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HEALTH *beat*

January 2006
Volume 9, Issue 1

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Our Mission

To provide healthcare professionals with job opportunities, continuing education, new products, resources, and editorials to help them succeed in their careers.

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Editorial: by Jennifer (Jay) Sherwood BScN, MEd.

Wait times: Some possible solutions

While writing this editorial, the first for the new year, we still are in the throes of pre-Christmas celebrations. When people who we know gather to celebrate the season, discussion inevitably gets around to health care and some of the issues that contribute to Canadians' complaints about the systems in the provinces and territories. The most typical of these discussions has been on how long it takes to get treatment. This issue is most commonly referred to as "wait times".

In September 2004, an agreement amongst the First Ministers of the Federal, Provincial and Territorial governments was reached. The agreement, "10 - Year Plan to Strengthen Health Care" set out a requirement for Canadian jurisdictions to establish benchmarks for medically acceptable wait times in five priority areas, namely: cancer, heart, diagnostic imaging, joint replacements and sight restoration. Meeting the December 31, 2005 agreed upon deadline, the provinces and territories announced the benchmarks in the five priority areas. While this has been described as a significant development and a step toward improving Canadians' access to medical care, it is acknowledged that there needs to be much more work before there is any demonstrable difference seen.

In a paper released by the Health Council of Canada in November, 2005 it was noted that the players in the "wait times" process need to agree on common definitions and terminology related to wait lists. Without this, there is no way to measure success against the basic objectives. In other words, "...how can we know if people are waiting less when we don't know when a wait begins and when it ends?". (Health Council of Canada, p. 1). To achieve this specific purpose, the Canadian Institute for Health Information (CIHI) held a conference in October 2005. According to the Health Council of Canada, there was good discussion on some of the terminology issues while others remained untouched.

The Health Council of Canada suggests that the domain of surgical procedure is a reasonable starting point in the discussion of wait time management. To this end, it has set out the features of an ideal system of measuring and responding to wait times. The system would include:

- Real time data coupled with patient information that alerts providers when excessive delays occur;
- Access to information by authorized people at any time and from any location;

- A common service queue of each of the major services;
- A minimum number of urgency levels;
- Reports on volume, percentile and percentage of cases done within benchmarks for non-emergency cases;
- An audit policy automatically triggered when any wait exceeds a critical value; and,
- A validated method to measure outcomes and the ability to create informed thresholds with the information.

What we do know about the announcement about benchmarks is that each of the individual provinces and territories are moving ahead with implementing wait time benchmarks. In each jurisdiction, the focus has been on different clinical areas. However, jurisdictions have shown a willingness to learn from each other. In addition, in June, 2005, the Supreme Court added to the sense of crisis by striking down Quebec's ban on private insurance for medicare covered services. While the decision is only legally relevant to Quebec, other jurisdictions have responded by actively allowing (and in some jurisdictions encouraging) the development of private, for profit clinics that will sell services to both the public sector and individuals who wish to pay for medicare services rather than endure a long wait. This has brought to the fore the long standing debate on the "privatization" of the health care system in every province in Canada.

At around the same time as the "benchmark" announcement, the Canadian Centre for Policy Alternatives (CCPA) released a paper authored by Dr. Michael Rachlis. Dr. Rachlis has been known for some time as an expert supporter of reform in the public health care system in Canada, has worked exclusively as a private consultant in health policy analysis following 20 years of medical practice and has written numerous books and papers on health care reform. The CCPA paper "Public Solutions to Health Care Wait Lists" focuses on public rather than private sector solutions to the wait times problems. Rachlis says that the public sector

See Editorial page 7

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Northwest Territories Health and Social Services

HB1004

Integration of Art and Medicine: A Spark of Healing Perspective

by Steven KH Aung, MD, FAAFP

There are many diverse ways which can cause healing effects to our body, to others and to our environment. Among them is art, which sparks the healing process. In the arts of healing, calligraphy and painting have over so many centuries played a vitally important role in the healing process. The empowerment of the flow of the brush depends upon the deep inner harmony and creativity of the calligraphers who demonstrate their essential healing energy, positive intentions and creative expressive feeling from the ink via the flow of the brush onto the rice paper from the artist to the appreciators and to our environment.

