

Nursing shortage looms on horizon

Study estimates an impending shortage of nurses

By the end of 2004, it was expected that 6,000 Registered Nurses would retire in Ontario. Currently in Ontario, roughly 83,000 RNs are working - the lowest nurse per population ratio in the country.

A 2003 study estimates that a 23,600 RNs will be lost to retirement or death by the year 2006 in Ontario - yet only 3,100 new RNs will graduate from school.

Since 2000, the Registered Nurses Association of Ontario (RNAO) has advocated for 70 per cent full-time (FT) employment for RNs in the province of Ontario.

Other key reports have also recommended moving to 70 per cent FT as a minimum target. For example, the Canadian Nursing Advisory Committee's (CNAC) 2002 report entitled: Our Health, Our Future: Creating Quality Workplaces for Canadian Nurses recommends: "Governments, employers and unions should collaborate to increase the proportion of nurses working full-time to at least 70 per cent of the workforce in all healthcare settings by April 2004, with an improvement of at least 10 per cent to be completed by January 2003."

While there is no specific study that looks directly at 70 per cent FT employment for nurses as the ideal, there is significant evidence that, by logical deduction, leads to this conclusion.

RNAO's rationale for 70 per cent FT employment is based on the fact that this is vital to ensuring continuity of care and continuity of caregiver for patients/clients in Ontario. And both continuity of care and continuity of care provider are centrepieces for:

1. Improved Patient/Client Outcomes
2. Efficient RN Utilization and System Cost-Effectiveness
3. Improved RN-Physician Collaboration and Team Work

4. Enhanced Organizational Commitment

5. Successful Recruitment and Retention of RNs

6. Sustainability of the Nursing Profession

7. Economic Sense.

1. Improved patient/client outcomes depend on 70 per cent FT:

The ability of nurses to know their patient is significantly compromised when nurses are assigned to different patients every day which is mostly the case for agency, casual and part-time nurses, and in particular for those who work for multiple employers, according to an article by D. Grinspun in Hospital Quarterly.

Caregiving requires the nurse to have a detailed understanding of the patient's condition, response, needs, and wishes. It is through this human relationship that nurses develop the comprehensive understanding essential to respond to patients' needs in a way that is relevant to them.

Several studies clearly demonstrate the links between continuity of care and hospital patient outcomes and in home care.

Other studies have linked nurses' experience directly to permanency in one unit, and linked the quality of surveillance and the number of experienced nurses compared to inexperienced nurses. Units with more experienced nurses are more likely to detect problems/complications in a timely manner. Currently across Ontario, excluding Toronto, 30 per cent of casual nurses and 18 per cent of part-time nurses work for multiple employers.

2. Efficient human resources utilization and system cost-effectiveness

requires 70 per cent FT:

A home care sector study found that reducing the number of nurses going into a patient's home reduces the overall number of visits; more so if the principal nurse makes the greatest proportion of visits. Thus, utilization is improved when continuity of care provider is maintained. This study also reveals that continuity of care provider significantly contributes to cost-effectiveness.

3. Improved nurse-physician collaboration and team work necessitates 70 per cent FT:

A 2002 study stresses the importance of good working relationships between nurses and physicians to encourage nurse satisfaction and optimal patient outcomes. RNAO believes that it is impossible to foster greater collaboration without moving to 70 per cent FT employment for RNs.

4. FT nurses and enhanced organizational commitment:

RNAO says that it is difficult to understand how organizational commitment can improve with nurses coming and going all the time. According to RNAO, nurses feel that organizations are not committed to securing FT work for them. The notion of commitment, both by the nurse and towards the nurse, is one that in many reports/analyses has been linked to nurse satisfaction and patient satisfaction.

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Honour Society of Nurses planning committee are (left to right) Sue Baxter, Mary Cole, Barbara Biggar, Margaret England and Liz Haugh.



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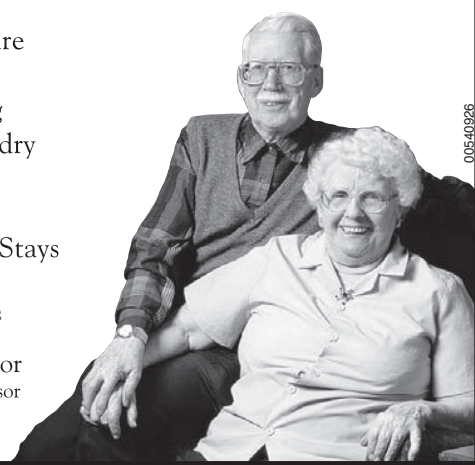
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NURSES WEEK 2005



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"... I will do all in my power to maintain and elevate the standard of my profession... With loyalty will I endeavor to aid the (physician's) work and to devote myself to the welfare of those committed to my care."

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The leadership, physicians, staff and patients of the Detroit Medical Center say **"Thank You Nurses"** for helping to deliver world-class health care.