



Nursing Staff Mix for Safe and Appropriate Care

Position statements describe CRNBC's views on issues that affect nursing practice. They can assist registrants to influence change.

ISSUE

As the nursing workforce has been downsized, restructured and re-engineered, new roles and new staff mix¹ models have been introduced. This process has impacted client² care and the professional practice of nurses³ in various ways.

CRNBC POSITION

Agencies have an obligation to provide the necessary organizational supports to enable nurses to meet professional standards. When decisions are made about staff mix and nurse utilization, it is essential that care outcomes and cost-efficiency are evaluated.

The needs of clients and the complexity of care are foremost in determining staff mix. The category of health care provider with the most appropriate competencies to match client needs in an effective and efficient manner is selected. At no time should the safety of clients be compromised by substituting less qualified workers when the competencies of a registered nurse are required.

Registered nurses must be employed in senior administrative positions to establish staffing standards for quality care. Nurses must have the authority to limit access⁴ to nursing services when these services are extended beyond a safe capacity.

Nurses must have opportunities to contribute to decision-making at all levels in the organization, particularly as it impacts client care or the work environment.

Nurses require a sufficient and continuous relationship with their clients so that ongoing assessment, decision-making, planning and evaluation can occur in a timely manner to meet dynamic and fluctuating client needs.

Nurses may assign components of care to another health care provider who has the appropriate competencies, supervision and support.⁵ The responsibility and accountability of all those providing care must be clear and agreed upon. Nurses are familiar with the job description/scope of practice of any health care worker to whom they are assigning or delegating.

When certain conditions are met, unregulated care providers may support the provision of client care in some practice settings by performing some tasks associated with the care. It is the responsibility of registered nurses to determine these conditions, including how and when unregulated care providers can safely assist with components of care within a comprehensive nursing care plan.

Except in unusual circumstances, nurses should not perform duties that are properly the responsibility of other health care workers.

BACKGROUND

Nursing is a knowledge-based practice. It cannot be broken down into a series of discrete tasks that can be reassigned. Determining the appropriate nursing staff mix depends on a number of variables, including the acuity of the client, complexity of care, level of dependency and care setting. This position statement addresses system level staffing. The CRNBC practice standard *Delegating Tasks to Unregulated Care Providers* provides direction at the individual client level. CRNBC is concerned with the ability of nurses to meet professional standards and the impact of nursing care on client outcomes.

Recent studies in Canada and the United States demonstrate that higher registered nurse staffing levels are consistently associated with higher quality care, lower morbidity and mortality rates, better client outcomes and reduced adverse occurrences in acute, long-term care and community settings. Outcomes associated with nursing care, such as lower rates of pressure ulcers, fractures, pneumonia, post-operative infection, disruptive behaviour, contractures and urinary tract infections, have consistently been correlated with higher registered nurse staffing ratios in the literature over the past five years. Improved client outcomes are related to such registered nurse competencies as accurate diagnosis, problem-solving abilities, innovative interventions, leadership and supervisory skills.

- 1 Staff mix is the combination of different categories of workers employed to provide care to a designated population of clients. An all registered nurse staff is one example of staff mix. Other mixes may include combinations of registered nurses, licensed practical nurses, registered psychiatric nurses and unlicensed care providers.
- 2 Client: individuals, families, groups, populations or entire communities who require nursing expertise.
- 3 "Nurses" refers to the following CRNBC registrants – registered nurses, nurse practitioners, licensed graduate nurses, student nurses.
- 4 Limiting access to nursing services includes closing beds, departments and programs, restricting participation in programs, diverting clients and other activities that enable a manageable workload for registered nurses and a safe environment for clients.
- 5 Support: access to assistance in a timely manner.

POSITION STATEMENT

Research also indicates that higher costs associated with employing registered nurses are offset by productivity gains, as well as cost savings, from a reduced length of stay and a reduced rate of readmission. While immediate cost savings may be realized with fewer registered nurses, longer-term costs are higher. Complications from falls, medication errors, cardiopulmonary arrest and nosocomial infection require clients to stay longer in hospital and undergo expensive diagnostic and treatment regimens. Complications cause hardship to the client and cost to the system. Several recent hospital studies have shown that the higher the registered nurse mix, the lower the rate of such adverse occurrences.

Nurses in British Columbia (B.C.) have led the way in developing financially and clinically effective programs such as early discharge, home- and community-based care programs and case management. Registered nurses contribute positively both to the quality of health care and to the containment of costs by reducing mortality, length of stay, costs and complications, and by increasing patient satisfaction and ability to function upon discharge. To work effectively, nurses need organizational supports, including recognition, respect, job descriptions, policies, and appropriate allocation of human and other resources. They also need the authority to limit access to beds, departments and programs when safe nursing care cannot be provided. Health care organizations, in consultation with the Ministry of Health, must ensure plans are in place to address the care of other clients when access to care is restricted in one part of the system.

Nurses want practice environments that are conducive to safe, competent and ethical care. While reducing non-nursing tasks is key to improving the work environment, nurses have identified concerns about the increasing use of unregulated care providers in providing direct care. Employers may actually be increasing health care costs by implementing organizational changes that are unproven, unsound and costly. Employers need to be aware of issues of risk and liability as health care in all practice settings becomes more sophisticated, complex and technological. Registered nurses in some practice settings will be required to increase their competencies in assigning, delegating and working in partnerships to blend the care and services provided by different types and levels of workers into a comprehensive care plan.

Deciding on the appropriate mix of staff is complex and multiple factors must be considered. Key questions to guide decision-making in determining the appropriate staff mix are:

- What do clients require?
- Who has the competencies to provide the required care/service so that client safety is not compromised?
- Who can best provide the required care/service to achieve the goals that have been agreed upon?
- Where can the care/services be provided best?
- Can some of the components of the care/service be assigned to another health care worker?
- Does the agency provide the organizational resources required to deliver the appropriate care/service?
- What is the process for evaluating the staff mix decision?

CRNBC RESOURCES

Print resources to assist you are available from the CRNBC website www.crnbc.ca or Helen Randal Library. E-mail pubs@crnbc.ca or telephone 604.736.7331 (ext. 118) or 1.800.565.6505 (B.C. only).

Delegating Tasks to Unregulated Care Providers
(practice standard - pub. 97)

Guidelines for a Quality Practice Environment for Registered Nurses in British Columbia (pub. 409)

Nursing Leadership and Quality Care
(position statement - pub. 371)

Professional Standards for Registered Nurses and Nurse Practitioners (pub. 128)

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