I have always been involved in painting and calligraphy since I was a child, under the influence and guidance of my grandfather, father as well as Taoist and Buddhist masters and other eminent artists such as Shen Pang, Wang Zihe, Guo Yang Cheng, Winson Ng and Pauly Wong. I am primarily interested and motivated toward creating spiritual paintings and calligraphic art works expressing traditional aspects of Taoist, Zen and Buddhist philosophy — and integrating these with modern abstract painting and calligraphic techniques. I would like to introduce and innovate the use of red and blue colour in combination with regular black ink in calligraphy and also create paintings and calligraphy in abstract forms which combine and enhance these classical, modern and post-modern forms and styles. This is the Aung Medical Qi Gong approach to the healing arts respectfully utilizing the power of Qi flow from the body to the mind to the spirit — and through the brush with the ink and onto the rice paper.

I am always dedicated to creating paintings of various spiritual beings, especially Bodhisattvas, Bodhidharma, Arhats, monks, nuns and eminent traditional Chinese physicians, ancient and modern, as well as spiritual plants and flowers such as the lotus, orchids, bamboo and pine trees and spiritual animals such as eagles, cranes, monkeys and fish. I also studied from many books on spiritual painting and calligraphy, incorporating these into my own style of artistic expressionism.

I always seek to make art an essential and vital part of my life and the practice of medicine, cultivating to the best of my ability my own positive, purified Qi in order to help enhance the positive healing energy of all sentient beings everywhere at all times in the universe. In my heartfelt perspective, art is an



Dr. Steven KH Aung Impressing His Personal Seal on His Calligraphic Artwork

essential compassionate and competent component of the healing endeavor, especially when we are oriented toward peacefulness and harmony toward all sentient beings.

Traditional Chinese painting and calligraphy are generally known as 'the way and the nature of the flow of the brush and the ink.' They comprise an essential and interesting aspect of the Oriental arts of refining and purifying one's character and integrating one's body, mind and spirit through the action of the art work.

While the traditional Oriental approach to these fine arts varies, it is essentially Zen, Taoist and Buddhist in nature. They are highly disciplined and sophisticated forms of visual, tactile, musical, physical, mental, spiritual and compassionate training and expression endeavors and final destinations.

The action of the brush nurtures harmony, revitalization and self-expression. The brush itself is an instrumental extension of one's self — one's deep inner feelings, character creativity, mindfulness and philosophy. The ink and the rice paper are the media of expression.

When one practices traditional Chinese painting and calligraphy, one is also practicing Qi Gong, Tai Chi Chuan and other preventive and self-care therapeutic modalities. Every inhalation moves the brush, every holding of the breath and exhalation

See Aung page 6

HEALTHbeat would like to take this opportunity to thank Marskell Canada for the opportunity to distribute our Magazine at their Career Fairs

Healthcare is an International Opportunity

Don't miss the opportunity to meet some of the finest Health Care jobseekers and employers from Canada, the United States, and worldwide, and to talk with them face-to-face about your career opportunities while you explore your career options. Research what is involved with NAFTA, licensing here and abroad, salary levels, relocation bonuses, on going educational opportunities, the Canadian opportunity in all provinces and much more. Remember, it is your life and your career, and keeping informed on development makes sense for you and your family.

