



HOW NURSE-TO-PATIENT RATIOS CREATES SAFER ATMOSPHERE BASED ON STAFFING ACUITY

A

Presentation by

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Press Release

- On September 29, 2002 Governor Davis issued a press release announcing the DHS proposed regulations on Ratios In General Acute Care Hospitals.



Phase One

- Lobbying/mobilization for the adoption of the CNA-sponsored enabling legislation, AB 394 (Assemblywoman Kuehl).
- The CNA Legislative/Regulatory/Political arm's extensive endeavors assisted by the highly visible commitment and advocacy of the CNA RNs and public resulted in this landmark, worldwide first, nurse-to-patient ratios legislation.



Phase Two

- Extensive analysis by the Nursing Practice Program and the Institute of the Department of Health Services' interpretation and application of the newly created (AB 394) Health & Safety Codes.



Phase 2 (cont'd)

- Emphasis is on compliance with the standards of the Office of Administrative Law which has the authority to approve or disapprove the proposed regulations.
- Education and mobilization of members to promote CNA's position.



Phase Three

- Enforcement/direct patient advocacy action at the facility level through the Professional Performance or Practice Committees (PPC) and where appropriate through enforcement of similar contract provisions.



Nursing Services Staff: Proposed Regulations

- Hospitals shall provide staffing by licensed nurses within the scope of their licensure (RNs, LVNs or *LPTs*/mental health only).
- Staffing for care not requiring a licensed nurse is out of the count and shall be determined by the patient classification system.

Nursing Services Staff:

Proposed Regulations (cont'd)

- *No hospital shall assign a licensed nurse to a nursing unit of clinical area unless that hospital determines that the licensed nurse has current competency in providing care in that area, and has also received orientation to that hospital's clinical area sufficient to provide competent care to patients in that area.*



Nursing Services Staff: Proposed Regulations (cont'd)

- *The Policies and procedures of the hospital shall contain the hospital's criteria for making this determination.*



Nursing Services Staff: Proposed Regulations (cont'd)

- Licensed nurse-to-patient ratios represent the maximum number of patients that shall be assigned to one licensed nurse at any one time.
- The same ratios apply to all shifts.



Nursing Service Staff: Proposed Regulations (cont'd)

- *"Assigned" means the licensed nurse has responsibility for the provision of care to a particular patient within his/her scope of practice.*



Nursing Services Staff: Proposed Regulations (cont'd)

- *There shall be no averaging of the number of patients and the total number of licensed nurses on the unit during any one shift nor over any period of time.*



Nursing Services Staff: Proposed Regulations (cont'd)

- Only licensed nurses providing direct patient care nurses are in the count.
- Nurse administrators, supervisors, charge nurses, and other licensed nurses not having a specific patient care assignment, are out of the count..... unless



Nursing Services Staff: Proposed Regulations (cont'd)

- *those licensed nurses are engaged in providing direct patient care.*
- *Nurse Administrator, et al, are excluded when they engage in activities other than direct patient care.*
- *Nurse Administrator, et al, who have demonstrated current competence may relieve licensed nurses during break, meals and other routine, expected absences from the unit.*



Nursing Services Staff: Proposed Regulations (cont'd)

- LVNs may constitute up to 50% of the licensed nurses assigned to patient care on any unit, with two exceptions:
 1. Intensive Care Newborn Nursery Services Unit – RN only.
ER – Triage: RN only
Critical Trauma Patient: RN only
 2. Where RNs are required pursuant to the patient classification system.



Nursing Services Staff: Proposed Regulations (cont'd)

- A licensed nurse is not prohibited from assisting with specific tasks within his/her scope of practice for a patient assigned to another nurse.
- *"Assist" means that the licensed nurses may provide patient care beyond their assignments if the tasks performed are specific and time-limited*



Nursing Services Staff: Proposed Regulations (cont'd)

- Identifying a unit by a different name than those already identified in the proposed regulations does not affect the requirement to staff at the ratios identified for the patient population level and type of care.



Nursing Services Staff: Proposed Regulations (cont'd)

- In addition to staffing according to the ratios the hospital shall implement a patient classification system.



Nursing Services Staff: Proposed Regulations (cont'd)

- The hospital shall plan for routine fluctuations in patient census. If a *healthcare emergency* causes a change in the number of patients on the unit, the hospital must demonstrate that prompt efforts were made to maintain required staffing levels.



