



SITUATION CRITICAL

The crisis in long-term care

PSWs heartbeat of 625 nursing homes in Ontario

As front-line workers in the overburdened long-term-care system, PSWs are the first to see its problems. Given the chaos they experience every day, they want better training standards and other professional improvements that the Province, so far, is rejecting.

Second in a four-part series.

By Jillian Follert
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When the woman's head hit the wall with a dull thud, Cathy's blood ran cold.

"I was just thinking, 'Oh my God, oh my God, what if I killed her?'"

The 26-year-old was four months into her first job as a personal support worker at a Toronto long-term-care home, when she left a frail, wisp of a 90-year-old Alzheimer's patient with a bump on the head, after struggling to transfer her 100-pound body from wheelchair to bed.

"It's partly my fault, because I probably should have asked for help," Cathy said, crying as she remembers that day in 2008, and the nurse who called her an idiot. "But, I also think it's not really my fault, because my school never taught me how to do transfers properly."

Cathy isn't her real name.

As was the case with most of the 30 PSWs interviewed for Situation Critical, Cathy agreed to tell her story, on condition that her name and the home she works at not be identified.

She worries about being fired or blacklisted for speaking on situations that jeopardize care.



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The 30,000 personal support workers employed in the province's 625 nursing homes are the most intimate point of contact for the 75,000 Ontarians living in long-term care.

PSWs are the most intimate point of contact for 75,000 elderly Ontarians living in government-supported nursing homes, helping with everything from feeding to toileting.

The approximately 100,000 PSWs employed in various eldercare capacities in Ontario — about 30,000 work in nursing homes — toil at the bottom of the health-care food chain, whether they work in long-term-care facilities or at an individual's home.

They're in a struggle for legitimacy that has become more public as PSWs push the province harder for higher standards and concrete training requirements.

It's a losing battle.

Health Minister Deb Matthews recently scrapped a round of public consultation on potential regulation of PSWs. She told Metroland she's "very much concerned" about PSW qualifications and the fact that training courses differ dramatically in length and content.

"What I think is important, is there is a clear understanding of what training is required to call yourself a PSW," Matthews said. "My understanding is that it varies tremendously."

PSWs are the heartbeat of Ontario's 625 nursing homes, responsible for up to 75 per cent of care.

They bathe and dress residents, comb their hair and brush their teeth. They lift them in and out of beds and wheelchairs, and help those who can still use the toilet. They change diapers, spoon feed residents and reposition them to prevent bed sores.

Increasingly, PSWs also tackle medically related tasks delegated by other overworked health professionals, including changing nitroglycerine patches and navigating chest drainage, feeding tubes and oxygen therapy.

PSWs who spoke to Metroland said ratios can be as low as three or four PSWs to 50 or 60 residents.

"You're literally jogging from room to room, you have no time to talk to the resi-

dents and spend time with them," said April Hill, from the Orillia area, a PSW for about three years.

"It's just go, go, go. Get them out of bed, put them back in bed. Feed them, wash them, dress them. Move on to the next one."

PSW advocates say it would be easier to navigate the growing challenges if PSWs were all well-trained and had a professional organization to lean on.

"We are in desperate need of regulation and standards. If you get a PSW in there who isn't properly trained you put the public at risk. People get hurt," said Miranda Ferrier, president of PSW Canada, an advocacy group. "PSWs become an extension of their residents, they're their hands and their eyes. They do everything they can't do for themselves, and that takes the right training."

PSWs are faced with short staffing, a relentless work pace, supply shortages and residents whose medical needs are increasingly complex.

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