Reflecting on 2014

Throughout the past year, vacancy management has been prevalent throughout the regions. Disclosure of staffing levels, service levels and wait lists by the health regions to the public did not happen. HSAS brought this to the forefront in the media and at the bargaining table. The media questioned why the regions would not agree to disclosure, particularly in a public health care system. The sharing of that information should be happening but the resistance shown by the health regions is significant and concerning.

When HSAS met with the Minister of Health last February, several points were raised. HSAS reaffirmed that HSAS health care professionals and their contributions could result in an efficient, and productive health care system, but only if HSAS health care professionals were providing service in the right place, at the right time, in the right numbers.

At the time of the meeting, the Ministry had put forth to the health regions a number of initiatives. Two of those initiatives focused on long term care and mental health. HSAS brought to the Minister, information from the HSAS members’ perspective. HSAS discussed deficiencies in Saskatchewan’s long term care system with particular attention to the rural services. HSAS pointed out the limited to no resources of such health care professionals as Dietitians, Speech Language Pathologists, Occupational Therapists and Physical Therapists, among others, and the impact of not having these professionals providing services in long term care. Mental health services were addressed, with discussions focused on the impact of vacancy management of a wide variety of positions in Mental Health and Addictions in Saskatoon Health Region, where 20 + positions were left vacant during the summer of 2013. Positions deliberately left vacant, included Psychologists, Social Workers, Mental Health Therapists, and Addictions Counsellors. The health region called it Position Optimization. The reality was a sad state of affairs in health care, for the Saskatchewan residents and stakeholders – who desperately needed access to these specialized services. Through available media options, such as press conferences and news releases, radio and television interviews, and through use of our website, our members’ perspective has been shared. Topics have focused on insufficient rural EMS services and health regions denying the existence of vacant positions, and the need for an independent review of these services; severe understaffing of hospital pharmacists threatening patient safety as well as leading to increases in medication errors and re-hospitalizations; professional understaffing of such
professions as Speech–Language Pathologists where Saskatoon Health Region claimed no vacancies, when in fact, there was a 46% vacancy rate among Speech–Language Pathologists at the Alvin Buckwold Child Development Program (ABCDP). Result? Wait times of 12–18 months for assessments and treatment for Autism Spectrum Disorder.

These are just a few examples of the issues we have shared with the residents of Saskatchewan, and there are more stories that will be shared. It is deeply disturbing that these are not the exceptions. It is glaringly apparent from communication with our members that so many more workplaces are struggling and are concerned.

In August of 2014, HSAS commissioned a Public Opinion Survey, which confirmed that the public had a higher confidence rating in the HSAS professionals, and the services delivered by HSAS professionals, than in the performance levels of their local health regions. Health care was rated as the most important issue facing Saskatchewan today by 35.2% of respondents, more than four times the next most important issue, Economy/Jobs, at only 8.7%. Clearly, the timely delivery of quality care by the appropriate skilled health care professionals is central to the well-being of Saskatchewan residents.

The need for transparency and accountability within the health care system was echoed recently, by the Provincial Auditor, Judy Ferguson. “I think as the public we should know. We have a right to know."

In the coming year, HSAS will continue to advocate for accountability and transparency by health region management of all health care services provided by HSAS health care professionals. Only then will we see improved access to health care for ALL Saskatchewan residents, and a better quality of life, for our patients, and the clients we serve, whether it is long term care, acute care, or community services.

Executive Council, Committees and staff continue to work hard on your behalf.

In Solidarity,

Karen Wasylenko
President