

Quotable Quotes from Families and Government MLAs

From February to July 2006, twenty-two families offered CITIZEN WATCH their stories of a loved one's experience in a continuing care facility in Alberta for review and analysis.¹ The following pages feature some insightful quotes from those stories. The pages also include quotes from government MLAs found in press articles, news releases and the Alberta Hansard.

These side-by-side statements are meant to illustrate the persistent troubling gap between what government officials think and say about continuing care, and what families of care recipients observe, experience and say.

They are also meant to inspire discussion about the reasons behind the government's side of the story, what this means for future generations of frail Albertans, their families and front-line workers, and what the citizens of this province can do to effect change.

To offer your point of view on this important issue, please write:
perspectives@continuingcarewatch.com

>>> Scroll down to next page for quotes.

¹ The term continuing care facility is used broadly to refer to traditional long-term care centres such as nursing homes and auxiliary hospitals as well as assisted and supportive living settings (including personal care/group homes and enhanced lodges) which now substitute for traditional care centres.



**Premier Ralph Klein
MLA Calgary-Elbow**

“I don’t think that we’re neglecting our seniors. Overall, I think the system is good, but if it needs to be improved, we’ll find ways to improve it.”

CBC News May 10, 2005



**The Honourable Iris Evans
Minister of Health & Wellness**

“I think the steps we are taking go a long way to improving the quality of care for residents.”

February 23, 2006 News Release

Comments from Families and Friends of Loved Ones in Continuing Care Facilities

“My husband’s need for palliative care and pain management put an added strain on the understaffed facility. There was one registered nurse on duty from 11pm to 7am for 120 beds in 3 or 4 units. On one of the nights I stayed with my husband, three residents had to be transported to hospital - one for a fall resulting in a broken hip, one for congestive heart failure, and my husband because staff were unable to replace a catheter. I can’t imagine how overworked the RN was that night and probably many other nights and days as well.

On the bulletin board of the nursing home is a sign concerning reporting abuse of seniors. I felt at the time that the very system that is supposed to prevent abuse was in fact causing abuse by failing to provide an appropriate level of care.”

“We haven’t seen any increase in the care hours and staffing. In fact, there seems to be a drastic decrease in the care level of our loved one. He often has to remind staff that his gastrointestinal feed hasn’t been given. This is because there are often only two workers to 15+ residents. When a caregiver calls in sick or goes home sick, there is no replacement.”

“It was disturbing to see such substandard care. It was clear to me this centre was incapable of caring for someone with my friend’s level of need. I knew I had to get her out of there before they caused her death. I realized she had little time left and I wanted her to live it safely and with dignity.”

“As the ratio of caregiver to patient is approximately 1 to 12-14, the care is really substandard. We have hired private companions (at an added cost of \$1600 per month) to try to ensure my father gets the minimum of care. When his companions are there, it is a struggle for them to get the staff to provide minimum care. At least five times in the last two weeks, either the private companions or our family have found my father soaked in urine and covered in dried feces. The excuse we get from the supervisor is that they are short-staffed due to sickness and are having difficulty hiring people.”

“It has gotten to the point where staff must use paper towels on the residents’ buttocks when the resident does not have the funds to buy the appropriate products. I wonder how Mr. Klein or Ms. Evans would feel if their loved one was receiving similar treatment.”



**The Honourable Yvonne Fritz
Minister of Seniors and
Community Support**

MLA Calgary-Cross

“I had the opportunity to go with the Minister of Health and Wellness throughout the province and view a number of facilities. We did have a good day viewing those facilities. **We truly know how those facilities are offering great care.**”

Alberta Hansard May 10, 2005



**Len Webber
MLA Calgary-Foothills**

**Co-Chair, Taskforce on
Continuing Care**

“**I am proud to say that the government has improved the continuing care system in many ways** through numerous responses to the recommendations in the Report of the Auditor General on Seniors Care and Programs ... This shows that the processes set up to govern Alberta are working, and, as a result, **Albertans are being well served.**”

Alberta Hansard April 3, 2006

Comments from Families and Friends of Individuals in Continuing Care Facilities

“We’ve written letters to MLAs and other government officials, lodged complaints and concerns with Administration, but we feel we’re fighting a losing battle. We had hopes when the MLA Task Force was formed, but strongly suspect there’ll be little change - and any change that does occur will probably not be to the benefit of residents.”

“One morning I received a phone call from the facility advising that my mother had an accident. Upon my arrival and after observing multiple bruises on my mother’s knees, shoulders, chest, arms, and face, I became very concerned. I was even more concerned to learn that none of the staff I talked to had any idea how these injuries happened. Being concerned for my mother’s safety, I moved her to another facility.”

“The situation is very unsatisfactory in the dementia unit where residents are left unsupervised for long periods of time, especially at bedtime. While two staff members are getting residents ready for bed, no one is available to supervise the others. During the day, none of the residents are allowed to go outside – again, because of staff shortages there isn’t enough staff to supervise them.”

“I don’t wish my husband to move back into an institution where there was one bath a week. This home is a wonderful setting but lacks qualified workers. I am never sure if there will be enough staff there to monitor the residents, let alone take care of them. This is a huge concern, and I am wondering where to turn to.”

“One day I’ll walk in and there will be two staff plus a nurse. One staff member goes for lunch which is around 11:30 or 12:00 o’clock. That leaves one staff on the floor to get 26 residents ready for lunch which is at 12:30. Some of them are still in bed.”



**Ray Prins
MLA Lacombe-Ponoka**

**Co-Chair, Taskforce on
Continuing Care**

“The care that the seniors are getting is very good. I would say that in 100 per cent of the homes I have visited, the people are being well looked after.”

