

The Pulse

by SCoP

Saskatchewan College of Paramedics newsletter

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2020



*Regina EMS employees working at Parkside Extendercare during a COVID-19 outbreak
Kirby Johns, Manager Urban Operations, & Glen Perchie, Director of EMS South*

IN THIS ISSUE:

Managing depression, anxiety, and PTSD	Page 2	Holiday Hours	Page 5
Nominations	Page 4	MedCast 360	Page 5
Update: Pandemic Emergency Licence	Page 5	SCoP is on Linked In	Page 5
Professional Conduct Committee update	Page 5	Saskatchewan Women in Canadian Paramedicine	Page 6
Licence Renewal	Page 5	Call for Photographs	Page 7

Managing depression, anxiety, and PTSD

Free, specialized, online, mental health support for Public Safety Personnel (PSP)

We are nine months into a global pandemic... your work puts you at the heart of it.

How are you taking care of your own mental health?

COVID-19 is causing mental health issues for people across the country. As health providers on the front lines of this pandemic it's no surprise if you're needing extra support. Paramedics and other first responders often fear not doing enough, because their main goal is to help others, and as a result they often put their own lives at risk to benefit the common good – all of this can lead to continuous stress, and mental health issues.

PSPNET, an Internet-delivered cognitive behaviour therapy program at the University of Regina, is focused on assisting Public Safety Personnel (PSP) in improving their mental health and wellbeing. The team at PSPNET would sincerely like to help you.... for freeat your convenience, ...and you can access the help while relaxing in your most comfortable sweatpants!

PSPNET is offering two online therapy courses which have been developed specifically for Public Safety Personnel to help you cope with your unique challenges. Participants learn skills to help manage depression, anxiety, and PTSD.

The PSP Wellbeing Course is targeted at individuals who experience a combination of diverse mental health concerns, such as symptoms of depression, anxiety, panic, stress or posttraumatic stress. The PSP PTSD Course is targeted at individuals who are primarily concerned with symptoms of posttraumatic stress. Both programs have been specifically tailored to meet the specific needs of PSP.

Both courses are online, so you can take them at your own convenience. They are skill-based, practical

courses that use Cognitive Behavioural Therapy, or CBT. CBT is a structured and goal-oriented treatment that helps you identify and manage unhelpful thought patterns and behaviours.

“The use of CBT is a gold standard for the treatment of a number of symptoms associated with anxiety, depression, panic, trauma, etc.,” said Dr Jody Burnett, Clinical Research Associate with PSPNET. “CBT is quite practical in nature, providing tools and strategies that people can connect and engage with, to help them manage their symptoms in a healthier way.”

How Does It Work?

The Internet-delivered Cognitive Behavioural Therapy (ICBT) program is eight weeks long—or more if you need it—and includes online learning modules made up of written content, images, video, and audio content that is downloadable, and is accessible for a year after completion. All you need is an internet connection and a personal electronic device (laptop, tablet, cell phone etc.), and you can access it from wherever you are. Whether you are in your car, in your basement, or on break at work—you can be focusing time on your own mental health.

The program also provides you with weekly therapist support in the form of either secure email, or a brief phone call if preferred. This extra support and supervision from a registered psychologist or social worker, with specialized mental health training, is very impactful, and provides additional support to clients working through the online lessons.

The benefit of having access to therapists, registered psychologists, or social workers with experience dealing with PSP and trauma symptoms is significant, because they have a real understanding of the work culture.



Dr. Jody Burnett, Clinical Research Associate, PSPNET

Dr. Burnett relates an anecdote provided by one participant, of visiting a counsellor, in the past, with no background in the work done by PSP.

“The individual said, ‘I finally got up the courage to see a counsellor and I ended up consoling them after I shared one of my stories,’” Dr. Burnett said.

The narration underscores the importance of the PSPNET programs.

