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The Honourable Fred Horne
Minister of Health and Wellness
208 Legislature Bldg.
Edmonton, AB T5K 2B6

The Honourable George VanderBurg
Minister of Seniors
227 Legislature Building
10800 – 97 Avenue
Edmonton, AB T5K 2B6

Dear Sirs:

We are writing to request a public inquiry into the unpardonable conditions seniors are subjected to daily in the province's long term care facilities. Attention and focus needs to be brought to this matter to the extent only a public inquiry could provide.

We would all like to believe that our seniors are taken care of with respect and dignity when they find themselves, without choice, relying on the health care system. Unfortunately, what they receive is neglect, lack of compassion, unnecessary suffering with preventable pain, lack of personal care and basic medical intervention.

We need to give a voice to those who can not speak for themselves.

Since our mother moved into long term care, our family met with management on many occasions to discuss concerns regarding the care she has received. On each occasion, we have stated we wanted to work together in collaboration as a team to provide the best care possible. We are not asking for special care, we are only asking that her basic needs be met.

During our meetings, management had acknowledged our concerns and concurred with many of our issues. However there is no evidence of improvement. What we hear repeatedly is lack of funding, lack of training and "the System" is broken.

We have written up just two examples below when medical intervention was required and none was offered. Unfortunately, there are many more from rashes that went untreated for weeks to lack of providing proper hygiene causing blisters, open wounds and urinary track infections. Both of these examples were left untreated until family's repeated requests and phone calls finally led to medical intervention.

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In fact, on every occasion, from podiatrist appointments to being transported to hospital by ambulance, medical intervention has only been given after the family's continued and repeated persistence.

On August 13th 2011, our mother had an abrupt and severe decrease in strength and ability. She was suddenly unable to stand or walk. She had a severe bruise on her left elbow which was not present the previous day. The bruising was extensive. It extended from her elbow toward her wrist and wrapped almost completely around the forearm. When we asked the staff what happened, no one knew. Nothing was charted. However, it is interesting to note that in the past we had repeatedly asked staff to put sweaters on our mother as she was always cold. Suddenly, she was being dressed in long sleeve sweaters. We suspect this was done by the health care aides to hide her injuries. See attached photo of her bruised elbow.

Bruising to this extent requires considerable force. The bruising was too severe to be a result of a minor bump on a bed rail or arm of a chair. Our mother is incapable of getting up on her own and would not be able to get up from a fall. Someone would have had to help her up. She was also now unable to sit straight in a chair, chew or swallow. Yet, nothing was charted to account for her condition.

The family visited daily because of concerns about the changes in our mother. We spoke with the staff questioning whether she had a stroke and requesting for her to be assessed by the Nurse Practitioner. Finally, after several days, phone calls and insisting she be assessed, we received a call from the Nurse Practitioner that our mother needed to be taken immediately to the hospital.

At the hospital our mother was diagnosed with a fractured elbow, urinary track infection and stroke. This was **five days** after showing clear signs of a stroke and severe bruising at the facility.

November 30th 2011, our sister went to visit our mother and take her to the cafeteria for dinner. When she returned to the unit she stopped by the nursing station to let them know our mother had soiled herself and needed her adult diaper changed. Our mother had open wounds on her buttocks as a result of improper peri-care. See attached photo of the wounds on her buttocks.

The staff knew our mother had open wounds on her buttocks and this caused severe pain when she soiled herself. Our sister continued to the room and waited. After about 10 minutes our mother was now getting severely uncomfortable and began crying. Our sister pushed the bell for assistance. The Health Care Aide (HCA) came in told our sister his partner was on break and wouldn't be back for 45 minutes. Our mother would have to wait. Our mother was in severe pain and crying out. In desperation our sister began walking around the unit looking for someone to help. She came upon another HCA who was watching TV in the resident's lounge. When our sister asked for help the HCA said she didn't work on that unit. Our sister returned to the nursing station and asked again.

