”

In keeping with Accreditation Canada Standards, the ARHA monitors staff compliance in hand hygiene practices through hand hygiene audits completed each October during National Infection Control Week. The audits monitor:

- Staff and visitor knowledge/demonstration of hand hygiene practices;
- Hand hygiene product availability and placement;
  - Containers of alcohol based hand rub placed on med carts. Staff can carry the hand rub with them- especially in community settings
  - Placement of extra alcohol dispensers where there are limited sinks available to staff for hand washing
- Hand sanitary dispenser usage in public areas;



- Signage in visible areas that encourages everyone to wash their hands frequently along with instructions on how to complete proper hand washing.

The ARHA has participated in the Safer Healthcare Now –Stop! Clean Your Hands campaign in the month of May for the past 2 years. Staff and visitor awareness is promoted utilizing a variety of tools:

- Fact sheets for staff, i.e., “Your 4 Moments for Hand Hygiene”;
- Fact sheets for visitors, i.e. “Frequently Asked Questions” and “How to Speak to Healthcare Workers About Hand Hygiene”;
- Patient & Family Hand Hygiene Guide;
- Promotional tools, i.e., book marks, place mats.

Infection Control staff collaborate provincially with peers to discuss leading practices used in other regions. This participation ensures that current information can be shared throughout the ARHA in a timely manner. Regional improvements are ongoing and hand hygiene audit practices are currently being examined.

The Assiniboine RHA will continue to encourage, promote, educate and audit hand hygiene practices with our staff. This will ensure that the safety of our clients, visitors and staff are being met.

So to everyone: **Please - Just Clean Your Hands** frequently when you are in a health care setting and ask if you are unsure where or how to do so. This will strengthen the safety and quality of care our clients receive in the ARHA.

## Community Volunteer Income Tax Program

Many people do not complete income tax returns because they may not work full time or work at all and often they do not have the money to pay to have their taxes done. Often students and seniors face the same income challenge.

Income is the most important determinant of health. Lower income is associated with poorer health status. For this reason, the Assiniboine Regional Health Authority supports a Health Promotion Coordinator to facilitate the Community Volunteer Income Tax Program (CVITP). This free program assists people who cannot afford to pay to have their taxes completed and as a result, obtain income they would not otherwise receive. The CVITP trains volunteers to help low income individuals and families complete their tax returns. Completing a tax return is needed in order to qualify for many government funded programs, including the Child Tax Benefit and the GST rebate.

The CVITP is a partnership of Assiniboine Regional Health Authority with Canada Revenue Agency, which provides training and technical support to volunteers. Numerous local partners in the following ARHA communities will be offering the program in 2012: Birtle, Carberry, Elkhorn, Minnedosa, Neepawa, Rivers, Russell, Souris and Virden. Local community partners include recreation directors, adult learning centres, municipal libraries,

Manitoba Agriculture Food and Rural Initiatives (MAFRI), and other local service providers.

Community volunteers receive training from Canada Revenue Agency to complete electronic tax returns for individuals and families. Community partners provide computer access and a meeting place /drop-off/pickup location for the volunteers and clients. Volunteers sign confidentiality agreements. All records are kept by the individual client and Canada Revenue Agency. No electronic or paper documents remain with the volunteers, the CVITP, or Assiniboine RHA.

As a volunteer, participating in the CVITP is a rewarding opportunity to assist others who otherwise might not file an income tax return. It is a short time commitment because the program is completed between February and April 30th of each year. This year, the ARHA would like to bring the CVITP to the following communities and their surrounding areas: Killarney, Boissevain, Deloraine, and Melita. In order to do this, we need volunteers. If you are interested in volunteering, please call toll-free 1.877.509.7852.

Community volunteers and the Community Volunteer Income Tax Program help to put money in the pockets of those who need it most.

For more information, to find out if the CVITP is for you, or to volunteer, please call toll-free 1.877.509.7852.

