

PEOPLE/PLACES

Soccer coach
needed experience
not necessary

I lay on the sideline covered with blood, sweat, but thankfully no tears. One would think I had engaged in a battle with piranhas instead of six-year-olds.

The battle was over a soccer ball. I had volunteered to assist, yes assist, in the coaching of my daughter's soccer team. The application had said "no experience necessary". I was definitely qualified. I had never kicked a ball much less coach it.

But I wanted to grow with my six-year-old's soccer venture not just observe it. But if one does not "do" soccer can one teach soccer? I was about to find out.

I attended the soccer coach seminar. It was a half-day of intense soccer skills and drills. Plus, I was given a manual which I was to worship like the Bible. "Flick-ons" and "poke tackles" became new additions to my vocabulary.

"Offside" and "corner kicks" were new insights. "The Atomic Tackle," "The Attack" and "The Firing Squad" were soccer drills not military tactics.

I was told not to worry about my lack of experience. I was, after all, the assistant coach, not the head coach, the REAL coach, the big cheese. I was to be the glorified water boy, ball boy and the step-and-fetch-it. And that suited me just fine.

Then the word came . . . no head coach could be found.

Could I? Would I?

They pleaded. I was to be promoted without trying out.

A strategy that does not bode well with my careful, cautious personality.

Visions of unhappy children and worse yet visions of unhappy parents of unhappy children filled my head.

Overly dramatic? Perhaps.

But I had been hurled from my comfort zone into the eye of soccer stress.

But then Nancy appeared. She was a mother, a teacher, a journalist and best of all . . . a soccer coach.

She knew soccer, she embraced soccer, let's face it, she was soccer. My mentor, my saviour had arrived.

Nancy and I became a team. She, our motivational, inspirational leader with an amazing capacity to remember names and I, the eager-to-help assistant. Some basics I learned from Nancy:

1. Relax! You do not have to be a soccer guru to coach soccer. A basic knowledge is necessary but young beginners like the idea that you, the adult, are learning too.

2. Six-year-olds respond better in a safe, active, fun environment than formal skills training. Once the player has developed the desire—through play—they will naturally want to improve their skills.

3. Acknowledge that each player has more strengths than weaknesses. Some players will naturally be more assertive, more athletic with a greater desire to play while others will find the ant hills more inspiring. Nevertheless, each player must have an equal opportunity to play and to score (preferably in the opposing end).

4. Recognize that winning has several meanings. Scoring goals should not be the only focus. It is the duty of coaches (and parents) to watch and acknowledge when the kids do wonderful things.

Playing well, trying hard and displaying good sportsmanship are wonderful things.

That having been said . . . how is it that I ended up all battered and bruised?

The team needed more players. As assistant coach, one must also even out the scrimmage. So I joined the fray.

Sure I received a few kicks in the shin and I tripped over the ball.

But the kids learn from this too: dust yourself off, try again and nobody's perfect.

See you on the soccer field . . .

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Flying patients
around the world"Angels of Flight"
a unique medical
service based here

Angels, judging by Gail Courneyea's schedule, are super busy individuals.

Courneyea is Peterborough's original "Angel of Flight" and it took four rescheduled appointments to catch up with her when she wasn't arranging medical transport for patients around the globe.

And that was on a week when the woman who operates the Peterborough-based business called Angels of Flight says she wasn't particularly busy.

Busy? Well, Courneyea "guesstimates" that the nurses and paramedics who work for Angles of Flight have been involved in the transportation of somewhere between 30,000 and 50,000 patients by air and by land since she started the service in 1988.

And to hear Courneyea tell the story, the whole international operation got its start by accident and despite the fact that Courneyea really wasn't at all happy about flying.

Courneyea is a critical care registered nurse who worked in intensive care units in Peterborough for 16 years. Part of the job, she says, was accompanying patients when they were transferred to other facilities.

"One day when I went to work I was told that my patient was going by air and I was expected to travel with him. Well, I was not a fan of airplanes or flying."

But she did accompany her patient to Toronto.

"I realized that this was not really what I wanted to do, to transport patients in an area that was totally unfamiliar to me and that I was not comfortable working or being in an airplane. The only other people on board were the two pilots and I was not aware of what was available to me, what I should bring, of what the expectations were and if an emergency did happen on board, what I was supposed to do."

During that 20-minute flight in 1986, she says, she realized that "I would never do this again." She was eventually convinced, despite her doubts, to return to Peterborough by air.

"That was the worst 20 minutes. Now I'm by myself, watching the pilots. It was bumpy. There were alarms going off and I was sure there had to be something wrong with that airplane. I knew I would never do that again."