Healthcare Emergency

- *Healthcare Emergency is an unpredictable or unavoidable occurrence at unscheduled or unpredictable intervals relating to healthcare delivery requiring immediate medical interventions and care*



Licensed Nurse-to-Patient Ratios by Unit/Services

- ICU nurse ratio is 1:2; NICU 1:2 (RN license only)
- Pediatric ratio is 1:4.
- Post-anesthesia recovery unit (PACU) ratio is 1:2.
- Step down ratio is 1:4 *and 1:3 1/08*
- Specialty care nurse ratio is 1:5 and 1:4 *in 1/08*



Licensed Nurse-to-Patient Ratios by Unit/Services

- OR ratio is one RN as circulating *nurse* and a minimum of one additional person as scrub assistant for each patient-occupied OR.
- *The scrub assistant is either a licensed nurse an OR technician or other person with demonstrated current competency, but not a physician or other licensed health professional assisting in the performance of surgery.*



Licensed Nurse-to-Patient Ratios by Unit/Services (cont'd)

- L & D ratio is 1:2
- *Antepartum is 1:4*
- Postpartum women only ratio is 1:6.
- Postpartum couplets is 1:4



Licensed Nurse-to-Patient by Unit/Services (cont'd)

- PACU is 1:2 at all times *regardless of the type of anesthesia the patient received.*



Licensed Nurse-to-Patient Ratios by Unit/Services (cont'd)

- Basic/Comprehensive ER services ratio is 1:4.
- Minimum of two licensed nurses when a patient is present in the ER.
- At least one of the licensed nurses shall be an RN assigned to triage patients.



Licensed Nurse-to-Patient Ratios by Unit/Services (cont'd)

- Triage RN shall not have a patient care assignment or be assigned to the base radio, and shall be out of the count.
- *When there are no patients to triage the Triage RN may assist by performing other nursing tasks but must be immediately available.*



Licensed Nurse-to-Patient Ratios by Unit/Services (cont'd)

- ERs with base radio authority shall have an RN assigned to base radio duties at all times (24 hours).

Radio RN may assist but must be immediately available to respond to requests for medical direction.



Licensed Nurse-to-Patient Ratio by Unit/Services (cont'd)

- Critical Care Patients in the ER ratio is 1:2 or fewer at all times.
- *Critical Care Patient is a patient who meets the Critical Care admission criteria.*
- *“Critical Trauma Patient” is a patient with injuries requiring life saving interventions in conjunction with unstable VS, which pose an immediate threat to life and limb.*



Licensed Nurse-to-Patient Ratios by Unit/Services (cont'd)

- Telemetry ratio is 1:5 *and 1:4 in 1/08*
(For 10 or less telemetry patients there shall be one additional person who is legally authorized to perform telemetry functions who shall not have any additional assignments)

This provision is deleted



Licensed Nurse-to-Patient Ratios by Unit/Services (cont'd)

- Medical/Surgical ratio is 1:6 and starting 1/1/05 the ratio changes to 1:5.



Licensed Nurse-to-Patient Ratios by Unit/Services (cont'd)

- Psychiatric unit ratio is 1:6. Psychiatric technicians (PT) are in the count on psychiatric units only. LVNs, PTs or a combination of both shall not exceed 50 percent of the licensed nurses on the unit.

Number of Licensed Registered Nurses 1985-86 through 2006-2007

| <u>FISCAL YEAR</u> | <u># of LICENSED RNs</u> | | <u># of Active</u> |
|--------------------|--------------------------|-----|--------------------|
| 1985-86 | 229,747 | ** | |
| 1986-87 | 234,430 | ** | |
| 1987-88 | 239,907 | ** | |
| 1988-89 | 251,089 | ** | |
| 1989-90 | 251,397 | ** | |
| 1990-91 | 251,826 | * | 224,694 |
| 1991-92 | 253,524 | * | 228,638 |
| 1992-93 | 254,061 | * | 231,931 |
| 1993-94 | 252,415 | * | 231,873 |
| 1994-95 | 252,905 | * | 233,678 |
| 1995-96 | 254,822 | * | 234,168 |
| 1996-97 | 256,483 | * | 238,343 |
| 1997-98 | 260,113 | * | 241,978 |
| 1998-99 | 264,273 | * | 246,068 |
| 1999-00 | 268,623 | * | 250,123 |
| 2000-01 | 276,074 | * | 257,428 |
| 2001-02 | 286,845 | * | 268,337 |
| 2002-03 | 298,983 | * | 280,653 |
| 2003-04 | 307,524 | * | 289,372 |
| 2004/05 | 317,992 | * | 299,837 |
| 2005/06 | 334,696 | *** | 316,348 |
| 2006/07 | 343,495 **** | | 324,911 |

* Source: Monthly primary status report from department.

** Source: Annual Reports, Department of Consumer Affairs, Number of Licenses.

*** through October, 2006

A change in reporting definitions for DCA Annual Report now requires listing active & Only active clear licenses are listed in the DCA Annual Report for Fiscal Years 1995-96 (These numbers do not include 150 day licenses; the Annual report does, therefore not THEREFORE - The monthly Primary Status Reports are a much more accurate source.

****on June 07 monthly report