

# Nurses put patient safety first.

In July 2012, Local 97 nurses filled out our bargaining survey, a tool that is designed to help us – your union – identify your priorities and concerns as we prepare to head to the bargaining table.

What we heard in that survey concerned us. Many of you are worried about **patient safety**, as a result of inadequate staffing.

So, we decided to do a bit more research: we enlisted the help of a marketing company to investigate your concerns through a series of focus groups and an online survey. That research reaffirmed what you told us in your bargaining surveys: that patient safety is routinely jeopardized because our frontline staff are being forced to work short.

**58.5 per cent of nurses say the staffing level in their workplace is “unacceptable” and prevents them from doing their jobs effectively. Understaffing is having a direct impact on patient care, as well as the working lives of our nurses. An overwhelming majority of nurses surveyed (95.7 per cent) believe “working short” adversely affects patient safety. And many nurses who reported working short also report witnessing “near misses” or adverse patient events as a result.**

Based on these findings, we’ve gone to the bargaining table to ask for a range of improvements to your collective agreement, including new language designed to help address staffing shortages and make sure our nurses aren’t forced to put their own health or licenses on the line because they aren’t being given adequate support. Specifically, we are looking to establish set **nurse-to-patient ratios**, to ensure you are able to deliver the best care possible to patients.

## PROPOSED RATIOS

“...A direct care registered nurse shall be assigned to not more than the following number of patients in that unit”:

- **1** patient in trauma emergency units;
- **1** patient in operating room units, provided that a minimum of **1** additional circulating nurse and **1** scrub nurse is also available for each patient;
- **1** patient in critical care units, including but not limited to emergency critical care and intensive care units, Coronary Care Units, Cardiac Catheterization, Renal Dialysis Unit, Burn Unit, Post Anesthetic Care Unit, Cardiovascular Unit;
- **2** patients in emergency room units and step down units;
- **4** patients in medical-surgical units, psychiatric units, rehabilitation units and other units not listed above;
- For Community Mental Health - **60** clients on the General Case Load **25** clients for Intensive Case Management.



Patient to nurse ratios are already in place in parts of Australia and California, and have proven to be very effective in improving patient safety in these areas.

**“Nurses want solutions to these problems. They are looking to the solutions implemented in California and some states in Australia where nurses have successfully lobbied for legislation or collective agreements mandating nurse-patient ratios. Such ratios limit the number of patients for whom one nurse can provide care. For example, in California, a 1:4 nurse-patient ratio is mandated by legislation... Emerging evidence has demonstrated that patient outcomes have improved subsequent to the implementation of such mandated ratios.”**

*- From “Nursing workloads and patient care” By Dr. Lois Berry, Dean of Nursing, University of Saskatchewan*

Research shows that maintaining appropriate nurse-to-patient ratios results in many positive patient outcomes, including:

- Reduction in complications (CNS)
- Reduction in patient falls
- Reduction in mortality rates
- Reduction in gastric complications
- Reduction in infections
- Reduction in re-admissions
- Reduction in follow up ER visits
- Reduction in sick leave and overtime

*- From “Nursing workloads and patient care” By Dr. Lois Berry, Dean of Nursing, University of Saskatchewan*

Nova Scotia would be the first in Canada to achieve these standards. Which means we have a lot of work to do.

Your bargaining committee exchanged proposals with your employer at the end of September, and has met twice since to negotiate. But this battle will not be won at the bargaining table, alone.

We plan to roll out a campaign, advocating for better patient safety through set nurse-to-patient ratios. Our campaign, **“Nurses: Putting Patient Safety First”** will include public outreach and advertising which starts very soon and will roll out into the New Year. We will establish a mobilization committee made up of members from a cross-section of disciplines and workplaces, who will help with our public outreach efforts. We will also be looking for nurses to take part in a video series, and share their stories about patient safety and proper staffing.

The campaign will be underway while your bargaining committee is at the table with the employer. Our hope is that we can create meaningful public dialogue about the importance of maintaining a safe nurse-to-patient ratio. This is about doing the right thing for your patients, and we will need your help to achieve this goal.

In order to achieve this goal, and improve patient safety for all Nova Scotians, we will need your help. Please make every effort to attend our meetings, and get involved in the campaign! Remember, there is **Safety (& Success) In Numbers!**

