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November 22, 2019

Revised  
Sent by Email, Original to follow by Mail

Scott Livingstone  
CEO, Saskatchewan Health Authority  
Corporate Office, Saskatoon City Hospital  
701 Queen Street  
Saskatoon, SK S7K 0M7

Dear Scott:

**RE: Resource Commitment: Minister of Health, Jim Reiter  
November 20, 2019**

On November 20, representatives of SEIU-West attended the legislature. During question period, the Opposition Health Critic, Vicki Mowat, made inquiry about overcapacity issues faced by emergency departments and the presence of hallway medicine in Saskatchewan hospitals. The Minister of Health, Jim Reiter, responded as follows:

*Mr. Speaker, it needs to be clarified that we've made it completely clear to SHA officials that financial resources are not to get in the way of rectifying this problem, Mr. Speaker. They realize they have all resources at their disposal. (Hansard)*

It is our understanding from our communications with members employed at Saskatoon hospitals that hallway care continues to prevail on a daily basis. For example, we have received 52 Workload Tracking forms from our members who work in the new Children's Hospital in Saskatoon since October 9. These forms are used to report understaffing circumstances and the following are samples of the added commentary: equipment not working, backup power system unsafe, multiple indications of insufficient training, repeated non-replacement of staff, workload too heavy for the staff (consistently), work not organized evenly, and no priority provided by Manager (what can be done/what can be left).

We understand that a **permanent** call light system has recently been installed in the hallway of Unit 5B at St. Paul's Hospital. This unit, as well as Unit 4B have experienced circumstances of hallway care over the recent weeks. The difficulties associated with this kind of care are numerous: staffing coverage is intended only for the number of patients regularly located in the unit – so this

is an understaffing issue on each occasion; there is impaired ability to move equipment, particularly in the case of an emergency; and patient privacy is non-existent. The installation of a permanent call light system in the hallways does not remedy any of these difficulties; rather it sends the message that hallway care has become the normal provision of care in the system.


Further examples of understaffing exist at St. Paul's Hospital on 6th medicine. The unit is set up to have 45 patients and staffed on that basis. Yet the overflow beds are always occupied which means that 47 patients need to be cared for. It has been reported that an added 8 patients often occupy the pod by ICU. Rather than staffing this independent of 6th medicine, a Continuing Care Assistant (CCA) is often pulled from 6th medicine, leaving the unit with only one CCA for the day shift.

We have also received a number of concerns from our members who work in the Emergency department at RUH. It should be noted that these have been previously identified as safety issues in our discussions with Petrina McGrath involving the Safety Partnership Advisory Group. When the mental health unit was created at Royal University Hospital, there was a loss of resources to RUH emergency in regards to the guaranteed hours/coverage within Unit Assistant classification. This has been ongoing and this classification is yet another hard to recruit classification. This has resulted in low morale, increased staff shortages due to exits, and extremely stressful work conditions, coupled with unmanageable workloads.

These are but a few examples of areas that could be improved upon immediately. We are confident that many more examples can be furnished. Given the recent commitment of the Minister of Health, and the availability of needed resources to rectify the existing problems, it is our desire to work with you to ensure that understaffing does not continue to plague our health care system. We are concerned that the Minister's commitment has not been acted upon and would like to know why this is the case.

Thank you for your earliest reply.

Yours Truly,



Barbara Cape  
President  
SEIU-West

BC/SC/jb USW5917

cc: Hon. Jim Reiter, Minister of Health  
Hon. Warren Kaeding, Minister of Rural and Remote Health  
Vicki Mowat, NDP Opposition Health Critic