### PROFESSIONAL PRACTICE | FREQUENTLY ASKED QUESTIONS

#### **AREA OF PRACTICE: Long-Term Care**

# 1. Question: What is the minimum staffing required in a long-term care facility?

The resident, the provider, and the environment are critical factors to be considered in the workplace and will determine who is the most appropriate to provide care supported by evidence, nursing research, and best practice (SALPN, SRNA & RPNAS, 2017). *The Collaborative Decision-making Framework: Quality Nursing Practice, 2017* can be reviewed at <a href="https://www.srna.org/wp-content/uploads/2017/12/Collaborative Decision making Framework 2017 10 17.pdf">https://www.srna.org/wp-content/uploads/2017/12/Collaborative Decision making Framework 2017 10 17.pdf</a> Staffing should reflect: the right provider, in the right place, for the right residents, at the right time.

Registered nurses\* demonstrate leadership and professional advocacy when raising concerns about staffing and workload concerns. You have a professional responsibility to raise these concerns when you are unable to meet your regulatory requirements (i.e.: standards, competencies, code of ethics, and scope of practice) or when patient/staff safety is at risk. Start a conversation with your colleagues and your Manager using low-level resolution. If a low-level resolution with your Manager is not successful, then it is appropriate to notify them that you are completing a WSR (https://sun-nurses.sk.ca/wsr-form).

The SRNA has created a practice statement on registered nurse roles and responsibilities in long-term care (under review) and can be found here <a href="https://www.srna.org/wp-content/uploads/2017/09/Roles Resp of RNs Working in LTC FINAL 2015 06 18.pdf">https://www.srna.org/wp-content/uploads/2017/09/Roles Resp of RNs Working in LTC FINAL 2015 06 18.pdf</a>

If you have questions or concerns about staffing, workload, or registered nursing coverage, please contact Duty Roster (ERO/NPO) and SRNA/RPNAS.



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### 2. Question: I am the only registered nurse on shift. What can I do about staffing?

**ANSWER:** If you don't have the right number or type of staff (i.e.: registered nurses, LPNs, SCA/CCAs, support staff) to provide care to your residents, you need to discuss your concerns with your Manager. The discussion should be based on your assessment and evaluation, staffing complement, patient/staff safety, and your ability to meet regulatory and Employer requirements.

In the absence of a manager, then your Charge Pay article in the collective agreement will apply and outlines the steps to be taken. As the registered nurse and care leader, you have the authority to call in additional staff according to criteria created with the Employer. If criteria have not been created by the Employer, you have the authority to call in additional staff based on your assessment, professional judgment, and critical thinking to best meet resident care needs. Local registered nurses need to be included in the development of criteria to guide call-in decisions, and it must be based on clinical decision-making.

As a registered nurse, you are held accountable and responsible to fulfill the expectations of your Employer and those from your regulatory body outlined in standards, competencies, code of ethics, and scope of practice. If you are unable to meet those requirements, you need to communicate and document your concerns to resolve those risks as a Leader in your facility.

If staffing concerns are not resolved through low-level resolution with your Manager, then it is appropriate to notify them that you are completing a WSR (<a href="https://sun-nurses.sk.ca/wsr-form">https://sun-nurses.sk.ca/wsr-form</a> ).

If you have questions or concerns, please contact Duty Roster (ERO/NPO) and SRNA/RPNAS.

## 3. Question: My Manager is not a registered nurse and tells me who to call in. Can my Manager do that?

**ANSWER:** Yes, the Employer can outline a call-in process or criteria to be used by members when additional staff is required and the steps are outlined in your collective agreement. As the registered nurse, you balance this call-in process with your assessment, clinical judgment, and critical thinking for the residents in your care and the facility. You must ask yourself, who the most appropriate provider is to be called in to meet the needs of the residents. If a registered nurse is needed based on your assessment of care needs, acuity, and complexity, then you must discuss this with your Manager to obtain appropriate staffing.

If the decision is made by your Manager to not call in a registered nurse and you feel it is unsafe, and you have used low-level resolution, then it is appropriate to notify them that you are completing a WSR (https://sun-nurses.sk.ca/wsr-form).

If you have questions or concerns, please contact Duty Roster (ERO/NPO) and SRNA/RPNAS.



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### 4. Question: What is Standby? What do I need to know?

**ANSWER:** Standby is unique to the Saskatchewan Union of Nurses. Standby is an assignment and attached to your regular shift by your Employer, of not less than 8 hours, where you are required to be available to respond immediately to return to work. You can not be scheduled at the end of your last shift, and you cannot be assigned when you are not scheduled to work without mutual agreement from the Local, Employer, and members.

If you have questions about how Standby is being applied by your Employer, including scheduling, callback, or payment, please contact Duty Roster (ERO/NPO) for assistance.

#### Notes:

The term 'registered nurse' is used inclusive of both Registered Nurses (RNs) and Registered Psychiatric Nurses (RPNs) unless indicated otherwise.

Charge Pay - Article 9.03 differs depending on the collective agreement being applied. SUN/SAHO and All Nations Healing Hospital collective agreements state, 'no registered nurse management' being available. The Extendicare Canada collective agreement article states if 'no management personnel' are present. Please contact Duty Roster (ERO/NPO) for additional information and support if you have questions or concerns.