February 2006 Event Calendar

Montreal, Quebec - Sunday, February 12th
Ottawa, Ontario - Tuesday, February 14th
Toronto, Ontario - Friday, February 17th & Saturday, February 18th

JOB OPPORTUNITIES ARE WIDE RANGING

Nurses from all specialties are needed worldwide – Critical Care, Emergency Room, Dialysis, Operating Room and all others. In addition, RPNs and LPNs are also needed. Further, Allied Health professionals are needed – Speech and Occupational Therapists, Physicians, Physiotherapists, Pharmacists, Rad Technicians, and other are welcome to attend. Students in their graduating year are also invited to participate and groups can be organized. Remember space is limited and pre-registration is encouraged. This is truly an International event with U.S. and U.K. based companies as well as Canadian hospitals and companies participating.



Register Today at www.healthcareerscanada.com

Did You Know...?

by Jennifer (Jay) Sherwood, BScN, MEd.

About these tips for healthy living?

HEALTHbeat staff wishes you all a happy and healthy new year and hope that you enjoy these tips to help make this possible!

By the time you have this issue in your hands the holiday season will be over! However, these ten tips put together by the Dietitians of Canada and the Canadian Diabetes Association will be suitable for all year round healthy living. It always helps to be reminded that we as health professionals need to heed the advice we give to our clients, family and friends!

1. **Use the Nutrition Facts table** on packaged food products to compare the nutrients in similar foods and make lower fat, lower calorie choices. As of December 15, most packaged foods in grocery retail stores must carry a standardized Nutrition Facts table providing consumers with a core list of nutrients. Visit www.healthyeatingisinstore.ca to find fact sheets and Frequently Asked Question that will help make you a wise consumer when it comes to label reading. You can even take a fun tour through a Virtual Grocery Store to learn and test your label-reading skills.
2. **Keep your eye on portion sizes** – it's often not what but how much you eat that can make the difference to overindulgence at any time of the year. Use Canada's Food Guide to Healthy Eating as a guide to serving sizes. Enjoy a piece of shortbread or a small portion of the traditional plum pudding.
3. **Make health and road safety a priority** when serving holiday beverages. Lower fat egg-nogs, "virgin" Caesars, sparkling water and cranberry juice spritzers without the alcohol are great choices in keeping with the season.
4. **Use fresh zucchini or cucumber spears**, broccoli flowerets, carrot curls or endive with a low fat dip or spread such as hummus, yogurt or fresh salsa, rather than chips and cream-laden dips.
5. **Serve crispy pita triangles**, flatbread and homemade melba toast as alternatives to salty, high fat snack crackers.
6. **When it comes to holiday entertaining check out** the delicious recipes, chosen with health in mind, in Dietitians of Canada cookbook "Cook Great Food" www.dietitians.ca/resources/cgf_public_orderform.pdf or the "Complete Canadian Diabetes Cookbook" from the Canadian Diabetes Association. These are great gifts for those whose health you care about.
7. **A beautiful array of exotic fresh fruits** is a wonderful way to end a meal – pineapple, kiwi, mango, pomegranate, mandarin oranges and grapes are a feast for the eyes and taste buds.
8. **Make physical activity part of the holiday fun** to provide a balance to eating. Plan a cross-country ski afternoon or a hike combined with a potluck with friends.
9. **Give a gift of health** that will last the whole year – an exercise ball is great for stretching; an exercise book or video with an exercise mat; golf lessons for the duffer on your list; some light weights for strength training; a pedometer for someone who enjoys walking.
10. **Track your eating and activity level** over the holiday season and beyond to help you stay on track. Dietitians of Canada EATracker at www.dietitians.ca/eatracker is a convenient and easy to use tool. Make these healthy living tips part of your routine the whole year round – not just for the holidays. Small changes over time will make the greatest impact on your health.

My choice, My career plan, My professional future

Is **your choice** the promotion of health and distribution of quality care? Is **your career** plan focused on all your experiences and skills, which you desire to put forth as upcoming profit? Is **your professional future** that of you always aiming higher?

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& Registered
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Recognizing Special Dates in February 2006

This is February 2006 calendar of annual health observances and recognition dates for healthcare. Health observances are days, weeks, or months devoted to promoting particular health concerns. This information will come in handy for community relations programs as well as employee appreciation events. Health professionals, hospital staff and community groups can use these special times to sponsor health promotion events, stimulate awareness of health risks or focus on disease prevention.

