

**RESEARCH ON
ROLES AND
UTILIZATION**

Licensed Practical Nurses and Care Aides in BC

PREPARED FOR


Health Employers Association of British Columbia and the
Association of Unions – Health Services & Support Facilities
Subsector (HEU, BCGEU, IUOE, CSWU, IBEW, USWA, BCNU,
UBCJA, UAJAP&P, IBPAT)

Licensed Practical Nurses and Care Aides in B.C.
Research on Roles and Utilization
Fall 2000

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We would also like to acknowledge contributions by LPN educators, resident care aide educators, Dr. Cathie Dunlop, and staff of the Registered Nurses' Association of B.C., the B.C. Healthcare Risk Management and the Healthcare Labour Adjustment Agency.

Finally, we wish to thank our researchers, Barbara Greenlaw, Wendy Williams and Amanda Walker. Barbara's chief involvement in the project related to the development of the B.C. context, the conduct and preparation of the key informant interviews, and the fact sheets relating to LPN roles, education and utilization in other provinces. Wendy, in addition to her role as co-ordinator of the research, conducted and compiled the case studies and role profiles. Wendy was assisted by Amanda in the development of the surveys and the tabulation of the data.

contents

Please see the first page of each section for a more detailed table of contents.

6 introduction

8 recommendations

11 **PART 1** executive summary

17 **PART 2** the BC context

18 Education

26 Employment and utilization

31 Regulation

33 Summary

34 References

35 **PART 3** surveys

36 Executive summary

41 Survey of LPN employment in BC

55 Survey of LPN skill utilization in BC

103 **PART 4** case studies

105 Kelowna General Hospital

145 Lions Gate Hospital

199 Malaspina Gardens

219 Saanich Peninsula Hospital

233 Terraceview Lodge

243 Yaletown House Society

257 **PART 5** **role profiles**

- 259 Fast track LPN
- 261 Community foot care LPN
- 263 Total care worker

267 **PART 6** **key informants**

- 268 Key informants: Major findings from the interviews
- 270 Current activities
- 274 Ideas for future action
- 281 Summary of key points

285 **PART 7** **across canada**

- 289 LPN and care aide roles in Canada
 - 301 LPNs in acute care
 - 301 Royal Alexandria Hospital, Edmonton
 - 303 Queen Elizabeth II Health Sciences Centre, Halifax
 - 305 Chalmers Hospital, Fredericton
 - 307 LPNs and care aides in continuing care
 - 307 McConnell West, Edmonton
 - 309 Park Manor Personal Care Home, Winnipeg
 - 311 The Poseidon Centre, Winnipeg
 - 313 Hoyles-Escasoni Complex, St. John's
 - 315 Specialized LPN roles
 - 315 LPNs providing footcare
 - 317 LPNs in the operating room
 - 319 Overview of LPNs in other provinces
-

introduction

In the summer of 1998, publicly funded health care employers in British Columbia (represented by the Health Employers Association of B.C.) and employees (represented by an Association of Unions¹) agreed in collective bargaining to examine the current and future potential role of licensed practical nurses (LPNs) and care aides.

6 A joint committee comprised of three union and three employer representatives (the “joint committee”) was given responsibility for reviewing the current utilization practices at three health care facilities that employ LPNs and care aides. The expectation was that the joint committee would consider the type of duties performed, as well as those not performed, but for which LPNs and care aides were trained. The joint committee was also mandated to consider the cost and impact on the quality of health care services and efficiency resulting from changes in utilization.

Upon completion of its work, the joint committee was required to make joint recommendations regarding effective utilization of LPNs and care aides to the Regional Health Boards and Community Health Councils.

Joint committee members were: employer representatives Najeeb Hassan (HEABC), Philomena Janzen (Director of Acute Clinical Services, Cranbrook Health Council) and Janice Mitchell (Administrator, George Derby Centre); and union representatives Zorica Bosancic (Assistant Secretary-Business Manager, Hospital Employees’ Union), Irene Jansen (Researcher, Hospital Employees’ Union), Doreen Plouffe (LPN, Hospital Employees’ Union) and Jean Holt (LPN, B.C. Government and Service Employees’ Union). A representative of the B.C. Nurses’ Union sat in joint committee meetings as an observer.

During the planning stages of the joint committee’s work, the provincial government announced that \$5 million had been allocated to health authorities to increase the number of LPNs and care aides in continuing care facilities, backed up with funding for training. In addition, the provincial government allocated \$200,000 to support the joint committee’s research. This allowed the joint committee to retain the services of Barbara Greenlaw and Wendy Williams, who carried out the research and prepared this report under the direction of the joint committee.

