



Presented to:
Work Safe BC
Public Hearing
Kelowna

Ladies and Gentlemen,

June 14, 2007

4:10-4:30

I am here because of your advertised hearing, and I wanted to speak to you about working alone or in isolation, with a reference to violence in the workplace.

I am a Registered Nurse who came to B.C. from Alberta last year. There, by contract, we may not work alone on a unit. I am working in a Long Term Care Facility in a permanent Nights position, that is from 11:00 pm to 07:00am.

There are 3 units. One unit is designated for Chronic Behavior Disorders. Here violence is a constant consideration and many incidents occur. Although the criteria of loss of limb or blood loss has not been met, there have been many incidents where use of a limb has been affected, and blood loss is contained in the form of a bruise. This is a locked unit for approximately 20 residents. It has 2 staff on during the night and is visually isolated from the other units, and within, the central core blocks the view from one side of the unit to the other. Many are early risers, and supervision is difficult.

The 2 other units have approximately 40 residents each and they also have 2 staff on each unit during the night. One of these is the RN, who can be called away if there are problems on the other units. The rooms on these units have a central courtyard and it takes 200 steps to walk around the unit and an additional 100 steps to walk to the other nurses station. The 2 nurses stations are within sight of each other, but are out of voice range. Our work is mainly out on the unit, in the rooms and corridors, not in the nursing stations. We have paging devices that we often find are less than reliable, and if you are fending off a physical attack you do not have time, or a free hand to use them.

We sometimes have to work with less staff, if replacements can't be found and during the night we have no recourse, as the scheduling office is closed. We are allowed a 1/2 hour meal break and two 15 minute coffee breaks, so for at least 3 hours during the night on each of the 2 open units, there is only 1 one staff member, since each unit sends one staff member into the locked unit to cover their breaks. Most of the people in our care require much assistance, and are unable to follow direction due to physical or mental impairment.

I have had the experience of being attacked. I had administered medications, called the manager, the police, doctors on call, and the ambulance (who was actually in the process of returning someone to us), and I was unable to get assistance until after the attack actually happened, and even then the Doctor on call refused to be of help until he had spoken with the Constable.

I believe that in our work we are quite isolated and should be considered for your list of workers who are at risk of violent attack, who are isolated from other workers, or public view.

Jenda Brown