

LONG-TERM CARE ESSENTIALS FAQ

Revised: November 2025

WHAT ARE THE MINIMUM STAFFING REQUIREMENTS IN LONG TERM CARE?

Employers must meet minimum staffing requirements detailed in [The Facility Designation Regulations](#), [The Special-Care Home Regulations, 2024](#), and [Program Guidelines for Special-care Homes \(2024\)](#).

The Facility Designation Regulations require the Saskatchewan Health Authority and healthcare organizations/facilities to follow the *Program Guidelines for Special-Care Homes, 2024* when providing care to residents. Special-care home refers to long-term care services provided in a designated facility, either temporary or permanent, to those unable to care for themselves, and includes convalescent care, rehabilitative services, palliative care, respite care, and day programming.

The Special-care Homes Regulations, 2024, set the following requirements for nursing care:

- carried out by or under the direction of a registered nurse or registered psychiatric nurse;
- involves the resident's personal physician, physician assistant, or nurse practitioner, or if needed, one designated by the agency;
- every home shall employ at least one full-time registered nurse or registered psychiatric nurse; and,
- nursing care by a registered nurse or a registered psychiatric nurse shall be provided on a 24-hour basis.

The Program Guidelines for Special-care Homes were revised in October 2024. The guidelines further interpret the nursing and personal care requirements by stating that staffing includes RNs, RPNs, LPNs, CCAs, and other providers for quality resident care needs.

The guidelines further interpret registered nurse staffing requirements as:

- a minimum of eight (8) hours a day, five (5) days per week on-site with an RN/RPN on call when not in the home.

To identify the appropriate staffing complement, minimum requirements for resident care set by regulations and guidelines must be balanced against acuity, complexity, predictability, risk for negative outcomes, and work environment.

Employers must have a process for safe, effective staffing, a skill mix of providers, a plan to change the staffing mix to meet resident care needs, an evaluation process, and/or staff competence.

HOW DO THE STAFFING REQUIREMENTS IMPACT PROFESSIONAL PRACTICE IN LONG-TERM CARE?

There is no minimum requirement that the registered nurse must be a SUN member or that the registered nurse must always be on-site. Resident care needs will dictate the on-site presence for coordinating care, assignment and supervision of care, and the need for registered nursing care that another staff or designated provider cannot provide.

SUN Provincial believes that a registered nurse should be on-site and immediately available to respond and intervene to provide nursing care to all residents on a 24/7 basis. When a SUN Member is not on-site or on standby, there must be a registered nurse who will fulfill the requirements for registered nursing practice and accept professional responsibility for resident care.

If your facility Manager is not an RN/RPN, then an out-of-scope registered nurse should be identifiable and available to fulfill registered nurse requirements for care.

HOW DO I MAKE DECISIONS ABOUT THE MOST APPROPRIATE NURSING PROVIDER?

The resident, the provider, and the environment are critical factors that will determine who is the most appropriate to provide care based on evidence, nursing research, and best practices.

Having the right staffing complement is based on your critical thinking, clinical assessment, identified resident care needs (i.e.: acuity, complexity, predictability, risks), the qualifications of the available staff, resident/staff safety, your ability to meet your regulatory and employer expectations, and the work environment.

If you don't have the correct number or type of staff to provide the required care for your residents, you need to discuss your concerns with your Manager/designate in real-time. If low-level resolution does not result in solutions, notify them that a Work Situation Report will be completed.

Registered nurses are primarily responsible for coordinating care, assignment, and supervising resident care using the nursing process, and per the *Program Guidelines for Special-care Homes, 2024*.

CAN A NON-REGISTERED NURSE MANAGER TELL ME WHOM TO CALL IN?

Your Employer can outline a call-in process or criteria for when additional staff are required. In the SUN/SAHO collective agreement, there is a critical article to be used by SUN members for addressing insufficient staffing:

- **Article 9.03:** *If additional staff are necessary, and no registered nurse management personnel are available, the registered nurse designated in charge shall have the authority to call such additional staff subject to criteria established by the Employer in consultation with the registered nurses in the work Unit. In the event the Employer has not established criteria, the registered nurse shall have the authority to call additional staff that in her professional opinion are necessary.*

As the registered nurse, you balance this call-in process with your assessment, clinical judgment, and critical thinking regarding the residents, staff, and work environment in your care.

Ask yourself: Who is the most appropriate provider for resident nursing care needs? If a registered nurse is needed based on your assessment, acuity, and complexity, discuss this with your Manager to obtain the appropriate staffing or identify the most suitable location for the resident to receive the required continuing care.

CAN THE EMPLOYER REQUIRE OVERTIME OR MANDATE SHIFTS IN LONG-TERM CARE?

Overtime is voluntary, except in emergency circumstances. Your Manager/ designate can offer Members overtime; however, they cannot 'mandate' Members to work overtime unless one of the defined emergency circumstances exists as per

- **Article 8.01:** *Emergency circumstances are defined as circumstances driven by an unforeseen and/or unpredictable influx of patients or an unanticipated increase in care required to address patient well-being.*

Staff shortages and lack of effective recruitment and retention plans are neither unforeseen, unpredictable, nor unanticipated. Concerns about overtime or mandating should be reported immediately to your Local President and [Labour Relations Officer](#) for real-time assistance.