With the funding support of the Ministry of Health, the joint committee agreed to expand the depth of its research by developing six site specific studies, three role profiles, a review of utilization practices in other provinces and two surveys designed to identify

¹ The Association of Unions, Health Services & Support – Facilities Subsector includes the following unions: the Hospital Employees’ Union, the British Columbia Government and Service Employees’ Union, the International Union of Operating Engineers, the Construction and Specialized Workers’ Union Local 1611, the International Brotherhood of Electrical Workers Local No. 230, the United Steelworkers of America Local 9705, the British Columbia Nurses’ Union, the United Brotherhood of Carpenters and Joiners of America Local No. 1598, the United Association of Journeymen and Apprentices of the Plumbing and Pipefitting Industry of the United States and Canada Local No. 324, and the International Brotherhood of Painters and Allied Trades Local No. 138.

the type of facility where LPNs were being employed and what specific skills were being utilized by them. The research also expanded to include consideration of the views of educators, regulators, and more employers and employees regarding the effective utilization of LPNs and care aides. Because this project was initiated through facilities sub-sector collective bargaining, it addressed the role of LPNs and care aides in acute and continuing care facilities only; home care and community agencies were excluded.

The parties agreed early in research planning that successful completion of the project required the establishment of supportable and feasible recommendations regarding the role and utilization of LPNs and care aides. The parties were committed to decision making in the research process through consensus, cooperation and collaboration. Although the parties at times had differing perspectives regarding certain aspects of the research and the results, through open, honest and timely communication, the parties were able to arrive at a common understanding of the issues.

Throughout the process, the parties obtained input from their various constituents. HEABC conducted two employer focus groups and the Hospital Employees' Union discussed the research with its nursing team committee and activists.

The joint committee established a working group that met almost weekly, in person or via conference calls. The working group subcommittee was in regular contact through e-mail, fax, courier and regular mail exchanges of information. The full joint committee met on four occasions between September 1999 and June 2000.

The parties agreed upon recommendations supported by the findings of the research set out below. A copy of this report has been forwarded to the Ministry of Health, the Regional Health Boards and Community Health Councils, HEABC member employers and the constituent unions comprising the Association of Unions – Health Services & Support Facilities Sub-Sector.

recommendations

1. That the Ministry of Health make the necessary funding adjustments to create new LPN positions, taking into consideration the needs of health care employers.
2. That the Ministry of Health and the Ministry of Advanced Education, Training and Technology assess the demand for practical nurses and consider the need for increases in practical nursing education programs, including both the regular and LPN Access programs.
3. That the Ministry of Health provide base funding for continuing education of care aides and practical nurses.
4. That the Ministry of Health make adequate funding available to ensure that care aide and practical nurse education and credentialing programs continue, such as those offered through the Healthcare Labour Adjustment Agency.
5. That HEABC member employers explore the potential benefits of coordinating in-service education with each other.
6. That the Ministry of Health explore options for making the expertise of clinical nurse educators available to HEABC member employers who lack resources to provide in-service to practical nurses and care aides.
7. That the Ministry of Advanced Education, Training and Technology establish the provincial home support/care aide curriculum as the standard in all educational institutions, both public and private, that offer the care aide certificate.
8. That the Ministry of Advanced Education, Training and Technology support the development of provincial curricula and programs for advanced practice LPN roles in areas such as operating room and foot care.
9. That the Ministry of Advanced Education, Training and Technology facilitate improved coordination between the care aide, practical nurse and registered nurse articulation committees.
10. That the Ministry of Advanced Education, Training and Technology ensure that care aide, practical nurse, registered nurse, and registered psychiatric nurse education programs teach collaborative practice and knowledge of each others' competencies.
11. That the Ministry of Advanced Education, Training and Technology continue the B.C. Health Care Scholarship program.

12. That the College of Licenced Practical Nurses of British Columbia and the Registered Nurses' Association of British Columbia continue to offer joint presentations regarding the roles and competencies of LPNs and RNs, and that these continue to be affordable and accessible.
13. That HEABC member employers be encouraged to provide opportunities for managers and staff to learn about the roles and competencies of the different nursing groups (LPN, RN and RPN as relevant) – for example, in orientation and, where possible, through regular staff meetings.
14. That the Ministry of Health, HEABC member administrators and health authority governors be advised of the findings and recommendations of the LPN and Care Aide Research Committee through a joint publication of the report.