Alberta Hansard May 10, 2005

“Albertans from communities spanning the entire province shared their insights, experiences, and knowledge with the task force. **We were told time and time again that overall the system is quite sound.**”

Alberta Hansard March 20, 2006



**Dr. Neil Brown
MLA Calgary- Nose Hill**

“I have visited a number of long-term care facilities and seniors’ lodges in my

riding. **The quality of accommodation and care is very high**, and not only that, there is a feeling of community in those establishments, a real feeling of belonging, that this is a home for those people.”

“I want to say that **the Alberta government certainly has shown by its record that it holds those priorities of seniors to be very high on its agenda.**”

Alberta Hansard, May 10, 2005

Comments from Families and Friends of Individuals in Continuing Care Facilities

“There were generally too few attendants in the dining room when I was there at mealtime, and on a few occasions there were none at all. Sometimes there were no attendants on Mom’s floor, although I had been told by the CEO that the ratio of care attendant to resident was quite good. I saw nothing at all to bear out that claim. In fact, this facility was one of the emptiest looking institutional places I have ever seen.”

“Over three months, my friend went from sitting up in her wheelchair for hours to being unable to hold herself up. She was left in bed for days.”

“About six months after Mom’s admission, I knew she wasn’t well. I requested the physician see her. Whether he ever did see her or just changed her meds over the phone, I don’t know. This was the impression I got from the nurse I talked to twelve days later. By this time, Mom was so bad, I asked the Care Manager how bad my Mom had to get before she was sent to the hospital. She was so full of fluids I could not believe how she looked. She was on oxygen and struggling for every breath. Finally, Mom was admitted to the hospital. The facility didn’t inform us she had been hospitalized until the next morning. I live 1 ½ hours away – she could have died alone.”

“My Dad spent 67 days in this facility and it was the worst two months of our lives. I will be a long time forgiving myself for not standing up for him more. He was totally unable to advocate for himself, and I failed him. The nursing staff failed him. The health care system failed him. What he died of was neglect.”



**Rev. Tony Abbott
MLA Drayton Valley-Calmar**

“People are literally trying anything to get into these facilities. **There are long waiting lists because people want to live there.** If things were bad, if the facilities were not good, if the care was not adequate, then there would not any be any waiting lists.”

Alberta Hansard, May 10, 2005



**George Vanderburg
MLA Whitecourt-
Ste. Anne**

“I have complete confidence in our facilities in Whitecourt Ste. Anne. **The residents are safe and well cared for.**”

Alberta Hansard, May 10, 2005

Comments from Families and Friends of Individuals in Continuing Care Facilities

“One thing I quickly learned was that it did little good to call on the buzzer because the nurses were often nowhere to be found and care attendants were usually elsewhere as well.”

“My daughter found her grandfather lying in his bed with his intravenous pole across his neck and his catheter tube pulled out. This left her to wonder how long he would have been left in that condition had she not been there to notify staff.”

“The facility does not have enough staff to help the residents, and there is not enough for the residents to do. The food is substandard, and the heating system is all wrong – some patients are too hot and others freeze. They say there is nothing they can do about it. I have complained to the Health Region as well as the Director of this facility and nothing seems to change. I have had a meeting with the food staff, and nothing really helps. I don’t know where to turn next.”

“My father’s mouth and tongue were covered in sores which explained why he wasn’t eating. I was told to bring some salve for his mouth, and that they would supply him with it until I brought my own. I asked why no doctor had examined him that day. The nurse assured me the doctor had, but upon looking at the records, admitted no one had seen my Dad.”

“We are concerned that if we make too many waves at the home, the care will decline even further or our father will become a target to get back at the family.”

“The number of incidents I witnessed was frightening. I know that many incidents have not been documented because the underlying fear of losing a job has kept staff from reporting issues.”



**Hector Goudrea
MLA Dunvegan-
Central Peace**

**“Most residents of
long-term care
facilities receive
excellent health**

care thanks to the hard work and
compassion of staff.”

Alberta Hansard May 10, 2005



**Len Mitzel
MLA Cypress-
Medicine Hat**

**Chair, Health Facilities
Review Committee**

“There are currently (a number of bodies) who
help monitor quality of care and treatment
such as the Health Facilities Review Committee
and the protection for persons in care office.

**It’s been said that these groups have no
teeth, but that’s not necessarily the case.”**

Alberta Hansard, March 20, 2006

Comments from Families and Friends of Individuals in Continuing Care Facilities

“The error in the drug dosage given to my mother was an oversight on the part of everyone involved – her doctor, the pharmacist, nursing staff at the facility.”

“We slept on the floor of our Mom’s hospital room for several days because she was in critical condition and we wouldn’t leave her side. She was passing blood and tissue in her stool, her mouth was a mass of ulcerated flesh, and she was in a coma-like state. We almost lost her.”

“It has taken me three months to sit down and try to put into words my heartbreak over the care my Mom received in the last 8 months of her life. As I write this, my tears fall freely as they have done so very often. I feel I let my Mom down. I should have been more adamant with medical personnel about her care and treatment. I feel I should have done more, but then I know her caregivers should have been the ones to do this on my behalf. They should have cared for her as I would have had I been there.”

“When I notified a staff worker one day about a patient who was walking down the hallway, defecating as he went, with his hands literally full of feces, she replied, ‘Where’s Ralph Klein when you need him.’ Where indeed.”

“In my opinion, this centre was in crisis when my friend was there. I consider this facility to be unsafe for residents who require a high level of care. A resident who is unable to feed, toilet, move around or speak for themselves is at risk in this centre.”

“I have many unanswered questions about the events leading to my father’s death. I want to know how this can happen in this wealthy province. Seniors who built this province are receiving substandard, inhuman care all over the province, it seems. Short staffed, short tempered, short on compassion, short on nurses, short on doctors, short on everything.”