Both the PSP Wellbeing Course and the PSP PTSD Course include additional information on topics such as assertiveness, communication, managing beliefs, problem solving, PTSD, worry, time, sleep, anger, pain, grief, and enhancing relationships. The program is specifically tailored for people who do the types of work you do.

COVID-19 has added significant stress and trauma into the work world for many PSP, and as a result PSPNET has added content specific to COVID-19 into the programs. The PSPNET team has made improvements to many of the additional resources, has added audio files of text content, and has provided an alcohol use resource.

When Dr. Burnett joined PSPNET in early 2019, one of her first tasks was to interview and engage with PSP from across the province. She met with people working in high profile PSP sectors such as fire services, policing, paramedicine, and she also connected with people working in corrections, border services, dispatch communications, coroner's offices, and the volunteer sector.

She asked the PSP that she met with what they felt would be important to include in the program, in terms of content and topics. She also asked them about preferred service delivery and program support services, such as flexibility required, and email or telephone support.

She found that there was a great

deal of support for internet delivered CBT (or ICBT). Her findings in Saskatchewan support existing literature on, which has found ICBT to be as effective as face-to-face CBT in many instances.

"We know it's working and making a difference for people, and we're continuously working on process improvement based on the feedback we are getting back from users of the program," she said.

Dr Burnett says the PSPNET program teaches how to pay attention to your thought life so you can challenge those automatic, ingrained, unhelpful, and negative critical thoughts we can all have sometimes.

"Our thoughts drive the bus. The 'should', 'could', and self-defeating, hopeless, low-mood, lack of motivation, despairing thoughts that roll around in our heads pretty regularly, most definitely impact how we feel, and that most definitely impacts how we behave," said Dr Burnett.

She says thoughts contribute to symptoms you may be experiencing, whether related to anxiety, depression, panic, even post traumatic stress.

"People often come at it from the wrong end, trying to change their behaviour, and they get frustrated and can't figure out why that's not working," she said.



SERVICE DELIVERY OUTCOMES

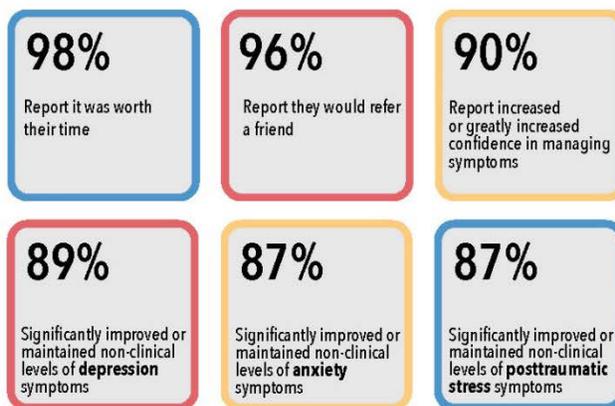
WHAT WE DO

- Increase care for PSP
- Provide Online and telephone screening
- Offer ICBT content tailored to PSP
- Offer varying amount/duration of therapist support
- Specialized supervised clinicians
- Conduct research for continuous improvement

CONDITIONS WE TREAT:

- Anxiety
- Depression
- Panic
- PTSD
- Social Anxiety
- Stress

OUTCOMES

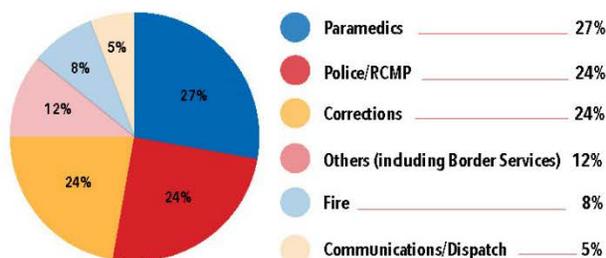


CLIENT BACKGROUND:

To date, there have been 108 clients from Saskatchewan and 25 clients from Quebec who have been enrolled in courses provided by PSPNET.

