

## **RNAO sounds the alarm on changing models of care in nursing**

RNAO is speaking out against actions being taken in some hospitals across Ontario. The association is gravely concerned about proposed nursing staffing models that – disguised under other names – take us back to “team nursing.”

In our correspondence and meetings with health-care organizations, we have been sharing the importance of nursing staffing models that secure continuity of care and continuity of caregiver, using RNs for the total nursing care of unstable patients with unpredictable outcomes, and RPNs for the total nursing care of stable patients with predictable outcomes.

At a time when hospitals are cash strapped, senior executives must use evidence to make decisions, not experiment with patients' lives. The evidence on nursing models of care delivery conclusively shows that fragmentation leads to medical errors. The evidence also shows that using RNs results in improved clinical and financial outcomes. Indeed, the amount of direct patient care RNs provide is directly linked to mortality and morbidity rates. Higher levels of care from RNs result in fewer deaths, pressure ulcers, pneumonia and other pulmonary events, post-operative infections, urinary tract infections, upper gastrointestinal bleeds and cardiac arrests. A higher proportion of RNs is also linked to shorter lengths of stay and improvements in failure to rescue, as well as superior organizational effectiveness and budgetary outcomes. However, despite this research, RNs are being sacrificed to balance budgets in much the same way as they were during the 1990s.

Please read RNAO's materials on this issue below, including letters to the hospitals and recent copies of the President and Executive Director's columns in Registered Nurse Journal. RNAO is also looking for your stories. Is your workplace being affected by staffing model changes? Tell us about your experience.

- Executive Director's Dispatch: Ringing alarm bells on changing models of care delivery
- RNAO Client Centred Care Position in Hospitals (pdf)
- Jul-Aug 2009 President's View (pdf)
- Jul-Aug 2009 Executive Director's Dispatch (pdf)
- Toronto East General Hospital CCT Report (pdf)
- Sue Matthews' Discussion re TEGH Approach to CCT (pdf)
- Dianne Martin's response to CCT (pdf)
- Linda Aiken's evaluation of CCT (pdf)
- Greta Cummings' evaluation of CCT (pdf)
- Nurses Association director 'saddened' by story (News article in The Whig-Standard, 6 Aug 2009)
- Wendy Fucile's Letter to the Whig-Standard Editor (6 Aug 2009)
- Using RPNs to help alleviate shortage 'OK' with association (News article in The Whig-Standard, 7 Aug 2009)
- RNAO letter to Kingston General Hospital (13 Aug 2009)
- Eleanor Rivoire response to RNAO letter to Kingston General Hospital (17 Aug 2009)
- Cost-cutting ideas shrinking Cambridge hospital's deficit still mostly secret
- Duckett: “Nursing's future is not in nursing's hands”