February 2006 Observances	Dates
AMD / Low Vision Awareness Month	1-28
American Heart Month	1-28
Burn Awareness Week, National (1st full week)	5-11
Cardiac Rehabilitation Week (week with Valentines)	12-18
Cardiovascular Professionals Week (week with Valentines)	12-18
Child Passenger Safety Awareness Week, National (2nd week)	12-18
Children's Dental Health Month, National	1-28
Children of Alcoholics Week, National (2nd week)	12-18
Condom Day, National (Valentines)	14
Congenital Heart Defect Awareness Day (Valentines)	14
Donor Day, National (Valentines)	14
Duchenne Muscular Dystrophy Awareness Week (2nd week)	12-18
Eating Disorders Awareness Week, National (last Sunday)	26-March 4
Eating Disorders Screening Program (last Sunday)	26-March 4
Girls and Women in Sports Day, National (1st Wed.)	1
Give Kids A Smile Day (1st Friday)	3
Have-A-Heart Day (Valentines)	14
Heart Health Month	1-28
Kids E.N.T. (Ears, Nose, Throat) Month	1-28
Porphyria Week, National (last full week or 3rd Sun.)	19-25
Pride in Food Service Week (1st work week)	6-10
Wear Red Day, National (1st Fri)	3
Wise Mental Health Consumer Month	1-28
Women's Heart Health Day, National (3rd Fri. of Feb. in week of Vday)	17

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Australian Nursing Solutions has an innovative approach to Nursing

Australian Nursing Solutions (A.N.S) is a Melbourne based Nursing agency which is owned and run by Nurses. Since its inception, A.N.S has continually added value to the nursing profession and supported nurses as individuals and as professionals. This has and continues to be achieved by working within their company values, which include believing in the value of each individual, having relationships that are based on trust, respect, collaboration and communication and striving to uphold their moral and ethical obligation to healthcare and society. A.N.S offer nurses much more than just a position and hospitals much more than just a nurse.

In supporting nurses with gaining a position and relocating to Australia, Australian Nursing Solutions work very hard to ensure they know each nurse intimately. This allows them to then know the needs of the nurse, and by working with them closely ensures these needs are met. Placing nurses correctly involves ensuring both the clinical perspective and geographical location are matched for each candidate. Australian Nursing Solutions also has a sound knowledge of their client hospitals, assuring that nurses are most appropriately matched to a hospital setting, and also allowing the opportunity for each nurse to be well briefed of options available to them, thus allowing them to make an informed decision.

The decision to relocate to another country is not one that is made lightly, and once made means focussing

on packing up and/or selling property and settling the finer personal details. Here, Australian Nursing Solutions assists by concentrating on keeping track of nurse registration, positions vacant and visa processing. They will also coordinate accommodation and airport transfer on arrival along with planning commencement dates and orientation with the hospital.

With many years experience placing nurses all around Australia, from all corners of the globe, Australian Nursing Solutions have a sound working knowledge of working visa requirements and the current healthcare situation within each state. Also having relocated hundreds of nurses from Canada, the UK, Singapore and Hong Kong, Australian Nursing Solutions are familiar with nuances that come with making such life changing decisions. This in turn allows Australian Nursing Solutions to share this with their candidates and working closely with them to achieve their ultimate goal – living and working in Australia.

Australian Nursing Solutions is an agency with a difference, with its vision clearly focussed on the future of nursing.

For more information, contact A.N.S in Melbourne, Australia on 1 877 246 5308 or visit their website: www.australiannursingsolutions.com.au.

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- Admiring and appreciating our people
- Delighting our customers
- Continuously seeking a better way
- Playing an active role in our community

Our focused, yet fun culture helps propel our

"flywheel" forward. We are a driven team and only recruit people at all levels of our company who share the same underlying values and same incredible excitement towards building something special.

