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 21,000 RNs will be lost to retirement or death by the year 2006 in Ontario - only 3,000 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 recommended: “Governments, employers and unions should collaborate to integrate the incorporation of nurses working full-time 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 2005.

While there is no specific study that looks directly at 70 per cent FT employment for nurses as such, 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 nurses are central to ensuring continuity of care and continuity of caregiver for patients and clients. The connection between continuity of care provider and cost-effectiveness comes.

A study in 2003 estimated 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.

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.

For RNs and employed organizations, moving to 70 per cent FT employment has been shown to:

1. Improve patient/client outcomes dependent 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 nurses working for contract agencies, according to an article by D. Grayson and D. Gravel.

   - The ability of nurses to know their patients’ needs in a way that is relevant to them.

2. Efficient RN Utilization and System Cost-Effectiveness
   - RNs are central to the delivery of healthcare 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 or complications in a timely manner. Currently across Ontario, 18 percent of RNs are casual nurses and 18 percent of part-time nurses work for multiple employers.

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

5. FT employment is based on the fact that nurses are central to ensuring continuity of care and continuity of caregiver for patients and clients. The connection between continuity of care provider and cost-effectiveness comes.

6. Sustainability of the Nursing Profession
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