

Nurse Staffing and Patient Safety: Ratios and Beyond

Since the publication of the Canadian Adverse Events Study, quality and safety have never been more prominent on the Canadian health policy agenda. Many voices have weighed in with quite different perspectives on what needs to happen in our healthcare system in order to address the situation (see, for example, the recent special issue of *Healthcare Quarterly* <http://www.longwoods.com/home.php?cat=398>).

In terms of the relationship between nursing and the quality agenda, the debate in this country seems increasingly focused on the number of nurses available to provide care, and giving a lot of attention to the issue of mandatory nurse-patient ratios. While nurse-patient ratios have their benefits and are advocated by a range of organizations, it must be noted that the current evidence for their effectiveness remains inconclusive. In a discussion paper, Tomblin Murphy (2005) reiterates the need for further dialogue to determine whether nurse-patient ratios would in fact be an effective means to improve patient safety.

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This preoccupation with the number of working nurses is understandable for a number of reasons, not the least of which is the dramatic and lasting effects of nursing staff reductions of the 1990s. However, improving patient safety will require more than looking at just nurse-patient ratios; it must be part of a much broader discussion on the state of nursing in Canada and its impact on patient care.

To help, the Canadian Health Services Research Foundation and its partners¹ commissioned a synthesis on nurse staffing and patient safety, to pull together what is known about the issue and provide evidence-based recommendations to policy-makers on moving ahead. The synthesis, which will be available in summer 2006, combines a background research report (McCutcheon et al.) with the findings of a round table with decision-makers and experts in the area.

The synthesis underscores the significant relationship between nurse staffing and patient safety and makes a number of key recommendations for moving forward. The report pulls together some of the better known findings of recent research on nurse staffing and patient safety with knowledge that has received less attention.

For instance, the synthesis highlights the importance of the number of nurses working in the system, and the right mix of skills, education and experience. In addition, a critical area of focus in the report is the value and importance of working collaboratively with nurses when creating staffing plans at the organizational and unit levels, ensuring dialogue and giving appropriate decision-making authority to staff nurses and the nursing leadership.

Similarly, research has already shown that nurses who are better educated are more likely to perform duties in a way that improves patient safety (Blegen et al. 2001; Hickam et al. 2003). However, the importance of nursing experience is highlighted less often. Also overlooked in the ongoing debate about the need for a baccalaureate nursing degree is the literature on the importance of nursing experience. The synthesis makes recommendations regarding both levels of experience and familiarity with the patient populations in decisions about the staffing of nursing units.

Finally, while knowledge about the importance of nursing skill mix in acute care is fairly well known, this report also includes research about the critical importance of healthy relationships with other healthcare professionals, in particular physicians, for patient safety. That's why the synthesis makes recommendations about forming collaborative work relationships that recognize nursing autonomy and control over practice. In addition, it is critical to implement leadership and management structures and techniques that support positive change and improvements in the workplace.

The CHSRF synthesis on nurse staffing and patient safety will be available in summer 2006. To reserve your copy, please e-mail jasmine.neeson@chsr.ca (specifying whether you would like to receive a print or electronic copy of the report).

CHSRF has operated its synthesis program since 1998 and includes other reports on nursing, primary healthcare and other topics. Other reports on issues such as effective teamwork in healthcare are forthcoming in 2006. Please visit http://www.chsr.ca/final_research/commissioned_research/policy_synthesis/ for more information.

¹ Canadian Nurses Association; the Ontario Ministry of Health and Long-Term Care; the Canadian Patient Safety Institute; Health Canada's Office of Nursing Policy; the Canadian Council of Practical Nurse Regulators; the Registered Psychiatric Nurses of Canada.

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References

Blegen, M.A., T.E. Vaughn and C.J. Goode. 2001. "Nurse Experience and Education: Effect on Quality of Care." *Journal of Nursing Administration* 31(1): 33-39.

Hickam, D.H., S. Severance, A. Feldstein, L. Ray, P. Gorman and S. Schultheis et al. 2003. *The Effect of Health Care Working Conditions on Patient Safety* (AHRQ Publication No. 03-E031). Rockville, MD: Agency for Healthcare Research and Quality. Retrieved May 9, 2005. <<http://www.ahrq.gov>>.

Sanchez-McCutcheon, MacPhee, Davidson, Doyle-Waters, Mason and Winslow. 2005. *Evaluation of Patient Safety and Nurse Staffing*. Forthcoming from the Canadian Health Services Research Foundation. <www.chsrf.ca>.

Tomblin Murphy, G. 2005. "Nurse-Patient Ratios and Patient Safety: A Review of the Literature." In *Enhancement of Patient Safety through Formal Nurse-Patient Ratios: A Discussion Paper* (pp. 7-29). Canadian Federation of Nurses Unions. Retrieved October 9, 2005. <<http://www.nursesunions.ca/en/Docs/2005-10-03-Nurse-Patient-Ratio-EN.pdf>>.

CALL FOR SUBMISSIONS

2006 Award of Excellence in Nursing Leadership

The Ontario Hospital Association (OHA) is pleased to announce a call for nominations for the fourth annual Award of Excellence in Nursing Leadership, sponsored by Johnson & Johnson Medical Products. Nominations are open to all member hospitals, affiliates and associates of the OHA.

The OHA Award of Excellence in Nursing Leadership acknowledges outstanding leadership of an individual nurse in a senior leadership position who is employed in a member organization (hospitals, affiliates and associates) of the Ontario Hospital Association.

Many individuals across the industry exemplify leadership in healthcare. Nurses in senior leadership positions in Ontario healthcare settings provide a unique contribution of direct care experience, management ability and system thinking that leads to innovation and effectiveness at many levels in their organizations and associated communities.

The winner demonstrates outstanding individual contribution in nursing leadership and fulfills the following criteria:

- Registered with the College of Nurses of Ontario as a Registered Nurse, Registered Nurse (Extended Class) or Registered Practical Nurse;
- Employed in a full-time senior leadership position in a member organization of the Ontario Hospital Association;

- Exemplifies qualities of leadership that are outstanding and that produce innovative and effective results for staff, patients and the organization;
- Demonstrates a commitment and contribution to professional associations;
- Demonstrates a commitment to the nursing profession through leadership in major initiatives in clinical practice, leadership, education, research or quality improvement activities;
- Demonstrates commitment to ongoing learning and professional development;
- Recognized as an exemplary leader at the forefront of innovation in their community of peers and colleagues; and
- Contributes as a leader to broad change in healthcare services integration.

The winner will be profiled in the *Canadian Journal of Nursing Leadership* to provide exemplars of nurse leaders who make a difference through their professional contribution to healthcare in hospitals.

Submission deadline – **Tuesday, June 06, 2006**

<http://www.longwoods.com/pages.php?pageid=73>

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