

# Behind the Front Lines

A recap/critical look at health care news and the reality behind the reporting from the viewpoint of front-line Ontario registered nurses

Volume 2, No. 6  
July 2010

## Four Things You'll Learn in This Issue:

1. **Family physicians no longer the first line for health care in BC** – [go](#)
2. **Medicare is sustainable** – [go](#)
3. **Nursing student tutors RNs in social media** – [go](#)



**Media coverage makes a difference** – [go](#)



*Behind the Front Lines* recently won in the best new newsletter category of the APEX Awards for Publication Excellence.

## Health and Safety for Caregivers to Improve?

An Expert Panel to Review Ontario's Occupational Health and Safety System ([background](#)), appointed by the Ministry of Labour, has received considerable input from health care organizations.

Chair Tony Dean and the committee heard stories of lax occupational health and safety policies and procedures from ONA and other organizations, and followed up with a visit to ONA's offices on July 15 for more first-hand accounts from RNs of their experiences.



ONA representatives told the committee that Ontario health care facilities lag decades behind the rest of the workforce and fail to meet even the minimum health and safety standards. While many industries have embraced health and safety as a core value, health care workers continue to face far more dangerous working conditions with far less protection.

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### What is ONA?

The Ontario Nurses' Association (ONA) is the union representing 55,000 registered nurses and allied health professionals and more than 12,000 nursing student affiliates providing care in hospitals, long-term care facilities, public health, the community, clinics and industry.



**Who is Linda Haslam-Stroud, RN?**

ONA President Linda Haslam-Stroud, RN (pictured), is a veteran renal transplant nurse who is an expert spokesperson on a range of issues. Linda is available to comment on everything from workplace violence, patient care, health care policy in Ontario, the flu pandemic, nursing cuts, public health and much more. Simply contact ONA's media relations officer, Sheree Bond, at (416) 964-8833, ext. 2430 if you would like to interview Linda on a health-related issue.

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## Occupational Health and Safety *cont'd*

ONA members told the committee that nurses find a number of impediments to safe working conditions, including:

- Nursing students are reluctant to speak up if they believe something is dangerous, as they fear they'll fail or lose a job placement opportunity;
- Many physicians do not comply with current legislation regarding workplace health and safety;
- Workplace Safety and Insurance Board back-to-work programs are riddled with problems and adjudicators are not properly trained in health and safety laws and/or fail to apply them in their decision making;
- Injured workers are experiencing re-injuries – and health care facilities often lack safe equipment to prevent injuries.

ONA made a written submission to the Expert Panel as well, detailing 58 recommendations designed to address serious deficiencies that risk the health and safety of caregivers and their patients.

A report and/or recommendations are expected to come from the Expert Panel in the late fall.

## Picard Urges Canadians to “Get Over Marcus Welby” Syndrome

*Globe and Mail* columnist Andre Picard has written a column focused on the BC government's plans for primary health care.

Picard writes about a Ministry media release that has committed to the provision of a family doctor for everyone in the province by 2015 ([source](#)).

But as he notes, the “eye-catching” media release is a bit misleading. Picard examines the real story – rather than hire more family physicians, what the BC government is actually promising to do is create “divisions of health care” in which doctors pool their resources to hire other health professionals. These others – nurse practitioners, nurses and dieticians, for example – will take on much of the work that had been handled by family doctors.

Picard makes the case for using multidisciplinary care teams and says it's a “laudable, effective, cost-efficient approach.” He urges every province to ensure its residents have timely access to a primary care provider, and writes that the funds our governments now pour into walk-in clinics where the care is “poor” would be better spent hiring nurse practitioners.

Ontario's government has announced multiple nurse practitioner-led clinics, but few are actually up and running.

## Nursing Student's Blog Being Discovered World Wide

Robert Fraser, a Master of Nursing student at the Lawrence S. Bloomberg Faculty of Nursing who was recently profiled on [yongestreetmedia.ca](http://yongestreetmedia.ca) ([source](#)), is becoming world renowned – and is expanding knowledge of the nursing profession in the process.

Fraser – who passionately believes technology can advance nursing research – is also spending considerable time easing nurses and nursing leaders into the world of new media.

He is the founder of **Nursing Ideas** ([www.nursingideas.ca](http://www.nursingideas.ca)), which was featured during Nursing Week in the *Toronto Star* ([source](#)), and has received interest from around the world.

Fraser posts video interviews with nursing leaders, shows the range of nursing careers available and helps nurses learn how to use technology.

With his blog about technology, Fraser's goal is to convince nurses that using new media can change relationships, help to share knowledge and enhance collaboration.

# UNDER THE RADAR

## News the Media is Missing

## Renowned Health Economist Says Medicare is Sustainable

A report released in June about the unsustainability of public health care from TD economists (commissioned by Minister of Health and Long-Term Care Deb Matthews) received a great deal of media attention.

But – with the exception of the *Toronto Star* ([source](#)) – the remarks of one of the world's leading health economists to Members of Parliament received less coverage.

Dr. Robert G. Evans, University Killam Professor for the Department of Economics at the University of British Columbia, spoke of the most common myths about health care costs, noting that contrary to popular belief, Canada's public health care spending is not skyrocketing and in fact is below average of the 31 member countries of the Organisation for Economic Cooperation and Development.

Evans spoke at a reception sponsored by the Canadian Health Coalition ([source](#)) and systemically debunked most of the common myths about the cost of Canada's public health care system.

Evans said that opponents of medicare who claim that it is fiscally unsustainable are wrong, noting:

- Medicare spending has remained at four to five per cent as a percentage of Canada's GDP from 1975 to 2010;
- \$170.8 billion has been removed from public-sector revenues by government tax cuts between 1997 and 2004;
- Average annual private drug plan costs have risen by 15 per cent;
- While public health care spending has remained stable, spending on private health care is driving cost increases.

He advocates for more single-payer public insurance and less private insurance, urging that we begin with a universal public drug plan to replace the expensive patchwork system of private drug plans.

Video of the Parliament Hill visit and discussion is available [here](#).

## Postscript to London Cancer Care Cuts:



### Media Coverage Helps Reverse Decision

Media attention given to cancer program nursing cuts at London Health Sciences Centre has helped pressure the hospital to rescind ([source](#)) the decision.

In February, the hospital announced it was cutting all of its Ontario breast screening program registered nurses and eight of its RNs working in the outpatient cancer clinic ([source](#)). Media coverage of this story resulted in a large outpouring of objections from the community.

A group of outraged Londoners organized on-line petitions and started Facebook groups to fight the cuts. ONA members organized an open forum in the city that attracted more than 100 citizens, politicians and a heavy contingent of media. The broad media coverage likely played a role in the reversal of the cancer care nursing cuts, although the breast screening nursing cuts proceeded.

Adding pressure was a visit to the Legislature by cancer patient Marita Devries. Accompanied by two London Health Sciences RNs, Devries watched question period and then gave a series of interviews to television and print journalists from Toronto.

Originally defending the nursing cuts as necessary to balance the hospital's budget, administrators are now admitting that the public backlash was a reminder of how much the community values and relies on care.

# Health care on the front page?

## Speak to front line nurses!

The Ontario Nurses' Association (ONA) is the voice of 55,000 front-line registered nurses and allied health professionals as well as more than 12,000 nursing student affiliates working in every sector of health care.

Need the real story?

Contact ONA.



[www.ona.org](http://www.ona.org)

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***Behind the Front Lines*** – an electronic newsletter that takes a look at the stories behind the stories. Great background info, insight and a resource for every journalist who writes about health care. E-mail [shereeb@ona.org](mailto:shereeb@ona.org) today to receive your copy.