

Civilian facilities now provide care for Edmonton's 7000 soldiers, train military MDs

Heather Kent

Patients in Edmonton hospitals are becoming accustomed to seeing a lot of people in military uniforms. Under a unique arrangement between the Canadian Forces and Edmonton's Capital Health Region, the region provides full health services to military personnel and allows military and civilian health professionals to work side by side.

The recent downsizing of the military led to the arrangement between the region, the Edmonton Garrison and the air force base at Cold Lake, Alta. Major Charlene Langlais, acting commanding officer at 1 Health Support Operational Training Unit, said that because of the closure of Ottawa's National Defence Medical Centre and the limited medical services in other parts of the country, military medical staff were no longer dealing with acute care patients in Canada. This made it difficult for them to prepare for overseas deployments.

With the Edmonton arrangement, the military is able to ensure that its medical staff are prepared to go to places like Kosovo and Bosnia. The arrangement with Capital Health "allows us to maintain competency in a way that we didn't have before," said Langlais. Meanwhile, the hospitals benefit by "gaining an extra pair of hands," said Capital Health spokesperson Wendy Hill.

Major Neil Gibson, an internist, said that the 88 military health care staff at Edmonton provide a "fair bit of manpower with a lot of experience," which has helped the region cope during its own downsizing. The garrison's anesthesiologist, trauma and orthopedic surgeons, psychiatrist, nurses and technicians work

with civilian staff, and the 7000 military personnel receive services at all of the region's facilities on a cost-recovery basis.

Gibson, who has been with the garrison for 2 years — it is the major army base in Western Canada — is enthusiastic about the liaison: "I have been able to integrate into the civilian health system without any difficulty whatsoever, with



Medical staff from the Edmonton Garrison at work on "SAM"

benefits to both parties. If we had to rely on just military service to maintain any level of skill, we'd be in trouble. The cases are just not acute enough and not critical enough to keep us up to speed."

Gibson receives a salary rather than fee-for-service, and he says that this allows him to put in extra hours to develop projects at Capital Health. The Department of Internal Medicine at the University of Alberta receives compensation every time he sees a civilian patient. Gibson also contributes to Capital Health as medical director for advanced cardiac life support courses.

The arrangement also allows military staff to use the Simulated Adult Mannequin (SAM) training lab at the Royal Alexandra Hospital, which is the only civilian facility in Canada where an entire military trauma team can train together and test its combat readiness.

The teams create scenarios in the lab using computer-generated cases — a soldier stepping on a land mine, for instance — and then practise their emergency skills. The mannequins, which can provide simulated physiological responses and be intubated, are "very realistic and come pretty close to being a real patient," said Gibson.

The lab environment can be simulated too, to represent a combat zone. "We usually set it up to look like a triage tent in the middle of nowhere," added Gibson. This training is considered particularly important because trauma-team staff often arrive in places like Kosovo without having worked together.

Despite some initial misgivings about the military's presence in Edmonton's hospitals, both Langlais and Gibson said the public's reaction has been positive. The civilian doctors "appreciate the help, that's the big thing," explained Gibson. "There has never been any friction."

The program is also proving popular with military physicians in other parts of the country, with 3 specialists arriving in the last 2 years. "This is the way of the future," said Langlais.

Military leaders in Ottawa appear to agree.¹ In January, the armed forces announced that the military will be relying much more heavily on civilian doctors in an attempt to improve continuity of care and to overcome a worsening shortage of military physicians.

Heather Kent is a Vancouver journalist.

Reference

1. Sibbald B. Military medical service no longer has MD at helm. *CMAJ* 2000;162(4):561.