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HEALTHbeat Stress Relief

Dr. David Rainham, M.D.
Author, Speaker, Stress Management Consultant

Working Moms Need Help!

If you're a mother working outside the home, chances are that you feel overwhelmed with work and the pace of life from time to time. One remedy is just let a few things slide at home, but on the other hand, a clean, ship shape house does relieve stress and tension.

The problem is that women still generally get stuck with most housework. Half of all husbands spend less than five hours a week doing housework and 15% do nothing at all!

To add to the strain, kids can add to the chaos but most have few regular chores. As a result many working women report that home is more stressful than work!

Here are some ideas for making home a haven from stress by creating a helpful household.

- Make a list of all the jobs that need to be done and then have a family meeting to divide them up fairly. Everyone can pick a task they will happily do often. The unpopular chores can be rotated. Everyone then can have a chance to learn them.
- Young children can be given age appropriate tasks or can share a duty with a parent.
- A reward system for jobs completed properly may be useful. You will also need to determine what the penalties/consequences are for slacking off.
- Have a weekly family meeting to assess how things are going.
- A good starting place to create some new habits and focus is to unclutter the home.
- Help children organize their rooms. Store or give away all those things not being used or worn.
- Clean up the kitchen drawers and cupboards and if

you have young children, give them a drawer of their own for self serve cups, bowls, plates and utensils.

- Draw up rules and boundaries.
- With teenagers, you may want to surrender to the fact that their room will be a mess but mandate that the door be closed. It is fair, however, to dictate that their mess does not creep to the rest of the house.
- Everyone is going to be learning a new routine, so take time to praise, not criticize. Discuss how you might all improve the system.
- Be patient in explaining how to do any task
- Have cleaning, laundry folding parties. Play dance music to brighten doing chores.
- Plan your family cleaning time. Have fun and build in a reward for everyone. Children will benefit hugely from doing chores. They learn responsibility, cooperation, how to tolerate frustration, and a load of practical skills that will aid future relationships.
- Spouses can also benefit from housework. Helping out reduces family tension, enhances relationships and can be good for overall health and well being.

If you can't get your family to help out calmly let them know that you will not do it all for them. You may need to hire someone to do certain tasks. Take the money from the family entertainment budget to pay for it and let them know that you have found the need to take this action.

Dr. David Rainham is a Family Physician, Author and Speaker. For more information, visit www.StressWinner.com.



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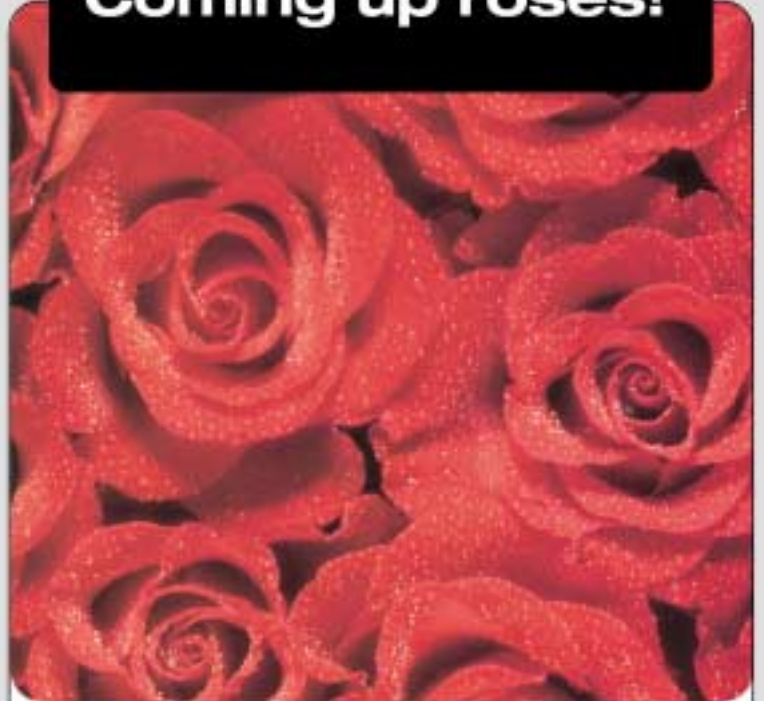
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The Shepton Mallet NHS Treatment Centre is a brand new concept owned by UK Specialist Hospitals and is affiliated to New York Presbyterian Healthcare in the USA. This independent specialist surgical centre has been commissioned by England's National Health Service to reduce the length of time patient's wait for elective surgery.

