

June 3, 2021

The Honourable Brian Pallister  
Premier of Manitoba  
204 Legislative Building  
450 Broadway  
Winnipeg, MB R3C 0V8

The Honourable Kelvin Goertzen  
Acting Minister of Health and Seniors Care  
450 Broadway  
Winnipeg, MB R3C 0V8

Dear Premier and Minister:

The Emergency Physicians at Winnipeg's Health Sciences Center, St Boniface Hospital, and the Grace Hospital wish to express grave concern over the state of nursing in our emergency departments (EDs). Many senior experienced nurses in our EDs have resigned, while many others are planning to leave. Morale and staffing are at all-time lows. We view the situation as critical, unsustainable and in need of immediate action.

Like many things in our complex health system, the reasons ED nurses are leaving are multifactorial, but in our view, the effects combine to make ED nurses feel undervalued, unsupported, abandoned, and frankly disrespected by their hospitals, the WRHA/Shared Health and the provincial government. We wish to highlight this issue now in the hope that immediate action might stave off a deeper crisis.

The workload for EDs, with the increasing numbers and acuity of COVID patients, is exceptionally high. Everyone who comes to the ED could have COVID, and the hospitals rely on our ED nurses to find and isolate COVID cases before admission. Furthermore, the ongoing meth crisis has resulted in unheralded levels of psychosis and agitation within the department, with physical and verbal aggression happening at unprecedented levels. Many of these patients have COVID as well. Other patients arrive at our EDs critically unwell, requiring prolonged, direct contact and multiple high-risk procedures. Often the highest risk procedures, such as intubation of COVID patients, occur in the ED before admission to critical care units. Our ED nurses bear the brunt of all these challenges while intimately assisting our sickest patients.

Yet despite the demands and significant risks of caring for COVID patients in the ED, when the provincial government negotiated a COVID wage benefit with the nurse's union, specifically geared towards nurses who worked with COVID patients, they excluded emergency nurses. This was inexplicable and showed a lack of understanding and respect for ED nurses' additional workplace risks. ED nurses were predictably offended and dispirited. In the context of exhaustion from consecutive shifts and mandated overtime, many lost their sense of commitment to their EDs, and worse, their sense of commitment to the system. This is a recipe for burnout.

Consequently, most ED shifts now operate short of nurses, particularly senior nurses. It is a regular occurrence to see a portion of the ED closed because there are not enough nurses to staff it, or for the nurse-in-charge to be struggling to find enough senior nurses to attend to the next critically ill patient that might arrive. This is affecting patient care and should never be acceptable.

To fill nursing vacancies, departments have turned to hiring newly graduated nurses. While we value and respect their skill, training, and enthusiasm, they cannot immediately replace the experience and wisdom of a seasoned ED nurse. Furthermore, newly hired ED nurses typically require additional experience and training before looking after the sickest patients. This places an even heavier burden on the senior nurses who subsequently continue to work under the constant threat of mandated double shifts; an exhausting and frankly unsafe practice. This further contributes to burnout.

The ED is a uniquely chaotic and unpredictable environment. Multiple sick and injured patients can present simultaneously. Nurses, like physicians, need to be able to multitask and prioritize. ED nurses develop an invaluable skill set resulting in better and safer patient care. This takes time and experience to master. The loss of even one experienced ER nurse on shift affects the functioning of the entire team and, by extension, patient care. The loss of multiple such nurses in the midst of a pandemic, is frankly dangerous. Action must be taken now.

While everyone in healthcare and beyond feels the stress from the COVID 19 pandemic, we see morale amongst ED nurses at the lowest point in memory. ED nurses are our colleagues, our partners, and our friends. We witness their collective suffering and exhaustion and find it disheartening and unacceptable. Dysfunction in EDs will significantly impact care for the public, not only for COVID-related problems but for all aspects of acute care. We implore the government to immediately address this vital and time-sensitive issue to avoid further losses of ED nurses. This needs to start with acknowledging their essential role in the care of COVID and other critically ill patients and readjustment of their wages and benefits in a manner that is commensurate with their contributions to the health of all Manitobans.