# Healthy Food Taste Testing Grant

## Only Available while Funds Last!

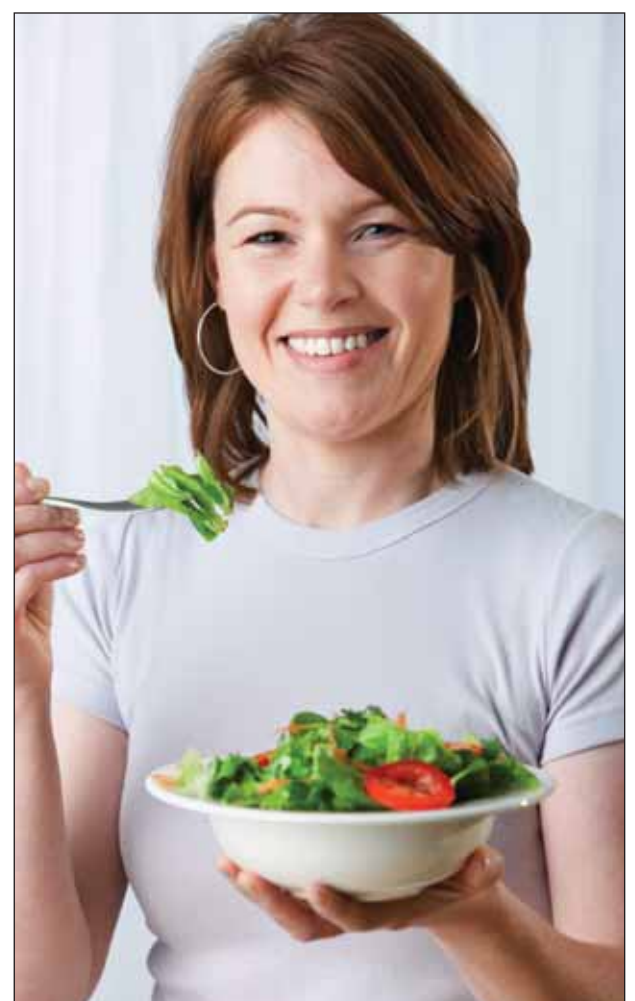
Did you know there are a number of community partners working together to assist Westman communities to build supportive environments where healthier food choices can be offered in their community? The Making the Move to Healthy Choices Committee consists of representatives from Westman Recreation Practitioners Association, Assiniboine and Brandon Regional Health Authorities, and MB Healthy Living, Youth & Seniors. This committee formed in 2007 with the goal of increasing awareness, and providing resources to support recreation facilities in their effort to provide nutritious food options in the facilities where families live, learn and play.

Every athlete – competitive or

recreational – needs fuel, fluids and nutrients to perform at his or her best. Physical activity, athletic performance and recovery from exercise are enhanced by nutritious choices. While many Manitoban families spend countless hours each week at sports and recreation facilities, those facilities often don't offer a selection of healthy food choices for meals and snacks at their canteens and concessions.

If you are thinking about incorporating new healthier options into your menu and you would like to test out some of your ideas, a good way to do so is to apply for the Making the Move to Healthy Choices Taste Testing Grant. This grant would allow

your recreational facility to trial a new menu item or product and provide free samples to your customers. A grant of up to \$100.00 is available (while funds last) to help facility operators introduce a new healthy menu item. Eligible applicants include not-for-profit owner/operators of the following community facilities: arenas, curling rinks, indoor pools, youth centres, community centres and bowling alleys. The facility must be located within the boundaries of the Assiniboine and Brandon Regional Health Authorities (Westman region). For program guidelines and grant application visit our website at Westman Healthy Lifestyle Coalition or contact Kris Doull at (204) 726-6069.



