

Patient advocacy key to social work

April 1, 2009



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The Report: April 2009 vol.30 num.1

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he words Northern British Columbia conjure up images of vast, sparsely populated landscapes; long harsh winters of ice, snow, cold, and howling winds; isolated communities with few amenities; tough, self-reliant people; and a strong First Nations presence.

For Sarah Moreau, a social worker at Prince George Regional Hospital (PGRH), these qualities colour her work every day ... often dramatically.

-My job is exciting and challenging," says Moreau, who is in her seventh year at PGRH. PGRH is an acute care facility under the authority of Northern Health, an area stretching from Quesnel (Prince George is included) to the Yukon border and from Haida Gwaii to the Alberta boarder, including Valemount. It is considered the hub of the Central Interior and receives patients from as far as Bella Bella, Telegraph Creek, and Fort Nelson plus all the communities in between, says Moreau.

-The PGRH Aboriginal patient population is approximately 30 per cent," she explains. -Many Aboriginal patients come from very small isolated communities ... and some people think Prince George is isolated ... where transportation can be an issue.

-Think of taking a trip from Prince Rupert to PGRH for medical treatment by car or truck: in the fall or spring, the fog is so thick youre not able to see beyond the front of your vehicle for a good chunk of the trip; there might also be black ice on the roads.

-Winter brings the risk of avalanches; there are snow storms and white outs, and roads covered in packed snow and ice. And if you need help on the road, no one may come by for hours." Or think of taking a trip from one of the Aboriginal reserves where you are travelling on a snow/ice packed logging road (with active logging trucks roaring by) and you are four hours away from a medical clinic (no hospital). Forget about your cell phone as there is no service.

After overcoming the daunting geographical hurdles, Aboriginal patients often encounter challenges due to cultural differences.

Sarah Moreau
Social Worker
Prince George Regional Hospital

-There are often language barriers plus culture shock for an Aboriginal patient coming to PGRH, and then, for instance, being airvaced to St. Pauls for cardiac medical treatment, discharged in Vancouver ... and the medical system expects that person to make their way back to the reserve on their own."

Adapting her work to harmonize with Aboriginal culture is part of what makes Moreaus job interesting. -For example, if I arrange for a family discharge meeting for a non-Aboriginal family, I can plan on two to five folks attending. When I plan for an Aboriginal family I can expect anywhere from five to 25 family members," says Moreau. -Our meetings get quite cozy due to lack of seating space."

Geography and cultural differences arent the only combination that pose challenges at Moreaus worksite. The equation "aging population plus insufficient resources means the hospital is stretched past its capacity.

-Our region lacks income-g geared housing, assisted living and extended care beds. Our hospital is in crisis due to the large number of elderly patients who come in due to an acute medical situation." When its time to discharge these patients, there can be nowhere to place them.



he hospital crisis is such that from the emergency room to surgical floor to internal and family medicine, units are overflowing due to the lack of assisted living and 24-hour facility care beds in the community. It is the extended care patient nightmare," says Moreau.

-These patients, now extended care clients, sit or are bedridden on the ward with no access to physio, occupational therapy or recreation. Some of the wards have a TV and VCR on which videos are played for a greater portion of the day. Some wandering patients can figure out how to sneak off the ward, take the elevator down to the main lobby and head out to the great outdoors trying to find their way back home.

-I am appalled by the way these elderly patients are expected to wait for up to a year for a "bed in an extended care facility without any quality of life on the ward."

The situation is eroding health care worker morale, she said.

-I watch the overburdened medical staff become jaded, demoralized, stressed and desensitized.\

These problems stem from lack of foresight from the provincial government, says Moreau. -What was our present government thinking?" she asks indignantly. -Did they really think the population of BC would not age, and, if we aged, we would not require any help at home to enable us to be independent for as long as possible?"

In spite of all this, Moreau says she loves her role as a hospital social worker. -I believe the hospital social worker is the buffer between a very harsh medical system and the patient. I see my role as being an advocate and/or a guide for patients to walk them through the medical system, which can be confusing, contradictory, dehumanizing and just plain disrespectful to people who are vulnerable because of their medical condition.

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