



HOSPITAL EMPLOYEES' UNION

NEWS RELEASE

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Higher staffing levels, continuity of care critical to attending to seniors with dementia

Staffing shortages, heavy workloads and contracting out in care facilities put workers at increased risk from acts of violence

Health care workers, especially in long-term care facilities, frequently identify inadequate staffing levels and heavy workloads as primary reasons for not being able to deliver the proper care and attention to residents – a problem that becomes more significant when attending to those with dementia – resulting in increased risk of aggressive or violent incidents on the job.

These problems are compounded by the frequent contracting out of care and support staff in the sector which results in high turnover of staff, interrupting the continuity of care for these vulnerable residents, says the Hospital Employees' Union.

The union says that a WorkSafe BC guide on preventing dementia-related violence being previewed in Vancouver today offers solid information for caregivers on interventions that can prevent or minimize the risk of on-the-job injury. But it's only part of the solution.

“As a person's care needs become more complex with complicated health issues that often include dementia, caregivers require more time to properly complete daily tasks without upsetting the resident,” says HEU secretary-business manager Judy Darcy.

“Licensed practical nurses and care aides provide hands-on care and support to residents every day and come to know the needs of those in their care intimately.”

But the continuity of care is compromised when many operators and administrators of these facilities keep staffing levels down or contract out care and support jobs to private companies where staff turnover is higher due to lower wages and lack of job security.

“Residents with dementia in particular respond better to familiar caregivers and may grow anxious and aggressive when faced with someone they don't recognize,” says Darcy. “And families feel more comfortable when they know the people looking after their loved ones.”

The health and frailty of seniors living in facilities has changed significantly since 2002 when only those with more complex care needs became eligible for residential care.

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“The research is unequivocal, resident aggression and violence against workers is reduced when adequate staffing levels are in place and continuity of care is maintained,” Darcy adds.

A 2009 Stats Canada study of long-term and acute care facilities across the country found a clear link between abuse from patients/residents and the workplace environment. And a 2008 York University study on violence in 71 unionized, public, long-term care facilities in Ontario, Manitoba and Nova Scotia found that short-staffing, workload, lack of supervisor support, and inadequate training to deal with mental health issues like dementia were contributing factors to violence at work.

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