



**BC NURSES'  
UNION**

*Standing up for health care*

# IMPLEMENTING MINIMUM NURSE-TO-PATIENT RATIOS

*Towards improved patient  
outcomes and safe staffing levels*

Name of Presenter

*Date*

## INDIGENOUS LAND ACKNOWLEDGEMENT



## WHY RATIOS?

### MEMBER PRIORITIES

- > Nurses recognize that mandatory ratios create better work environments, leading to enhanced retention & recruitment
- > **84%** of more than 15,000 BCNU survey respondents said ratios were a 'must have'
- > California & Australia were in a nursing shortage when they implemented ratios
- > BC has tried other methods to address workload without success

## WHY RATIOS?

### RECRUITMENT & RETENTION

- > **7,000** inactive nurses came back to work in Australia<sup>1</sup>
- > **60%** increase in nurse registrations in California<sup>1</sup>
- > **69%** decrease in vacancies in Sacramento hospitals<sup>1</sup>
- > **67%** say they're more likely to stay in their jobs because of ratios<sup>2</sup>

1. National Nurses United (n.d.). RN staffing ratios: A necessary solution to the patient safety crisis in U.S. hospitals. Available at: [https://www.nationalnursesunited.org/sites/default/files/nnu/documents/0619\\_Ratios\\_Booklet\\_NNU.pdf](https://www.nationalnursesunited.org/sites/default/files/nnu/documents/0619_Ratios_Booklet_NNU.pdf)

2. Aiken, L. et al (2010). Implications of the California nurse staffing mandate for other states. Health Serv Res, 45(4), doi:10.1111/j.1475-6773.2010.01114.x.

## WHY RATIOS?

### SAFETY FOR ALL

- > **74%** of nurses say that quality of care increased because of ratios<sup>1</sup>
- > **31.6%** fewer nurse injuries in California after implementation<sup>2</sup>
- > Additional patient per nurse represents a **12-16%** increase in the risk of 30-day mortality<sup>3,4</sup>

1. Aiken, L. et al (2010). Implications of the California nurse staffing mandate for other states. Health Serv Res, 45(4), doi:10.1111/j.1475-6773.2010.01114.x.
2. Leigh, J.P. et al (2015). California's nurse-to-patient ratio law and occupational injury. Int Arch Occup Environ Health, 88(4):477-84.
3. McHugh, M.D., Aiken, L.H. et al (2020). Case for hospital nurse-to-patient ratio legislation in Queensland, Australia hospitals: An observational study. Nursing, doi:10.1136/bmjopen-2019-036264.
4. Lasater, K.B., Aiken, L.H. et al (2021). Patient outcomes and cost savings associated with hospital safe nurse staffing legislation: An observational study. BMJ Open, doi:10.1136/bmjopen-2021-052899.

## ACUTE CARE RATIOS

Unit Type	Ratio
Med/Surg	1:4
Rehabilitation	1:5 days, 1:7 nights
ALC	1:7
Palliative Care	1:3
Focused (Special) Care	1:3
High Acuity / Step Down	1:2
Intensive Care	1:1
NICU	1:1 to 1:3, by Tier of Service

Unit Type	Ratio
Operating Rooms	2.5 nurses per room
PACU	2:1 to 1:2, by stage of recovery
Antepartum	1:3
Labour & Delivery	1:1 active labour, 2:1 at birth
Postpartum	1:3 dyads, 1:4 birth parent only
Newborn Nursery	1:3
Emergency	1:3 acute, 1:4 fast track & short stay, 1:1 critical care & trauma

## mNPR GOVERNANCE STRUCTURE & WORKING GROUPS IN BC

Ministry of Health

Executive Steering Committee  
(MoH, BCNU/NBA, HEABC)

Planning

Implementation

Monitoring,  
Reporting &  
Evaluation

Recruitment &  
Retention

Communications

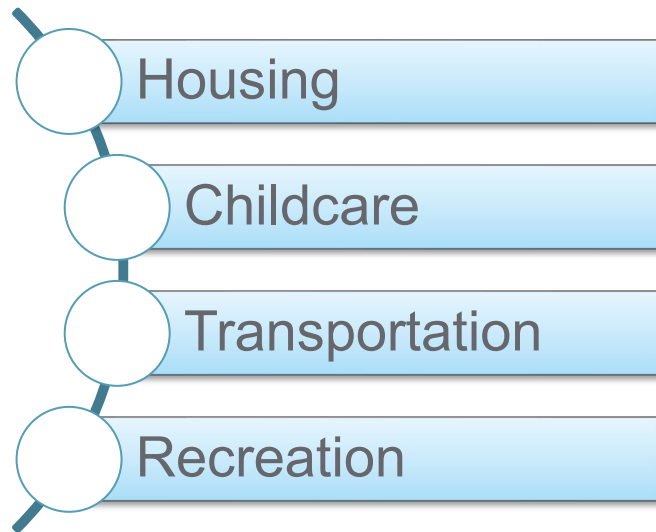
## WHAT IS NEEDED TO MAKE RATIOS A REALITY?

- 1) Retain and recruit more nurses
- 2) Provide safe and health workplaces
- 3) Apply a diversity, equity and inclusion lens



## WHERE DO LOCAL GOVERNMENTS FIT IN?

**Nurses need more available and affordable...**



- > Local governments can help by creating communities that are attractive to nurses.
- > Nearly half of BC nurses are under 40, and over 90% are women; child care and other local resources that help promote work/life balance are essential.

## WHAT ELSE CAN LOCAL GOVERNMENTS DO?

Be allies with us in:

- > Advocating for the provincial and federal governments to do more to retain and recruit nurses.
- > Educating the public about minimum nurse-to-patient ratios and what is needed to make them a reality.

## KEEP IN TOUCH WITH YOUR REGION'S NURSE LEADERS

BCNU's elected regional leaders want to stay connected with you.

Here are your best contacts in the **Pacific Rim region**:

- > Kelley Charters, Regional Council Member  
[kellycharters@bcnu.org](mailto:kellycharters@bcnu.org)
- > Ashley Johnston, Regional Lobby Coordinator  
[ashleyjohnston@bcnu.org](mailto:ashleyjohnston@bcnu.org)

QUESTIONS?