HOW CAN I PREVENT BEING REPORTED FOR CLIENT ABANDONMENT IF I WON'T EXTEND MY SHIFT?

There is no professional regulatory standard, indicator, competency, or ethical responsibility that states registered nurses must stay beyond their scheduled shift due to known staffing deficiencies.

Review of regulatory requirements identifies that registered nurses are responsible and accountable for the decisions made within professional practice. There are professional and legal duties to care for the residents under your care as a reasonable and prudent nurse.

The CRNS and CRPNS have addressed the issue of client abandonment in their resources to assist members in understanding what does or doesn't constitute client abandonment:

- [Client Abandonment \(Toolkit for Managers of RNs\)](#) [CRNS]
- [Duty to Provide Care: Guideline for Registered Psychiatric Nurses, 2024](#) [CRPNS]

Should SUN members have additional professional questions on client abandonment, they should contact the [CRNS](#) or [CRPNS](#) for assistance.

WHEN SHOULD I COMPLETE A WORK SITUATION REPORT?

Every time a professional practice, workload, and/or staffing concern about registered nursing practice is not resolved with low-level resolution, and residents are at risk or unsafe.

Learn more about Work Situation Reports, the Nursing Advisory Process, including learning modules, resources, and frequently asked questions by contacting your Local President/NAC Chairperson/Representative, or reviewing the [WSR/NAC Learning Modules & Resources](#).

WHY ARE WORKLOAD AND INSUFFICIENT STAFFING SIGNIFICANT?

Workload and insufficient registered nurse staffing represent the most significant professional practice concerns reported in Work Situation Reports. These concerns indicate what prevents registered nurses from providing safe, competent, ethical, appropriate, high-quality resident care in healthy, quality work environments. They represent the inability to provide care according to legislative, regulatory, professional and organizational obligations.

Registered nurses who cannot fulfill their resident care obligations due to workload, insufficient staff, support, and/or resources must address these concerns in real-time to protect residents and their registered nurse licence to practice.

WHO CAN I CONTACT IF I HAVE QUESTIONS OR NEED ADVICE ABOUT PROFESSIONAL PRACTICE?

You can contact various experts, including your SUN Local President/Executive, NAC Chairperson/Representative, SUN Nurse Practice Officer, regulatory bodies, and the Canadian Nurses Protective Society, which provides professional liability protection to members.

- [SUN Nurse Practice Officers](#)
- [CRNS - Nursing Practice Consultation](#)
- [CRPNS - Practice Program](#)
- [CNPS – Legal Advice](#)

WHOM DO I CONTACT IF I HAVE LABOUR RELATIONS QUESTIONS?

If you have questions about the interpretation, breach, or violation of collective agreement articles outside of the professional practice articles, contact your Local President, [Labour Relations Officer](#), or [SUN Provincial Duty Roster](#) during business hours.

WHERE CAN I LEARN MORE ABOUT LONG TERM CARE PROFESSIONAL PRACTICE OBLIGATIONS, RESPONSIBILITIES, AND BEST PRACTICES?

Here is a starting point of regulatory, professional, and best practices that registered nurses working in Long Term Care can access focused on their practice area:

Regulatory Resources

- College of Registered Nurses of Saskatchewan ([CRNS](#))
 - [RNs Working in Special-care Homes, 2021](#)
 - [Clinical Questions \(Toolkit for Managers of RNs\)](#)
 - [Coordination of Care \(Toolkit for Managers of RNs\)](#)
 - [Fatigue and Fitness to Practice \(Toolkit for Managers of RNs\)](#)
 - [RN Charge Nurse Responsibility \(Toolkit for Managers of RNs\)](#)
 - [Joint Statement: Long Term Care – Authorized Prescriptions \(February 14, 2024\) & Authorized Prescriptions Clarification \(June 5, 2024\)](#)
 - [Working with Unregulated Care Providers, 2023 \(CRNS, RPNAS & CLPNS\)](#)

- College of Registered Psychiatric Nurses of Saskatchewan ([CRPNS](#))
 - [Long-Term Care \(LTC\) – Authorized Prescriptions \(June 10, 2024\)](#)
- Canadian Nurses Protective Society ([CNPS](#))
 - Publications
 - [InfoLAW: Long-Term Care](#)
 - [InfoLAW: Patient Restraints](#)
 - [InfoLAW: Supervision](#)
 - [Ask a Lawyer: Working with Unregulated Care Providers](#)
 - [Legal Considerations in Times of Nursing Shortages](#)
 - [Webinars](#)
- Professional Organizations
 - [Canadian Gerontological Nursing Association](#)
 - [Gerontological Nursing Standards of Practice and Competencies \(2020\), 4th edition](#)
- [Canadian Nurses Association](#)
 - [Code of Ethics for Nurses, 2025](#)
 - [CNA Certification Program](#)
- Choosing Wisely Canada
 - [Nursing](#)
 - [Nurse Practitioner](#)
 - [Geriatrics](#)
 - [Long Term Care](#)
 - [Choosing Wisely in Long-Term Care: A Resource Guide to Help You Get Started](#)
- Registered Nurses Association of Ontario
 - [Best Practice Guidelines](#)