

## ENSURING HIGH-QUALITY HEALTH CARE FOR EVERYONE IN (COMMUNITY)



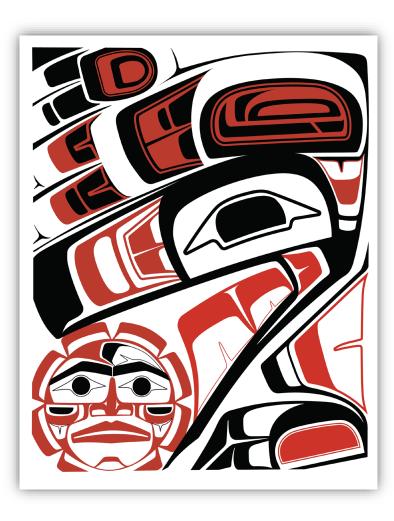
How local governments can help solve the nursing shortage

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## INDIGENOUS LAND ACKNOWLEDGEMENT





## OUR MAIN FOCUS

Ensure high-quality health care is available to everyone in BC when they need it.



## WHAT HIGH-QUALITY HEALTH CARE REQUIRES

- > Address the severe nurse staffing shortage that is burning out nurses working in the system and restricting timely access to health care in communities, even putting the lives of patients at risk.
- > Attract and retain more nurses into the health-care system.



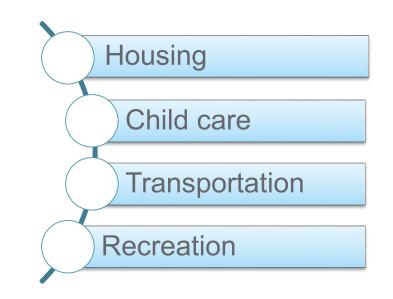
## BENEFITS OF RETAINING AND RECRUITING NURSES

- > **Better care** for you, your family and residents of this community.
- > Fewer service interruptions, such as ER closures.
- More young professionals living in this community and raising families here.



## HOW CAN LOCAL GOVERNMENTS HELP WITH NURSE RETENTION AND RECRUITMENT?

- > Local governments can help by creating communities that are attractive to nurses.
- Nearly half of BC nurses are under 40, and over 90% are women; child care and other local resources that help promote work/life balance are essential.









## WHY RATIOS?

#### **BCNU MEMBER PRIORITIES**

- > Nurses recognize that mandatory ratios create better work environments, leading to enhanced retention & recruitment
- > 84% of more than 15,000 BCNU survey respondents said ratios were a 'must have'
- > California & Australia were in a nursing shortage when they implemented ratios
- > BC has tried other methods to address workload without success



## WHY RATIOS?

#### **RECRUITMENT & RETENTION**

- > 7,000 inactive nurses came back to work in Australia<sup>1</sup>
- > 60% increase in nurse registrations in California<sup>1</sup>
- > 69% decrease in vacancies in Sacramento hospitals<sup>1</sup>
- > 67% say they're more likely to stay in their jobs because of ratios<sup>2</sup>

<sup>1.</sup> National Nurses United (n.d.). RN staffing ratios: A necessary solution to the patient safety crisis in U.S. hospitals. Available at: https://www.nationalnursesunited.org/sites/default/files/nnu/documents/0619\_Ratios\_Booklet\_NNU.pdf

<sup>2.</sup> Aiken, L. et al (2010). Implications of the California nurse staffing mandate for other states. Health Serv Res, 45(4), doi:10.1111/j.1475-6773.2010.01114.x.



#### WHY RATIOS?

#### **SAFETY FOR ALL**

- > 74% of nurses say that quality of care increased because of ratios<sup>1</sup>
- > **31.6%** fewer nurse injuries in California after implementation<sup>2</sup>
- > Additional patient per nurse represents a 12-16% increase in the risk of 30-day mortality<sup>3,4</sup>
- > Lower readmission rates, lengths of stay and fewer errors
- > Many other benefits to nurses and patients
  - 1. Aiken, L. et al (2010). Implications of the California nurse staffing mandate for other states. Health Serv Res, 45(4), doi:10.1111/j.1475-6773.2010.01114.x.
  - 2. Leigh, J.P. et al (2015). California's nurse-to-patient ratio law and occupational injury. Int Arch Occup Environ Health, 88(4):477-84.
  - 3. McHugh, M.D., Aiken. L.H. et al (2020). Case for hospital nurse-to-patient ratio legislation in Queensland, Australia hospitals: An observational study. Nursing, doi:10.1136/bmjopen-2019-036264.
  - 4. Lasater, K.B., Aiken, L.H. et al (2021). Patient outcomes and cost savings associated with hospital safe nurse staffing legislation: An observational study. BMJ Open, doi:10.1136/bmjopen-2021-052899.



## ACUTE CARE RATIOS

| Unit Type                  | Ratio                          |
|----------------------------|--------------------------------|
| Med/Surg                   | 1:4                            |
| Rehabilitation             | 1:5 days, 1:7 nights           |
| ALC                        | 1:7                            |
| Palliative Care            | 1:3                            |
| Focused (Special)<br>Care  | 1:3                            |
| High Acuity / Step<br>Down | 1:2                            |
| Intensive Care             | 1:1                            |
| NICU                       | 1:1 to 1:3, by Tier of Service |

| Unit Type         | Ratio  |
|-------------------|--|
| Operating Rooms   | 2.5 nurses per room  |
| PACU              | 2:1 to 1:2, by stage of recovery   |
| Antepartum        | 1:3  |
| Labour & Delivery | 1:1 active labour, 2:1<br>at birth                                       |
| Postpartum        | 1:3 dyads, 1:4 birth parent only   |
| Newborn Nursery   | 1:3  |
| Emergency         | 1:3 acute, 1:4 fast<br>track & short stay, 1:1<br>critical care & trauma |



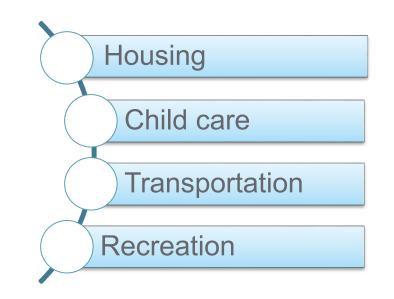
## WHAT IS NEEDED TO MAKE RATIOS A REALITY?

- 1) Retain and recruit more nurses
  - > Incentives, a competitive collective agreement, livable communities
- 2) Provide safe and healthy workplaces
  - > Addressing issues of violence, abuse and substance exposure
- 3) Apply a diversity, equity and inclusion lens



# RECAP: HOW CAN LOCAL GOVERNMENTS HELP WITH NURSE RETENTION AND RECRUITMENT?

- > Local governments can help by creating communities that are attractive to nurses.
- Nearly half of BC nurses are under 40, and over 90% are women; child care and other local resources that help promote work/life balance are essential.





## WHAT ELSE CAN LOCAL GOVERNMENTS DO?

Be allies with us in:

- > Advocating for the provincial and federal governments to do more to retain and recruit nurses.
- > Educating the public about minimum nurse-to-patient ratios and what is needed to make them a reality.



## KEEP IN TOUCH WITH YOUR REGION'S NURSE LEADERS

BCNU's elected regional leaders want to stay connected with you.

Here are your best contacts in the Simon Fraser region:

- > Roy Hansen, Regional Council Member royhansen@bcnu.org
- > Wendy Gibbs, Regional Council Member wendygibbs@bcnu.org
- > Melissa Stodola, Regional Lobby Coordinator melissastodola@bcnu.org



## QUESTIONS?