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Aung from page 3

increases the power of the brush flow. The total effect is balance and harmony in the artist and those who take the time to view and experience the art works — it is always a multi-dimensional healing energetic effect, from the artist, to the patients and those who appreciate the creativity radiating inward and outward with respect to our various environments.

These art works are generally completed with red

seals, signature, date and an appropriate poem as the personal certificate of authenticity and philosophy of the artist and his or her commitment to this challenging and exciting discipline. Creating a piece of calligraphy is a valuable exercise and enlightening experience of deep concentration and enhanced consciousness for the body, mind and spirit. It encompasses self-discipline, self-cultivation and self-healing. It also reflects the artist's inner nature, essential character, personal creativity and deepest feelings. By practicing calligraphy regularly and consistently, it stimulates one's serenity, harmony and total health and well-being. Most of the eminent traditional Oriental physicians and artists practice calligraphy regularly and exchange it with their family, friends and colleagues. It is a way of expressing and appreciating deeper feelings toward one another and at the same time enjoying this precious gift of exchanging creativity in the healing arts.

It is important to be totally relaxed before you create calligraphy and painting. Therefore, in this regard, Qi Gong, Tai Chi Chuan, Yoga, meditation and other exercises are vitally important. Some masters can create it spontaneously, due to their previous experience and constant cultivation of serenity and harmony.

My own Aung medical Qi Gong calligraphic approach encompasses the following:

- The rice paper of the desired size is put on the table with a woolen blanket underneath to stabilize it, to facilitate the brush flow and help absorb and dry the ink.
- Visualize the writing that you will put on the rice paper and also the general lay-out of the art



**'Half Calligraphy
Half Painting'
(Panhua
Pansu)
Representation
of Yin•Yang
Integrative
Coloration**



Dr. Aung's Calligraphy Teaching/Demonstration Forum at the University of Alberta

- up to Qihai/Dantian (the acupoint and solar plexus chakra energy centre which is just below the navel) — from there the Qi moves up to the middle of the chest where it meets with the Qi moving down from the top of the head and then moves out through the arms to Laogong (an energetic acupoint in the centre of the palms) and from there to the fingers and into the brush.
- The action and quality of the flow of the brush reflects the quality and intensity of Qi that has been cultivated and enacted through this approach.
- The calligraphic/painting art work is concluded with the personal signature, seal, date and an appropriate poem.
- Once the work is completed, it is made into a traditional scroll which you can display for enjoyment and appreciation.

I am especially interested in creating and adding two colours, namely red and blue, into the black ink to make the calligraphy more interesting and exciting — and have a more powerful and hopefully more enriching healing effect. One of the most beautiful effects that intrigues me using these colours is that when they merge with the black ink a unique colour combination and energy emerges within the art. This creates an innovative rainbow effect, with the calligraphy looking like painting and the painting looking like calligraphy.

Another style which I enjoy creating is to intertwine the meaning of the calligraphic words with the painting, which may be called 'half calligraphy half painting' or 'no calligraphy no painting' (Panhua Pansu). It illuminates the words and the painting in an abstract way and challenges the viewer to find the meaning of this mysterious art work. It helps people become more actively involved in the inner feelings of the creation of the artist—to think, to guess, to evaluate and to visualize.

