



Member

FILED BY

Clark Kent

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EMPLOYER

TEST Health Authority

WORKSITE

TEST SUN Hospital

DEPARTMENT

Labour and Birth

LOCAL

Local 315, TEST Hospital SUN

Case Details

UNIT/AGENCY

Labour and Birth

INVOLVED SUN MEMBERS

De Lila, RN

Shift Details

SHIFT 2026-04-15 , Day

	BASELINE	ON DUTY	NEEDED
RN	14	11	17
RPN	0	0	0
NP	0	0	0
LPN	0	0	0
Other	0	0	0

Management Onsite

Charge Nurse with patient assignment

Charge Nurse without patient assignment

Patients

NUMBER OF PATIENTS

15

RN/RPN/NP TO PATIENT RATIO

1:1.364

BEDS IN UNIT

15

PLANNED PATIENT HOURS

0

OVERCAPACITY



ACTUAL PATIENT HOURS

0

Step 1: Actions Taken for Low Level Resolution

- Department / Unit Huddle
- Discussion with RN manager/supervisor
- Discussion with co-workers/Charge Nurse
- Workload discussion

Other

Multiple discussions on plan for the day. I was pulled from working on a planned rollout that is set for next week.

- Ongoing issue or repeat incident that should be identified for trending purposes

Step 2: Notification of Manager or Designate

- Manager Notified
- | MANAGER NAME | METHOD OF COMMUNICATION |
|--------------|-------------------------|
| Mgr Name, RN | Face to Face |

Manager Response

Very short staffed - no one came in despite the broadcast. Supportive of WSR - plan to pull CRN and CNE to triage and OR

MANAGER OR DESIGNATE NOT AVAILABLE, STAFF CALLED IN PER ARTICLE 9.03

CALL-IN CRITERIA PER ARTICLE 9.03

WHO WAS CALLED IN

Explanation of Unsafe Shift

- Equipment/supply issues
- Inability to monitor, observe or check patient(s)
- Isolation precautions
- Non nursing duties
- Nursing code of ethics breached or risk of breach
- Physical layout of facility/unit
- Staff safety concerns
- Too many patients
- Wrong skill mix (i.e. need RN, LPN or 1:1)
- High acuity
- Inadequate orientation/training/equipment
- Leaves not replaced
- Not enough qualified staff/Jr. Sr. mix
- Patient negative outcome, harm or incident
- Physician related concerns
- Supports not available (management, PT, SW, etc.)
- Workload

Additional Details

Several sick calls; Clinical Nurse Educator pulled to triage and Clinical Resource Nurse pulled to OR, 1 RN had 2 - 1:1 post-partum patients.

Unmet Professional Standards

- 24 Hours RN/RPN/NP Coverage (LTC)
- CRNS Standards
- National Standards
- RPNAS Code of Ethics
- CNA Code of Ethics
- Employer/Region Policy
- OHS Legislation
- RPNAS Standards

Additional Details

Unable to provide safe patient care to all patients/dyads needing to be seen. I was in triage by myself.

Unsafe Situation Status

- Closed the unit to admissions/bed closed
- Obtained correct number of staff
- Ongoing issue for further monitor
- Refused assignment/I was reassigned
- It was not resolved
- Obtained correct skill mix of staff
- Provided the necessary training/preceptor

Additional Details

They tried to mitigate the situation by pulling Clinical Nurse Educator and Clinical Resource Nurse to fill gaps in Triage and OR.

Impact on Patient Care

- Delayed or cancelled treatment or programming
- Inability to give or receive report
- Inadequate patient pain management
- Incomplete assessments
- Increased length of stay for patient(s)
- Patient(s) left without being seen
- Inability to answer call lights
- Inability to practice safe patient care
- Incomplete admissions
- Incomplete discharge planning/teaching
- Negative outcome, harm or incident

Additional Details

CRN and CNE are constantly being pulled to help on the floor due to urgent needs; there have been delays with my work on a product rollout next week. Other work not getting done that indirectly impacts patient care

Action Taken

- | | |
|--|---|
| <input type="checkbox"/> Contacted CRNS/RPNAS/CNPS | <input type="checkbox"/> Contacted SUN Provincial |
| <input type="checkbox"/> Notify Local | <input type="checkbox"/> Notify nurses on next shift |
| <input type="checkbox"/> Notify On-Call Manager | <input type="checkbox"/> Occurrence/Safety Report # |
| <input type="checkbox"/> Repeated phone calls to Manager | <input type="checkbox"/> Stop the line |
| <input type="checkbox"/> Unit/bed closure | <input checked="" type="checkbox"/> Worked shift without assistance |

Additional Details

Manager aware- prioritizing urgent needs on the floor with Clinical Resource Nurse and Clinical Nurse Educator assigned on the floor.

Incident Description

It was a very acute and busy shift. Triage was +++busy, with one patient going into active labour. RNs taking on more than 1 - 1:1 postpartum, so we could take admissions. One pre-term on MgSO4, one emergency C-section. No one got a break and the workload on the unit with the remaining patients was unsustainable. This keeps happening on our unit - pulled to assist but other work going undone or significantly delayed.

Recommendations for Resolution

Look at hiring casuals, reviewing potential for additional relief lines if we can expect a certain number of sick calls. Increase baseline staffing to support the ongoing acuity and needs of the unit as baseline would not have been enough for this shift. Perhaps need for additional Clinical Nurse Educator to assist work on rollouts, audits, education, etc.

Communication Record

This WSR form was submitted on-line by the SUN member identified at the top of this record. Electronic copies of this record have been sent to the following participants in the roles of Union Local & Provincial Representatives and a Employer Unit Manager Representative.

2026-04-15 5:36:00 p.m.

This document was created by Clark Kent. A notice of this document was sent to the following via email:

Member: Clark Kent, sunlink.test@outlook.com

Local Representative: SUN Test (NAC), sun.test.nac@outlook.com

Provincial Representative: Name Name, name.name@sun-nurses.sk.ca

Unit Manager: Name Name, name.name@hospital.com

Message ID: 00-461502afe46802a1d05ed7869e03b940-02f8736f622682cf-00