## Women's Wellness Clinics

*Winter 2012 – Spring 2012*

# For Cervical Screening and Clinical Breast Examinations

### **Baldur Medical Clinic – Baldur Health Centre**

|                  |                    |
|------------------|--------------------|
| February 3, 2012 | 10:00 am – 3:00 pm |
| April 27, 2012   | 10:00 am – 3:00 pm |
| June 8, 2012     | 10:00 am – 3:00 pm |

*Call 1-877-378-3077 for an appointment.  
Walk-ins welcome.*

### **Birtle Medical Clinic - Birtle Health Center**

|                  |                   |
|------------------|-------------------|
| February 8, 2012 | 2:00 pm – 6:00 pm |
| April 4, 2012    | 2:00 pm – 6:00 pm |
| June 13, 2012    | 2:00 pm – 6:00 pm |

*Call 842-3990 for an appointment.  
Walk-ins welcome.*

### **Erickson Primary Care Access Site – Erickson Health Center**

|                  |                    |
|------------------|--------------------|
| January 23, 2012 | 10:00 am – 3:00 pm |
| February 6, 2012 | 10:00 am – 3:00 pm |
| March 19, 2012   | 10:00 am – 3:00 pm |
| April 16, 2012   | 10:00 am – 3:00 pm |
| May 7, 2012      | 10:00 am – 3:00 pm |
| June 18, 2012    | 10:00 am – 3:00 pm |

*Call 636-6809 for appointment. Walk-ins welcome.*

### **Hamiota Medical Clinic – Hamiota Health Centre**

|                  |                    |
|------------------|--------------------|
| January 24, 2012 | 10:00 am – 3:00 pm |
| February 7, 2012 | 10:00 am – 3:00 pm |
| March 20, 2012   | 10:00 am – 3:00 pm |
| April 17, 2012   | 10:00 am – 3:00 pm |
| May 8, 2012      | 10:00 am – 3:00 pm |
| June 19, 2012    | 10:00 am – 3:00 pm |

*Call 764-2412 for appointment. Walk-ins welcome.*

### **Hartney Medical Clinic – Hartney Health Centre**

|                  |                    |
|------------------|--------------------|
| January 22, 2012 | 10:00 am – 3:00 pm |
|------------------|--------------------|

*Call 858-3107 for appointment. Walk-ins welcome.*

### **Melita Medical Clinic – Melita**

|                   |                    |
|-------------------|--------------------|
| January 6, 2012   | 10:00 am – 3:00 pm |
| February 24, 2012 | 10:00 am – 3:00 pm |
| March 16, 2012    | 10:00 am – 3:00 pm |
| April 13, 2012    | 10:00 am – 3:00 pm |
| May 25, 2012      | 10:00 am – 3:00 pm |
| June 8, 2012      | 10:00 am – 3:00 pm |

*Call 522-8353 for appointment.*

### **Rosburn Medical Clinic – Rosburn Health Centre**

|                   |                    |
|-------------------|--------------------|
| February 15, 2012 | 10:00 am – 3:00 pm |
| March 7, 2012     | 10:00 am – 3:00 pm |

*Call 859-2566 for an appointment. Walk-ins welcome.*

### **Russell Medical Clinic – Russell**

|                   |                    |
|-------------------|--------------------|
| January 16, 2012  | 10:00 am – 3:00 pm |
| February 13, 2012 | 10:00 am – 3:00 pm |
| March 5, 2012     | 10:00 am – 3:00 pm |
| April 18, 2012    | 10:00 am – 3:00 pm |
| May 9, 2012       | 10:00 am – 3:00 pm |
| June 20, 2012     | 10:00 am – 3:00 pm |

*Call 773-2146 for an appointment.  
Walk-ins welcome.*

### **Sioux Valley Dakota Nation – Sioux Valley Health Centre**

|                  |                    |
|------------------|--------------------|
| January 13, 2012 | 10:00 am – 3:00 pm |
|------------------|--------------------|

*Call 855-2690 for an appointment.  
Walk-ins welcome.*

### **Waywayseecappo First Nation – Waywayseecappo Health Unit**

|                   |                    |
|-------------------|--------------------|
| February 17, 2012 | 10:00 am – 3:00 pm |
|-------------------|--------------------|

*Call 859-5080 for an appointment.  
Walk-ins welcome.*

All Clinics are done by a team of trained Registered Nurses from the Assiniboine Regional Health Authority.