Age range:	21-65
Non-urban residence:	50%
Ethnic minority:	16%
Actively working:	93%
Using medications:	37%

PSP SECTORS WE SERVED:



According to Dr. Burnett, challenging those negative thought patterns will lead to more positive changes in your feelings and behaviours, and will result in more positive changes in your overall outlook.

“It’s great to see when people realize how powerful and influential thoughts are in their lives. Our thoughts are often the source which fuels the symptoms we’re experiencing,” she said.

Learning strategies and tools that help us pay more attention to, and become self-aware of, thoughts, and how they are affecting what we are feeling, and how we’re behaving, can be very valuable in helping us to change and manage symptoms in a healthier way, enabling us to reclaim our wellbeing.

The stigma associated with mental health has been identified as the number one reason preventing PSP from accessing care.

“One of the questions we get all the time is ‘Am I feeling badly enough to qualify?’ – and that’s not really a qualifier. ICBT can be used for mild, moderate, severe, or complex symptoms. The goal for each person will be different: for some it’s to get that intervention and reduce symptoms and manage them in a healthier way; for others it’s proactive, to gain more tools and strategies to help them maintain, to stay in a mild or healthy range,” she said.

Dr. Burnett is offering 30-minute-long presentations on the PSPNET program to interested employers and other groups. All sessions are currently provided over Zoom. To access a presentation on the program, please contact Dr. Burnett directly at jody.burnett@uregina.ca

Intake Process

The program’s intake process works to ensure that ICBT is a good fit for people who are accessing it. The process involves visiting the PSPNET website at www.pspnet.ca and clicking “apply now”. There you will answer a few brief questions and create an account. Once you log into the secure account, you will

complete an online screening, in which the individual is asked a number of questions about their symptoms. Following the online screening process, individuals are asked to book a telephone interview appointment with a PSPNET staff person. The process will help to determine if ICBT is appropriate for the individual, and whether the PSP Wellbeing Course or PSP PTSD Course is the best fit.

While the goal is to have participants take in the full program, individuals who decide that ICBT is not a fit are able to discontinue their participation at any time.

The program is free of charge for current and former PSP. No referral or diagnosis is required to access the service, and the program is fully confidential, meaning employers are never advised of an employee’s enrollment in the program.

PSPNET has not been developed to replace individual therapy or other options for mental health services but is working to create another pathway to help address needs for individuals that may not feel ready for individual therapy. For some, the experience with ICBT demystifies what it means to seek out mental health support and enables them to move forward and begin working individually with a counsellor.

PSPNET is a clinical research unit located at the University of Regina, which in partnership with the Canadian Institute for Public Safety Research and Treatment (CIPSRT) delivers and conducts research on various aspects of Internet-delivered Cognitive Behaviour Therapy (ICBT) for Public Safety Personnel (PSP). The Principal Investigator of PSPNET is Dr. Heather Hadjistavropoulos from the University of Regina. The co-investigator is Dr. R. Nicholas Carleton from the University of Regina and Scientific Director of CIPSRT. The team is made up of clinicians and researchers. For more information, visit www.pspnet.ca.

SCoP Council & Committee Nominations: Due January 3

Nominations are open and once again we are looking to recruit people from all licence levels and sector experience to participate on SCoP Council and Committees.

Members have 2 opportunities to join Council and 7 opportunities to join a Committee.

There are also 4 opportunities for non-members to represent the public on committees.

2021 vacancies:

Council

1 Vice President, 2 Members at Large

Audit Committee

1 Member at Large

Discipline Committee

1 Public Representative

Education Committee

4 Members at Large
1 Public Representative

Leg & Bylaws Committee

1 Member at Large

Nominations Committee

1 Member at Large
1 Public Representative

Professional Conduct Committee

1 Public Representative

Find terms of reference for each committee, plus more information here: collegeofparamedics.sk.ca/web/committees

Nomination forms are posted on our website, and have been sent to members via email.