Sincerely,

Dr. Aleks Chochinov, Emergency Physician St Boniface Hospital

Dr. Robert Sweetland MD HSC ER

Dr. Ron Steigerwald

Dr. Noam Katz, MD, MSc, FRCPC, - St. Boniface Hospital

Dr. Katherine Sullivan MD. FRCPC-EM – Health Sciences Centre

Dr. Tamara C. McColl MD FRCPC Emergency Physician, St. Boniface Hospital

Dr. Jeffrey Klassen, MD, FRCPC-EM - St. Boniface Hospital

Dr. David Lussier, MD FRCPC

Dr. M. Shafiqul ALAM

Dr. Brigitte Reynolds, CCFP-EM

Dr. Jon Broughton, MD, FRCPC Health Sciences Centre  
Dr. Jackie Chou, CCFP (EM)  
Dr. Ron Maier MD  
Dr. Teresa Wawrykow  
Dr. Christian La Rivière, MD, FRCPC  
Dr. Lisa Omichinski, MD, CCFP-EM  
Dr. Rebecca Schindle, MD, FRCPC - Health Sciences Centre Emergency Department  
Dr. Jill Geurts, MD FRCPC MPH - Health Sciences Centre  
Dr. Shirley Hasdan MD CCFP(EM)  
Dr. Stephen Smith, MD, MSc, CCFP-EM  
Dr. Chris Cymbalisty MD  
Dr. Julian Regehr  
Dr. Cheryl French, MD, FRCPC-EM, Health Sciences Centre Emergency Department  
Dr. Kyle Burkett, MD, FRCPC(EM)  
Dr. Tomislav Jelic, MD, FRCPC, FACEP  
Dr. Rob Grierson  
Dr. Zoe Oliver, MD  
Dr. Phillip Endleman  
Dr. Graham Friesen  
Dr. Joseph Ringaert  
Dr. Deborah Hill, MDCM FRCPC Dip. Sport Med - HSC ER physician  
Dr. Mona Hegdekar MD CCFP(EM)  
Dr. Harold Peters MD., FRCPC  
Dr. Caroline Kowal MD CCFP-EM  
Dr. Erin Weldon MD FRCPC(EM) Emergency Physician Health Sciences Centre  
Dr. Travis Minish  
Dr. Sheila Peters  
Dr. Shane Hartry Emergency physician St. Boniface Hospital  
Dr. Doug Martin, MD, FRCPC - Health Sciences Centre  
Dr. Bryce Makar, MD, FRCPC  
Dr. Angela Derksen, MD, CCFP (EM, FPA) - Health Sciences Centre  
Dr. Darren Graves  
Dr. Murdoch Leeies, MD MSc FRCPC  
Dr. Don Schellenberg  
Dr. Richard Peters MD  
Dr. Wesley Palatnick MD, FRCPC HSC Emergency  
Dr. Merrill Pauls - HSC Emergency Physician  
Dr. Erik Hildahl, MD, FRCPC-EM  
Dr. Chau Pham, MD, FRCP-EM, MBA - HSC Emergency Physician  
Dr. Scott McLeod Arnould  
Dr. Gregory Reimer FRCPC  
Dr. Michael Boszko MD CCFP(EM)  
Dr. C Peterson BSc, MD, CCFP(EM)  
Dr. Carmen Hrymak MD MSc FRCPC

Dr. Albert Buchel  
Dr. Omer Yusuf, MD, FRCPC  
Dr. Anne Finlayson, MD, FRCPC  
Dr. Ryan Sustrik  
Dr. Ian Surdhar, MD FRCPC  
Dr. Vincent Lim, MD, FRCPC - Health Sciences Centre and St. Boniface Hospital  
Dr. Fouad Anashara CCFP-EM  
Dr. Dan Bellan  
Dr. K Hawryluk  
Dr. Jeremy Plett  
Dr. Mohammad Pannu MD  
Dr. Robert Gourlay, MD CCFP (EM)

cc.

Dr. Kristjan Thompson, Doctors Manitoba  
Dr. Anna Ziomek, College of Physicians and Surgeons of Manitoba  
Adam Topp, Shared Health  
Mike Nader, WRHA  
Darlene Jackson, Manitoba Nurses Union