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Workplace Health and Safety as Core Competencies for Health Care Workers

Resolved that, clinical continuing care staff and operational leaders' core competencies and knowledge in workplace health and safety be considered an integral part of their training, education, and evaluation as it pertains to their role in the continuing care sector.

SafeCare BC Health and Safety Association (Jennifer Lyle)

PURPOSE

The continuing care sector is facing a human resources staffing crunch. Over the next twenty years, it is estimated that the Canadian nursing workforce will need to increase by 3.4% to meet projected demand for seniors care services; however, the current labor workforce growth rate is approximately 1%. In addition, the BC Ministry of Health has established a target of recruiting 900 new health care aides over the next five years to ensure service targets are met for the continuing care sector.

The dominant strategy put forward to address this staffing crunch is to recruit more workers. However, this approach misses a critical fact: nearly a third of the Ministry's 5-year target for care aides (265 full-time equivalents (FTEs)) and 57 nursing positions in the continuing care sector are already filled by trained, experienced staff – but these staff are unavailable to work due to workplace injuries. If strategies were in place to effectively reduce time-loss workplace injuries in the continuing care sector, the sector could stand to gain the equivalent of 420 FTEs – in one year.

Despite this, workplace safety is a low priority for many of the education programs responsible for producing the continuing care staff and leaders of the future. In addition, health human resource strategies have thus far failed to identify workplace injuries as a key factor in staff retention. This needs to change if we as a sector are to effectively address staffing shortages.

Addressing staffing challenges is a critical issue for the continuing care sector. Recent surveys by SafeCare BC of the long term care and home care and support sectors have identified significant staffing challenges. Over 87% of home care and support sector respondents indicated that their organization is short-staffed, and 70% of long term care sector respondents indicated the same. Of the positions most often faced with shortages within these organizations, occupations pertaining to direct client care (e.g. health care aides, home support workers, licensed practical nurses, and registered nurses) were most commonly cited.

This chronic staffing shortage has a direct impact on the quality of care provided. Direct care staffing shortages have been linked to poorer clients outcomes regarding pressure ulcers, weight loss, and functional ability. In addition, staffing shortages negatively impact the staff continuing care clients rely on. Staffing shortages are associated with higher staff turnover, higher rates of staff burnout, and negative effects on workplace health and safety practices.

Up until recently, health human resource strategies have focused heavily on recruiting new labour market participants. However, this approach misses a crucial contributing factor to the health human resources crunch in the continuing care sector: high workplace injury rates.

In 2015, the long term care sector lost 110,090 workdays due to workplace injury, which amounts to a loss of roughly 315 full-time equivalents (FTEs). Similarly, the home care and support sector lost 36,615 workdays due to workplace injury, or a loss of approximately 105 FTEs over the same period. Combined, workplace injuries resulted in a loss of 420 FTEs in one year for the continuing care sector. To put in comparison with the Ministry of Health targets for care aides, nearly 265 FTE care aide positions are lost every year due to workplace injury, or nearly a third of the Ministry of Health's 900 positions 5-year target.

Despite these facts, workplace health and safety frequently takes a back seat to client care-related competencies. Staff hiring practices, performance evaluations, education, and leadership programs focus heavily on client-centred care competencies, but frequently omit workplace health and safety competencies. This needs to change. Research and experience in other areas indicates a strong link between safety training and lower workplace injury rates. Moreover, industries in which performance evaluations and hiring practices incorporate workplace health and safety competencies have typically performed better in terms of workplace injuries than the health care sector, despite having high risk profiles (e.g. upstream oil and gas industries).

To that end, SafeCare BC is proposing the following:

Clinical continuing care staff and operational leaders' core competencies and knowledge in workplace health and safety be considered an integral part of their training, education, and evaluation as it pertains to their role in the continuing care sector. Specifically:

1. Competencies in safe client handling and violence prevention be formally incorporated as core competencies in all recognized nursing programs (registered nursing, nurse practitioners, registered psychiatric nursing, and licensed practical nursing), similar to what has been done for care aides.
2. The existing workplace safety components within recognized health care aide programs be reviewed and updated to incorporate latest best-practices in workplace health and safety education.
3. Leadership programs (e.g. Masters of Health Administration, Advanced Certificate in Health Leadership, and leadership modules within recognized nursing programs) formally incorporate modules on leaders' workplace health and safety responsibilities, as per the Occupational Health and Safety Regulations.

4. SafeCare BC work with industry and key stakeholders to create a voluntary guide on core workplace health and safety competencies for direct care staff to help inform hiring and evaluation practices within the continuing care sector.
5. SafeCare BC work with industry and key stakeholders to develop workplace safety leadership training for supervisors and managers already in the field.
6. SafeCare BC work with the Ministry of Health and key stakeholders to identify specific, sector-wide strategies to enhance the retention of continuing care staff through reducing workplace injuries as a core part of the larger Health Human Resources Strategy.

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