Nomination forms are due January 3, 2021.

Update: Pandemic Emergency Licence

On April 17, 2020, the Saskatchewan College of Paramedics began issuing Pandemic Emergency Licences.

So far, 34 practitioners have been licensed at this new level.

Former members, which includes those who are inactive, non-practicing, retired, or other, may apply for this temporary, 90-day licence if they are wishing to help during the COVID-19 pandemic.

To expedite issuance of these licences, the College defined criteria under which previous members can become re-licensed.

Currency in certificates, Continuing Medical Education, or skills are not required in order to qualify for licensure under the Pandemic Emergency Licence provisions. Criminal record checks are still required and can be obtained locally or online.

Non-practicing / inactive / retired for up to 2-years

- PCP 2011 NOCP, ICP, ACP, CCP will be issued a licence at the level they last held
- EMR, EMT/PCP 2001 NOCP will be issued a licence at the EMR level

Non-practicing / inactive / retired between 2 and 5 years

- PCP 2011 NOCP, ACP, CCP will be issued a licence one level lower than they last held
- EMR, EMT/PCP 2001 NOCP will be issued a licence at the EMR level

Non-practicing/inactive/retired more than 5 years

- All Licence Levels will be issued an Emergency Medical Responder (EMR) licence

The Emergency Practicing licence is valid for 90 days with the possibility of an extension as required. This licence is offered at no cost. Anyone wanting to remain licensed beyond the pandemic period will need to fulfill all requirements for licensure.

Professional Conduct Committee update

The College is responsible for the protection of the public, and management of this responsibility is one of the most important roles that the College has.

It is our job to assure the public of the knowledge, skill, proficiency and competency of members in the practice of emergency medical services.

Currently the professional conduct committee currently has 7 open files under investigation.

Of these, 6 relate to professional misconduct, and one is related to professional incompetence.

2021 Licence Renewal

2,041 individuals have renewed their SCoP licences for 2021. Thank you!

Licences expire on December 31 of each year. Individuals must be licensed to work or volunteer, and licences can be renewed until the end of January.

Please check your Member Account to make sure your licence is renewed. There are a handful of submitted renewal forms still waiting

for payment.

Receipts for payment are in your Member Account.

Holiday Hours

The SCoP office will be closed from noon on December 24 until Monday, January 4, 2021.

For urgent matters while the office is closed, please call Jacque Messer-Lepage, Executive Director, at 306-585-0094.

MedCast 360 immersive video

Did you get the invite?

MedCast360 is a dedicated streaming platform for immersive medical videos, an approach that the College is exploring to ensure members remain informed on important issues

Invites to this new website were sent out in the fall. To have yours resent, email collette.parks@collegeofparamedics.sk.ca

SCoP is on Linked In!

Follow us on Linked In!

<https://www.linkedin.com/company/saskatchewan-college-of-paramedics/>



Saskatchewan Women in Canadian Paramedicine

The April/May issue of Canadian Paramedicine magazine featured two great articles written by Saskatchewan paramedics. The issue was released in June, due to the pandemic, and is still available online for free at

<https://canadianparamedicine.ca/april-may-2020-full-edition/>

The focus of the issue was Women in Canadian Paramedicine, but it touched on a variety of emerging issues relevant to all paramedics wanting to succeed in this constantly evolving profession.

Individually Strong, Collectively Influential

by Angela Sereda, pages 34-36

The article written by Angela Sereda, ACP and Community Paramedic, is a roundtable of accomplishments by some of the women currently active in Saskatchewan paramedicine.

"Last year we submitted a photo to be included in their first Women in Canadian Paramedicine issue, but when I was reading through the issue, I noticed that there was no representation from Saskatchewan," said Angela. "I knew they would be doing the issue again, so I contacted the editors [and] they asked me to do it. The article really just came to me within a week of starting to think about it."