She was then told by the LPN that our mother was not a priority. Our sister, believing our mother was not going to get the help she required and after an hour of hearing our mother screaming out in pain, called the police. Because no one had physically hit our mother, the police were only able to provide a phone number for our sister to file a complaint. The police could hear our mother screaming out and was very concerned, asking “You are sure no one hit her?”

The HCAs, finally after over an hour and half, did come to assist. One of them was the very HCA who was watching TV who said she didn’t work on the Unit. When they transferred our mother from the chair to the bed they hooked up the lift improperly and forgot to undo the safety belt, lifting the chair that was strapped around our mother’s waist with her. She had the full weight of the chair placed on her hips and abdomen. The HCA did not even realize they were lifting the chair that was strapped around our mother’s waist. She was screaming out in pain louder and more desperately. Our sister grabbed the belt and undid it dropping the chair to the floor. Our mother was now dangling from the lift and nearly fell to the floor. The HCA’s managed to transfer our mother to the bed. They began to try and change our mother however they clearly didn’t know the procedure or where to find the creams for her open wounds. When they did start cleaning her, the HCA aggressively and forcefully wiped the open wounds causing severe pain and bleeding. Our mother lied there helpless to protect herself.

Our mother has cuts and bruises from the belt. She is now in the hospital with serious excoriations on her buttocks and a urinary tract infection that went undiagnosed at the long term care facility. In fact, she was taken to the hospital only because we insisted that they look into this and that she be assessed.

Our mother suffers from chronic urinary tract infections and has had unmanaged wounds on her buttocks for nearly a year, as a result of improper perineum care at the facility. These infections and wounds only healed when she was removed from this facility and placed in the hospital after her stroke.

Our observation is that life ends upon entering a long term care facility; the objective is to house our seniors until they die with no regard as to the quality of life. This philosophy seems to be supported by the medical community – as displayed by our mother’s assigned doctor who stated it would have been a blessing if a chest cold she had in February had turned into pneumonia and she had died. He expressed disappointment that we intervened and insisted that she be treated. We were aghast as our mother was not at end of life; in fact, at this time she was actively participating and involved with her family and friends.

We were outraged by the doctor’s attitude and his disregard for our mother’s life. We met with management of the facility and were told that we were not the first family to bring this concern to their attention. We were told this doctor’s philosophy was well known throughout the facility; however, it is hard to get doctors and basically they are lucky to have him.

If we were caring for our mother in our home and treated her in this manner, we would be arrested for neglect and abuse. Why then are long term care facilities allowed to repeatedly neglect and abuse our seniors without accountability or concern as standard operating practice?

Albertans are entitled to accountability from their government. It should not be acceptable to Albertans to allow long term care facilities to hide behind policy and procedures and budgets as an excuse to allow neglect and harm to come to our most vulnerable and valued citizens.

Do not be mistaken – it doesn't matter who you are, or who you think you are, how much you are currently loved or respected, it is an inevitable truth: if you enter a long term care facility, you will be neglected, your basic needs will not be met, you will suffer needlessly, your dignity will be taken from you, you will be just another body occupying a bed in "the system" until your inevitable death (which will be hastened just by being in a long term care facility).

Even if you are lucky enough to have loved ones who are concerned with your well being, no matter how much time or effort they expend, they will be helpless to assist. You will be at the mercy of "the system". This is the way "the system" operates and this is how it will operate, when you require it, unless we change it now.

Our concerns are not unique and specific to our mother. We see widespread neglect of the elderly, a lack of respect for their dignity and well-being, a philosophy that the elderly are disposable and not worth caring for, and that their lives are not worth saving.

The problem is there is no accountability in the system. Administration costs continue to skyrocket, but the care is not being given where and when it is needed most. We believe that a public inquiry into long term care will not only expose many of the problems in the system, but will also generate much-needed solutions. May we please hear from you.

Yours truly

Cynthia Jonasson

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