ONL Organization of Nurse Leaders MASSACHUSETTS & RHODE ISLAND

MANDATED NURSE STAFFING RATIOS

PATIENT CARE SHOULD BE DETERMINED AT THE BEDSIDE NOT THROUGH LEGISLATION

ONL POSITION

The Organization of Nurse Leaders believes that every person deserves access to quality health care and that our members have the responsibility to ensure safe practice conditions for all nurses, focused on high quality, family-centered care. ONL supports staffing based on the needs of the patient, the composition of the care team, and the supporting environment. Hospitals should embrace the principles of a healthy work environment in which collaboration and respect are key attributes, and staffing plans are developed using a collaborative process. Staffing based on a defined nurse-patient ratio does not consider the complexities of the patient or the care environment or the dynamic nature of nursing practice.

OVERVIEW

Effective staffing models must consider: changing patient needs and expectations, the specific skills and experience of the nurses, the physical layout of the hospital unit, the available technology for clinical and information systems, and the level and type of care and specialties provided by the hospital. Mandated fixed nursing ratios are one dimensional, set on a simple count of the patients at a given point in time and do not factor in these critical variables.

RATIONALE

Mandated nursing ratios are an imprecise approach to the shifting care needs of patients. Staffing decisions require ongoing assessment of patients' needs, clinical judgment, critical thinking and flexibility of nurse administrators, nurse managers and professional nursing staff who best understand the patients and their health care needs.

Hospitals provide 24/7 health care and the number and acuity of patients can change from shift to shift, and hour to hour. The increasingly dynamic patient care environment requires flexibility to provide staffing based on patient need and clinical judgment, not by fixed numbers or mandated ratios. Shortened lengths-of-stay and observation patients add to the complexity of staffing decisions, as do unpredictable workloads that are part of daily nursing care. Nurse leaders must have the flexibility to manage the changing patient care needs, while ensuring that competent staff delivers quality nursing care.

Based on their education and experience nurses bring different skills to each patient's bedside. Mandated fixed nursing ratios do not consider the impact of these differences on staffing decisions.

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