

BULLETIN

## HSAs WCB experts advocate for justice after workplace injuries

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**Heavy work didn't** cause Annemarie Bymoens epicondylitis ... it was a heavy workload created by understaffing and greater patient acuity. Bymoens is a medical imaging radiographer at Burnaby Hospital and also the owner of a personal training company who prides herself on maintaining excellent health through physical activity and good nutrition.

Bymoens has discovered that it is a challenge to avoid injuries in the work place. Since beginning her career in 1989, she has filed two Workers Compensation Board (WCB) claims. After five years of dedication and with the aid of HSAs legal counsel, she won her first claim and is currently awaiting a decision on her latest claim, following an appeal hearing last month.

Bymoens filed her first WCB claim in 1995. She had been working at the hospital only a few years when she began experiencing headache, eye irritation, sinus pain, and breathing difficulties after just a few hours of working with x-ray film and chemical-filled developing tanks. She recalls, "I noticed every time my symptoms were acute, it was after a shift at work."

Historic win



Bymoens was diagnosed with chronic sinusitis, a symptom of what became more widely known as "darkroom disease," caused by an overexposure to processing chemicals. When WCB rejected her initial claim, HSAs occupational health and safety experts began gathering enough evidence to convince the WCB appeal tribunal to recognize her darkroom disease as an occupational disease. In the end, the WCB appeal board recognized darkroom disease as an occupational respiratory disease. It was an historic win.

"I was the very first person in the province to win a claim for darkroom disease," Bymoens says proudly. "When the hospital ripped out that x-ray room and found the exhaust fan was installed backwards, that didn't bode very well for WCB. I had worked in that room for five years!"

She was eventually awarded a substantial one-time payment from WCB for her pain and suffering. To this day,

though, she says she cant get near cleaning chemicals without getting quite sick.

When her position as picture archiving and community systems/radiology information systems (PACS/RISK) coordinator was eliminated five years ago, the only vacancy available to her was back on the front line. She says, -I couldnt believe how much the work load had changed in four years."

She found more patients (about one-half) needed assistance to move from their wheel chairs or stretchers. Compounding the problem, she says, there were far more obese patients and more showing up with infectious diseases.

At first, she was not fazed by the work, thinking that she would just simply -jump back in". Bymoer believed that because she was so physically fit, the new workload would not be an issue; however, it did not take long for her to learn otherwise.

Lower staffing levels, but higher workload



er job consisted of supervising weekends and working the following Monday and Tuesday.

Weekend work can be challenging, as the staff are expected to meet the needs of inpatients, emergency, operating room, ward portables and any emergency interventional procedures that are approved.

With only three people on staff, it requires careful time management and constant decisionmaking. Because the staff is reduced on these shifts, it can mean more patient exams and lifting per individual.

With patient acuity and obesity increasing, the job demands more physical output for health care workers. There is not much time to rest in between patient exams, since completing one exam means the beginning of another. Breaks and lunch cannot be skipped, as they are the only time you are resting.

After two years into the job, Bymoer became aware of a dull ache in her elbow. She says, -I wasnt the only one complaining about elbow pain, but I was the only one that realized that I needed to do something about it."

At first, she admits she wasnt concerned, -Like a lot of health care workers, I thought, its not a big deal. It will go away. However in one day that all changed. I was pulling a plate out from behind a patient and a sharp pain shot through my elbow and at that point, I knew something was wrong. So, thats when the whole WCB claim began."

Diagnosed with epicondylitis, which is a repetitive strain injury, Bymoers specialists advised her to take a leave from work. She took a months sick leave and then came back on a graduated return program.

-Actually, I felt pressured to return to work since there is a shortage of employees and also never truly felt 100 per cent supported. Had I refrained from returning for three months, the injury would have had time to heal closer to 100 per cent."

Injury affects life at home



he found her repetitive strain injury also interfered with carrying out tasks outside of work.


On two occasions while lifting a drinking glass, her grip weakened and the glasses dropped to the floor.

Trying to "one-arm" her household chores, Bymoer found she could only use one arm to unload the dryer and dishwasher. She could no longer train her clients effectively with her business or carry out her own fitness endeavors. "I could not take care of my own physical needs, which in turn sent me over the edge," she says.

It was HSA's labour relations staff that advocated on Bymoer's behalf for both WCB claims. "They are very knowledgeable people who will support you until you win!!! HSA truly values and cares about the well-being of their members. It is unfortunate that health care employers do not genuinely share the same sentiments."

Today, Bymoer says her elbow is better but she still experiences dull aches. Until another position becomes available to her, Bymoer often finds herself trading away or giving up her Sunday shifts to ensure she is not working the most physical shifts on a continuous basis. This also allows her to spend one day with her family. As a weekend supervisor, Bymoer ensures her staff get help with lifting and take their breaks ... steps to lessen their chances of similar injuries.

To workers who have excuses for working despite pain, she says, "I tell them they're silly not to file a claim. You're not helping your colleagues if you don't. And you have to have a life outside of work. If you can't go home and carry out your everyday tasks and duties because of your job ... in the end it will only be you that suffers."

"I am quite proud of what we do, and I love my career ... and that's why I'm there. It offers so much diversity. I recognize that there will be challenges in any job ... for us, it's increasing patient acuity and workload. However, a job shouldn't leave you feeling mentally and physically stressed at the end of the day. No job should do that." 

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