

Paramedics, the dark angels of grace

Calgary Herald · 13 Aug 2008 · RICHELLE WISEMAN FOR THE CALGARY HERALD

There were over 60 people in the Rockyview Hospital Emergency Room waiting area one Monday night. The city was on “Code Orange,” we were told by EMS workers, meaning a shortage of ambulances and hospital beds. I was there to be with my 91-year-old father, who had been brought by ambulance with head and arm lacerations from a fall.



A quick look around the waiting room revealed people doubled over with abdominal pain, others with lacerations, and an elderly woman in a wheelchair with raccoon bruised eyes, who looked like she'd been in a bar brawl.

EMS workers told my sister and I that this was the postStampede blip, that once Stampede is over, there's a surge of folks who decide to take their troubles seriously and visit ER for attention. Not everyone there was in this category, but it was clear some people there for hours should have gone to a doctor's office instead.

Meanwhile, beyond the waiting room, there was another reality. People brought in by ambulance lined the hallways where they were brought in, and EMS workers stayed with their patients until they are seen by doctors. Where my dad was brought in, patients were stacked in the hallways, crowded with the new front line of medical service in Calgary, the EMS paramedics, and the PTS (Patient Transfer Services), the paramedics of the Calgary Health Region.

In the pinch of shortages — beds, staff, doctors in the hospital, general practitioners in the community forcing people into ER for care — the black uniforms were everywhere, serving patients on the Stryker beds that lined the halls encircling the Emergency Ward. Inside ER, there were three ER doctors serving 40 patients who had made it through the nightmare waiting room, the hallway wait, and finally to a room in ER.

The paramedics were performing the duties of nurses in those hallways — fetching water, juice, sandwiches, medications, taking blood pressure, temperatures, changing dressings on lacerations, emptying catheter bags, and in one case, dealing with a very large, angry patient who had been there for eight hours, in the hall. She had soiled her diaper, wet herself, and required the assistance of several paramedics to strip her down, bathe her, and dress her in hospital attire, all behind a flimsy makeshift curtain.

This was not an easy process for anyone involved, and in spite of the unpleasantness, the indignities, and the abusive attitude of the patient, the paramedics acted with great patience and professionalism, at all times demonstrating concern for this difficult person in her distress.

What I saw that night were the Dark Angels of Grace who now inhabit the halls of ER at Rockyview. In their black shirts and black slacks, these welltrained, compassionate paramedics should be dressed in white, for all their angelic and gracious ministrations to the sick and miserable who lay waiting for doctors' attention.

Several of the PTS workers I met were only 22 years old, yet they were dealing with the fallout of a stressed out health system whose problems started in 1993 with cuts to Alberta Health Care. More specifically, the lack of facilities in Calgary — thanks to the wisdom of blowing up the General Hospital and selling off that precious downtown location to developers — has left Calgary as perhaps the only major city in North America of a million people without a downtown hospital.

Coupled with this lack of political vision, the explosive growth of the city and increased living costs have taxed Calgary's family physicians. Many are leaving, or resorting to entrepreneurial business expansions (like injecting Botox into eyebrows) to supplement their incomes. So in a city rolling in wealth, in a province with staggering surpluses, the halls of Rockyview ER are lined with patients, and there are empty beds upstairs.

Why are there empty beds upstairs? Because while the new expansion in the hospital provided extra beds, the CHR has not received the funds to staff them, explained a PTS worker. So what was the point of the expansion?

This makes the prospects for the new seriously overdue and now overbudget South East hospital somewhat grim. Will there be money to staff the place once it is done?

What can be done? Our provincial government must increase payments to family physicians to retain the ones we have, and to attract new ones.

This would take pressure off ER which is dealing with people who should be seeing a general practitioner, instead of waiting hours to receive the most expensive care in the system.

Build the new hospital as fast as possible, and give it the budget to staff it immediately.

Our politicians cannot on one hand boast to the Americans and the world that we have massive oil reserves worthy of their interest and investment, and make every effort to attract people to Alberta, and then on the other hand act like the health care system should not be infused with more money and strategic planning to accommodate the growth.

Meanwhile, unseen and unsung, the Dark Angels of Grace will be on duty tonight. And, if you are somehow unfortunate enough to end up in the ER at the Rockyview Hospital, you will be blessed and amazed by their care.