Citing no lack of accomplished women to choose from, Angela narrowed her options to ten sectors and then chose one woman who is a leader within that sector. The areas were Ministry of Health, Saskatchewan College of



Angela Sereda (centre, white shirt) and colleagues from Moose Jaw & District EMS

Paramedics, Saskatchewan Health Authority, Paramedic Services Chiefs of Saskatchewan, research, communications, education, fixed or rotary-wing air ambulance, community paramedicine, and owners.

"Could I have had a list of 25 or 30 women? Absolutely! It was hard, but this is just a quick snapshot," said Angela. "There were many women before us that have done amazing things for paramedicine and the industry as a whole. As well as currently, there are a lot of paramedics who are not in titled leadership roles, but who are making a tremendous impact."

Everyone she interviewed for her article experienced individual changes throughout their careers and work lives, but the most significant change referenced was the evolution to collaborative approaches in patient-centered care, and team-based approaches in all areas of health care.

The article discusses the challenges, the failures and the sacrifices of balancing career and family, as well as the successes and gains of perseverance.

Mentorship was important to everyone in the article, and not just one mentor but several throughout a career.

"Individually Strong, Collectively Influential" can be found on pages 34-36 of Women in Canadian Paramedicine 2020.

<https://canadianparamedicine.ca/april-may-2020-full-edition/>

Mentoring and Sponsorship in Rural EMS

by Selena Letain, pages 13-15

Selena Letain, ACP, worked almost her entire career in urban EMS until August 2019, when she began to manage rural EMS in Southwest Saskatchewan. The difference in environments prompted her to write this article.

"One of the things that I really noticed as far as differences between my urban opportunities and the opportunities that paramedics in rural services have, is the mentoring and sponsorship piece available to them," said Selena. "It's definitely very different, and it isn't always fair."

Wanting to find out why, she began with discussions with some team members and found many didn't really know what mentorship or sponsorship was.

"They had a general understanding of mentorship, but a lot of people correlate it with formal mentorship programs upon hire, but even in those areas I found rural EMS was lacking. The other person on car with you isn't always a lot more senior than you are," she said.

Sponsorship was also a bit of a mystery. Sponsorship is a commitment to advocating for someone, which is especially helpful in underrepresented groups.

Selena's article is a data-based exploration of mentorship and sponsorship in EMS, specific to Saskatchewan.

Barriers to mentorship are acknowledged, such as high turnover rates, emotional exhaustion, the distance factor in rural areas, and frequently working with another new employee.

The article encourages all EMS organizations to develop and support formal rural mentorship programs and by telephone, Selena described other ways that informal mentorship can occur.

When a rural to urban intercept occurs, she suggested talking as a group about what went well and what could be done better next time. How do they know what could be done better when

they aren't provided that opportunity to debrief?

"We need to build people up to look out for each other, to push each other to be better, and just provide opportunities to actually teach people," said Selena.

Studies indicate rural specific formal mentorship programs are effective, crucial in facilitating workplace connections, and encouraging recruitment and retention to rural healthcare.

Hopefully, distance barriers can be overcome now that videoconferencing and Zoom are so

much more prevalent in our lives.

If you would like to discuss mentorship and sponsorship, either formally or informally, please reach out to Selena at selena.letain@saskhealthauthority.ca

"Mentoring and Sponsorship in Rural EMS" can be found on pages 13-15 of Women in Canadian Paramedicine 2020. <https://canadianparamedicine.ca/april-may-2020-full-edition/>



Selena Letain speaking at the 2019 SCoP AGM

Call for photographs

Do you love your job? Please show us! Send photos of you and your colleagues on the job to collette.parks@collegeofparamedics.sk.ca to be featured on the website, in newsletters, and in the Annual Report.

All submissions must also be accompanied by a declaration that permission was granted by all those appearing in the photos. At the moment, we are especially interested in photos featuring people.

Let us know who took the photo as well, so we can give credit for your work!