

**News Conference Statement  
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Good morning.

Saskatchewan's chronic under-staffing of specialized health care professionals has created long waiting lists for some health care services, and stretched the limits of patient safety for others.

Saskatchewan's population is growing, and the demand for health care services is growing, but health care employers and the Wall government refuse to adequately staff the specialized health care professionals we represent.

We are tired of health care employers and the Wall government lying about the state of Saskatchewan health care, and ignoring the kind of danger they have created for patients across the province.

We are tired as well of the Wall government condoning this chronic under-staffing, by creating a system of cash bonuses for Health Region CEOs, which pays them up to \$36,000 a year extra for cutting staff and services to balance health region budgets.

This is a complete contradiction of the Wall government's commitment to "put patients first".

SAHO claims health care employers are staffing our specialized health care professions properly. The independent *Canadian Institute for Health Information* proves SAHO is misleading the public.

Occupational therapists are the specialized health care professionals who work with individuals that have conditions which are mentally, physically, and developmentally disabling.

CIHI statistics show that Saskatchewan has the lowest number of occupational therapists per capita in Canada.

The waiting lists for families whose children have autism or for those in community mental health programs run six months to more than a year, an unacceptable level of service.

Physical therapists are the specialized health care professionals who help patients maximize their physical movement and functionality due to injury, illness, or major life events like surgery.

CIHI statistics show that between 2008 and 2009 the number of physical therapists actually *decreased* in Saskatchewan.

This reduction happened at the same time as the government and health care employers increased the number of surgeries taking place in Saskatchewan.

Physical therapists are critical to a surgical patient's post-operative care, helping them to regain safe mobility as quickly as possible. A decreasing number of physical therapists are available to serve an increasing number of post-operative patients.

This has meant non-surgical patients are being left behind and now face waits of anywhere from six months to a year for treatment.

Respiratory therapists are found in hospital emergency rooms, intensive care units and operating rooms, helping critically ill patients to breathe when they can't on their own.

CIHI's latest statistics show that Saskatchewan has the lowest number of respiratory therapists per capita in Canada, and less than half the national average.

Let me give you an example of just how dangerous this situation can be. At Saskatoon's Royal University Hospital, there are no Respiratory Therapists designated solely to the wards to look after the large number of patients with serious breathing problems. RTs look after patients in the Intensive Care Units, but ward patients are often left to others.

Most Canadian hospitals have dedicated RTs who solely work on the wards. But not at RUH.

Recently, a nurse took a ward patient off a ventilator and capped their tracheostomy tube, without deflating the balloon valve to allow them to breathe on their own.

The patient almost suffocated. A 'code blue' had to be called.

An RT responded to the emergency from one of the ICUs, and was barely able to save the patient from going into cardiac arrest.

How many more patients have to be put at risk, before health care employers and the Wall government hire more Respiratory Therapists?

In the last few months, the Saskatoon Health Region alone has lost four Respiratory Therapists to other provinces, because wages and benefits here are just not competitive.

If the Wall government can afford to pay Health Region CEOs as much as \$414-thousand a year in salary and bonuses, when is it going to agree to pay competitive wages for specialized health care professionals, like Respiratory Therapists?

Another example of how patient safety is being compromised: In the Cypress Health Region, senior managers are attempting to reduce their budget by simply refusing to staff ambulance services at a safe level or offer overtime to existing staff. As a result, wait times for an ambulance that used to average fifteen minutes can now take up to forty-five or fifty minutes. This is well above the national standard for safe response times in Rural Saskatchewan.

Another example of patients being put at risk: The *Best Practices Guidelines* for stroke victims require them to be given a swallowing assessment within 24 hours, by a specialized health care professional like a Speech Language Pathologist, so other staff will know what these patients can be safely fed or how best to help them begin to recover their speech and other faculties.

But in the Regina Qu'Appelle Health Region, where the CEO is paid more than \$414-thousand a year in salary and bonuses, there are no Speech Language Pathologists hired in any of the region's long term care facilities.

This means that long term care patients who suffer a stroke will not receive this critical assessment in a timely manner.

If the Wall government can afford huge salaries and cash bonuses for the CEOs who run the health regions, why can't it afford to hire enough specialized health care professionals to properly serve our senior citizens and other long-term care patients?

Here's another example of patients being put at risk: Saskatchewan families will recall how four babies became critically ill after being given the wrong medication at Royal University Hospital in Saskatoon last year.

Even the health region's Vice-President of Clinical Operations agreed that under-staffing of hospital pharmacists, and outdated facilities, contributed to those life-threatening mistakes. But instead of hiring more hospital pharmacists, health regions are actually cutting positions.

In 2010, the Saskatoon Health Region actually budgeted for 9 fewer hospital pharmacists than it had in 2008, and it failed to fill even those reduced positions during much of the year.

When is the Wall government going to do the right thing, and start properly staffing specialized health care professionals like Hospital Pharmacists?

SAHO and the Wall government claim they have offered our professionals competitive wages.

Not true.

SAHO's own Western Canada Wage Comparison tables on its website confirm that among 26 Health Sciences professions, 16 would be paid less than the Western Canadian average, even after their proposed increases and market rate adjustments are taken into account!

In fact, for professionals like our EMS workers Saskatchewan will be dead last among the Western provinces! Not competitive. Not even close.

If the government can afford huge increases for health care managers, like Health Region CEOs, when is it going to instruct SAHO to finally come to the bargaining table with a fair and reasonable contract offer that will reflect actual competitiveness for Saskatchewan's specialized health care professionals?

We go back into contract negotiations with SAHO today. We have now been more than two years without a contract.

If the Wall government is serious about trying to provide Saskatchewan patients with high quality, safe health care then it needs to instruct health care employers to get on with the job, and present a fair and reasonable contract offer.

If the Wall government and health care employers do not plan to present a fair and reasonable contract offer, then they should have the courage to submit this contract to independent, third party binding arbitration.

Thank you. I'll be happy to take your questions.