These arts are associated with attaining and maintaining health and well-being. Calligraphy involves using and exercising the body, mind and spirit in a coordinated manner in order to become well balanced and harmonious. It conveys the healing power of the artist, creating good Feng Shui for present and future generations, year after year, season after season, century after century. Therefore, healing constantly emanates from this most excellent art form, which is why it seems to be such a worthwhile integrative healing approach and endeavor for all concerned.

Dr. Steven KH Aung's Traditional Chinese Medical Qi Gong Calligraphy. Edmonton, Alberta, Canada: College of Integrated Medicine, 2002 (ISBN 096835534X)

Dr. Steven KH Aung's Traditional Chinese Medical Qi Gong Painting and Calligraphy. Edmonton, Alberta, Canada: College of Integrated Medicine, 2002 (ISBN 0968355331)

Dr. Steven KH Aung is a geriatric and family physician and a traditional Chinese medicine practitioner (TCM) and teacher. At the University of Alberta, Dr Aung is an associate clinical professor in the Faculty of Medicine and Dentistry and an adjunct professor in the Faculty of Extension and the Faculty of Rehabilitation Medicine. He is a World Health Organization advisor on TCM. Dr Aung was awarded a Professional Excellency from the Académie Diplomatique de la Paix in 1986, the Alberta Order of Excellence in 2002, the Queen Elizabeth II Golden Jubilee Medal in 2003, Physician of the Century Award 2005, and he has been awarded the Order of Canada 2005. He promotes the integration of TCM and Western biomedicine in the spirit of a natural, compassionate and artistic approach to health, healing and wellness.

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Editorial from page 2

solutions are already at hand and that the two most innovative ones are: establishing more public short stay surgical clinics; and learn lessons from queue management theory applied in industry outside of health care.

While acknowledging that not all private clinics are for profit, Rachlis asserts that the current developing trend of using private, for profit clinics to deliver public services costs the system more while putting public money into the hands of insurance companies and shareholders. Further proliferation of private for profit clinics also tends to aggravate personnel shortages and may provide inferior quality services. To counteract this trend the public system should shift as many low risk elective surgeries and minor procedures as possible to short stay, public specialized clinics. Although the public seems to assume that clinics already in existence are private and for profit, that is not the case. He cites as examples of successful public clinics, Toronto's Queensway Surgicentre and Manitoba's government purchased Pan Am clinic. These public sector clinics provide high quality care, are cost efficient and services are paid for by public funds. Clinics such as these deal with homogeneous, low risk patients thereby decreasing the variation in demand and allowing for better flow of patients and increased efficiency. They have shown administrative savings, a better informed patient population with respect to costs and have wait times that are acceptable to patients and physicians.

The second public sector approach that Rachlis suggests is the application of queuing theory to manage waits and delays in service. Canadians tend

to think that if there is a wait for health care it is because we need more of a particular service. Most waiting lists however are not due to a lack of resources. Using the example of a hockey arena he says that there may be a delay in getting into the arena but once in, there are seats for all. The delay stems from a bottleneck at the door, but everyone will get in before the start of the game.

Before allocating more resources to reduce wait times Rachlis suggests that queuing theory be applied using the following four steps. These are:

1. Assess whether capacity is enough to meet demand;
2. If capacity is sufficient, temporarily increase resources to clear backlogs;
3. If capacity is insufficient, attempt to reduce demand and re-design services; and,
4. If after maximal re-design there is still unmet demand, then a bottleneck has been identified that requires more resources.

The issues surrounding and involved in setting benchmarks and managing wait lists are complex and most writers agree that there is no one solution. The Health Council of Canada's paper that addresses information gathering to establish evidence-based benchmarks, and the CCPA paper that suggests public sector solutions to meet the benchmarks are but two (albeit both from respected Canadian sources) of the papers that you will find if you do an internet search on the topic. To read both of these papers in their entirety you can download them from www.healthcouncilcanada.ca and www.policyalternatives.ca.




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and discharge services. Set a leadership example of inclusion, communication and consultation in a value-based and service-driven healthcare environment.

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