

Toronto: New SARS outbreak provokes nurses' protest

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Several hundred nurses demonstrated June 4 outside Scarborough General Hospital in Toronto's east end to demand better protection for health care workers treating suspected SARS (severe acute respiratory syndrome) patients. They also demanded that Ontario's Tory government order a public inquiry into the handling of the Toronto SARS outbreak.

Outside of the Asian-Pacific region, no city has been more adversely affected by SARS than Toronto. At least 32 persons have died of the disease in the Toronto area since last March and there continue to be more than 60 active SARS cases.

Last month, government officials and medical experts announced that all transmission of SARS in Toronto had ceased. But on May 22 and 23, they were forced to concede that a new cluster of SARS carriers had been discovered and that this fresh outbreak was due to undetected cases of SARS infection within Toronto's hospitals.

Amongst the complaints raised by the Ontario Nurses' Association is that hospital administrators brushed aside the suspicions of several nurses that some of their patients had contracted SARS. Several of the persons in question later proved to be SARS carriers.

The medical rationale for dismissing the nurses' suspicions was that no link could be established between the patients they suspected of having SARS and any person known to have contracted the disease. But given the fever-pitch campaign that Canadian, Ontario and Toronto politicians and business leaders mounted to overturn a World Health Organisation (WHO) advisory against travel to Toronto and then declare the city "open for business," there is little doubt that there was an official mindset against—if not outright resistance to—entertaining the notion the SARS crisis

might not be over.

Nurses from North York General where the disease re-emerged three weeks ago, told the *Toronto Star* they were admonished by the hospital's SARS management team co-chair for overreacting. Dr. Barbara Mederski is alleged to have said, "There was no reason to keep alerting public health" of individuals the nurses thought could be SARS carriers "because we [don't] have a problem."

Wednesday's protest also demanded that those nurses coming in contact with SARS patients be given better equipment, including protective suits.

The heightened concern over contracting the disease is well founded according to health care experts. Ugis Bickis, a consultant on environmental hygiene at Queen's University in Kingston, Ont., says health care officials ignored warnings from him and others that the surgical masks being dispensed to Toronto nurses and other health care workers would not protect them from a highly contagious disease like SARS.

Surgical masks are estimated to remove up to 50 percent of airborne contaminants, while the more expensive N95 can block up to 95 per cent. Although Health Canada has now stipulated that N95 masks should be used when there is a danger of SARS infection, union officials report that some health workers are still being given the lower-quality masks.

It also has come to light that at least one quarter of the Toronto hospitals designated to treat SARS patients do not have negative-pressure rooms. Such rooms contain air in a given area and are considered the only safe method for limiting the spread of infection in a hospital facility. Dr. Colin D'Cunha, chief medical officer of health for Ontario, had previously said, "No patient will be moved to a hospital that doesn't have one." Yet this week, many hospitals were still in the

process of converting rooms to negative-pressure. According to Dr. Ted Boadway, the Ontario Medical Association's health policy director, "What you can't say is that anybody was ready for this because nobody was."

Last Wednesday's demonstration also demanded that nurses be given double pay in light of the danger that they run of contracting SARS. Nurses were outraged when they learned that nurses hired through temporary agencies to deal with the staffing shortage produced by the SARS crisis have been given such premiums, while those with full- or part-time jobs, and who have borne the brunt of the fight against SARS, have continued to be paid at the regular rate.

Ontario Tory Health Minister Tony Clement has since agreed to pay the higher rate to "front-line" workers at four affected hospitals in the Toronto area: Scarborough General, North York General, St. Michael's and William Olser Health Centre. He drew the line, however, at raising pay rates for health care workers not specifically designated to deal with SARS patients.

An underlying issue for nurses is the drastic staffing cuts that Ontario hospitals have made over the past five years. In the late 1990s, more than 10,000 nursing positions were eliminated; and today, half of all nurses have only casual or part-time jobs. The "casualisation" of nursing was a major factor in the initial spread of SARS, as nurses who are forced to work at two or more hospitals to make ends meet unwittingly carried the infection from one hospital to another.

The SARS outbreak has exposed the damage wrought to Ontario's public health and hospital systems by the massive cuts imposed by the federal Liberal and provincial Tory governments. That the Tories themselves recognise this is underscored by their categorical rejection of the nurses' call for a public inquiry. According to Premier Ernie Eves and Health Minister Tony Clement, an inquiry would be too "adversarial" and would result in "finger-pointing." Instead, the government is proposing to have medical experts conduct a "review" of how the crisis was handled.

No doubt, the government fears a repeat of the public inquiry into the Walkerton water contamination tragedy. It found that Tory cuts to the Environment Ministry and privatisation and deregulation of water-

testing had contributed to the deaths of seven people.



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