But later that same year she found herself in the same position, accompanying patients on aircraft two days in a row and accepted "ground school" training.

She eventually went on to obtain a pilot's licence, although she no longer takes the controls. And she went on to take more courses and training in the air medical field both in Canada and the United States.

With that training, her interest in a career in the field developed, but there were no specific positions available in Canada.

"It was just expected that nurses would transfer in ambulances and airplanes, without additional training. I decided to offer what I knew the hospitals needed."

That she says, was Angels of Flight, a company that would supply not only a trained nurse, but a nurse trained in air medicine who would be able to intervene early if a patient developed problems during a flight. And, she says, if she provided equipment suitable for use in the air, all that people needed to do was call a single number to arrange for professional air transport of patients.

Angels of Flight started with four Registered Nurses in Peterborough in 1988. Current staff is 32, a mixture of full-time and part-time workers and growing.

"The very first transfer we did was an American patient that we flew to Boston. After that we also supplied nurses to air ambulance services that were doing a lot of repatriation of patients from Florida (back to Canada)."

Although Angels of Flight doesn't own aircraft, Courneyea says, "We co-ordinate every detail of a medical transfer." And, for the last year, Angels of Flight has used its own medically-equipped vans for non-emergency ground transfer of patients in this area.

Courneyea says that she is not aware of a similar medical transfer service anywhere in the world with the levels of training enjoyed by Angels of Flight staff.

"There are other services that provide nurses to fly on airplanes, but as far as I know, and as far as even the insurance companies or government agencies are aware, they do not have the training that our staff has. They do not do it on a full-time basis as a dedicated transport service as we do."

The service has been involved in transferring patients to and from far-flung parts of the globe, Europe, Asia, Australia, Africa and South America. Co-ordinating medical transport often involves co-ordinating connecting flights, schedules and visas.

"Every day is a challenge. We have tremendous challenges even in the office co-ordinating some of these when you're dealing with other countries. Can a patient transit through a particular airport or does he need a visa?"

On-going medical care is the most frequent, but not the only reason for calling on Angels of Flight. Last wishes, Courneyea says, often come into play with terminally ill patients.

Once such case involved ground transport and standby service for a terminally ill patient from an Ottawa area hospital.

"He had a last wish and had tickets for a Shania Twain concert he wanted to attend with his children. The hospital in Renfrew called and asked if we could transport him to be with his family at the concert at the Corel Centre (in Ottawa) the night of the concert. We did and she (Shania Twain) met with the family. It was really nice. He had young children and his wife was with him and his sister. It was a really nice experience. Thirty-six hours later he died."

Another terminally ill patient's last wish was to die in his birthplace, a community about three hours outside of Manila in the Philippines.

"Two of us took him home. When we got to Pearson (International Airport) the family were all hugging us and waving goodbye. Instead of feeling this was the last



Gary Ball, Examiner

time they would see Dad, they were happy to be able to fulfill Dad's dream of dying at home."

International network

Since it was founded in 1988, Angels of Flight Canada has grown from a modest service area to a worldwide service.

Together with its divisions, Exodus Academy of Aeromedical Studies (education division) and G.E.C. & Associates (consulting firm), Angels of Flight offers services to clients around the world, including hospitals, insurance companies, private individuals, health care providers, corporations and government agencies.

Exodus Academy, the education division, was founded in 1993 to develop education programs for health care and aviation professionals.

Land transportation

Ambu-Lans, Angels of Flight's own land transportation units, provides non-emergency patient transportation between health care facilities for treatment or appointments, return home from hospital, to and from airports or standby at sporting or social events.

In 1999, the Call Centre for Triage and Co-ordination of International Medical Transport was set up by Angels of Flight.

Call Centre staff (flight registered nurses) co-ordinate inter-provincial and international medical transport.

Gail Courneyea is CEO and owner of Angels of Flight. It is a unique medical service which is based in Peterborough but does business globally. Ambu-Lans is their landbased service which provides non-emergency patient transportation.

Favourites

- Gail Courneyea's favourites:
- Most likely to be found: In an ambulance of some sort.
 - Favourite food: Seafood
 - Favourite music: Oldies, rock and roll
 - Favourite relaxation: Reading a book somewhere by myself
 - Favourite leisure activity: Lots of volunteer work.
 - Favourite book: No one book in particular, but I read a lot about aviation.
 - Famous person you'd most like to meet: Nobody I can think of. I've already met a lot of celebrities, politicians and diplomats. People like (Canadian astronaut) Roberta Bondar and (Canadian recording artist) Shania Twain.



Gary Ball, Examiner

Nancy Campbell, receptionist, transport co-ordinator for Angels of Flight pinpoints some of the locations their services have taken them and patients around the world.