



RNAO

Registered Nurses' Association of Ontario
L'Association des infirmières et infirmiers
autorisés de l'Ontario

the VOICE for
registered nurses,
nurse practitioners
and nursing students
in Ontario

Peel Chapter

**Addressing Nursing Shortages
within Local Health Systems**

January 2021

RNAO.CA

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Influences

Informs

Advocates

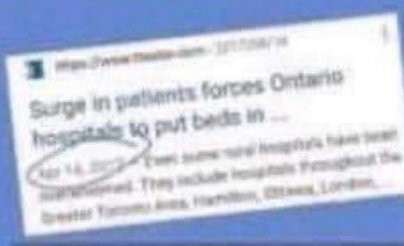
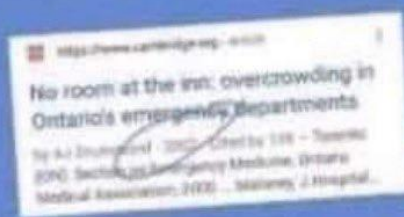
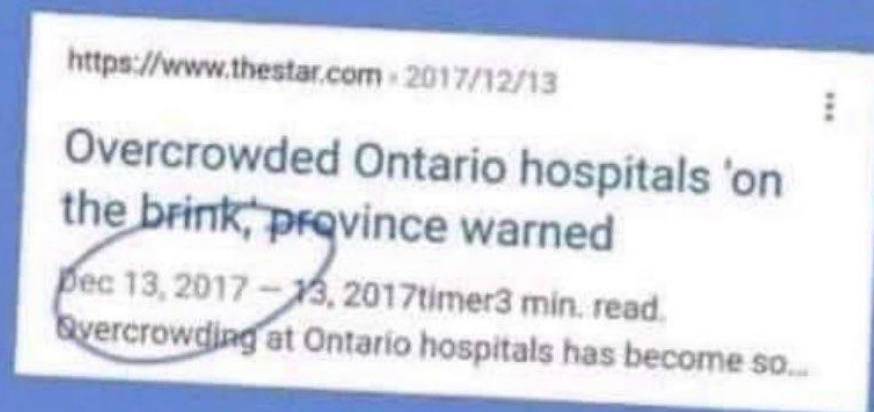
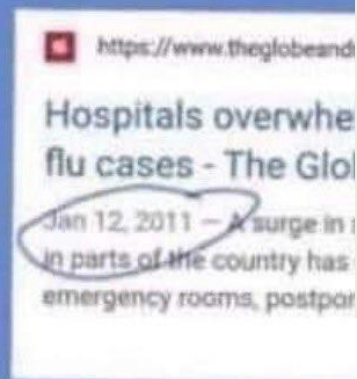
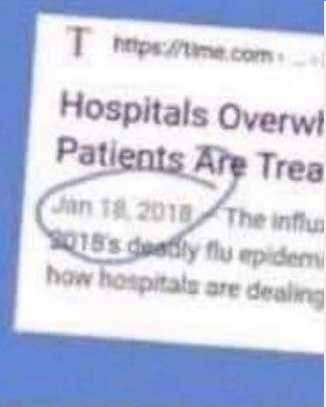
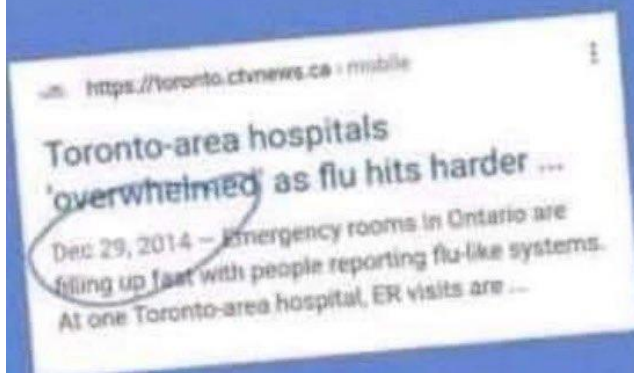
Connects

Protects

Inspires

History shows overwhelmed health system is not new.

A sustained, lengthy pandemic has worsened an already lean health care system



Assessment

Pandemic of 22 months & counting

– **Impacted** nurses in all sectors

- Hospitals
- Long Term Care
- Home Care
- Public Health
- Community
 - » CHCs
 - » Corrections
 - » Schools
 - » Streets



Significance of Motion

Bill 124 passed in 2019 capped pay increases annually to 1%

Placed constraints on collective bargaining especially for COVID-19 supports

First step needed Repeal the Bill, other strategies are also needed

Challenges

- Employee Assistance Programs **Enhancements**
 - Would surpass 1 % cap
- Vacations cancelled, holiday leaves shortened
 - Impacts nurses physically and mentally
 - Outcomes increased sick time and stress leaves
- Not all nurses are paid at provincial level
 - Variability creates unfair market i.e., Region of Peel not affected \$\$ but face similar pressures

Challenges

New beds are furniture until nursing resources are included.



Nurses of Peel

We Know

- Nurses are leaving positions in all sectors, especially 25-35 year old RNs (RNAO, 2021)
- **Academic** personnel (College faculty) are in a strike position---currently work to rule, huge issue
 - **limited to no clinical placements** for nursing students to meet competencies to enter practice

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- Overwhelming fear for their families—taking COVID-19 home
- Challenges with their own family needs—child care, children with special needs, elders,
- Deployed for months to other jobs, no choice

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- RNs identify there are safety issues i.e., senior nurses have left who will mentor new and novice nurses

-  Workload due to covering RN gaps i.e., expansion of manager's portfolio—regular responsibilities + IPAC

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- Emergency & ICUs most affected, known to be harsh for nurses = Burnout, PTSD

- Mental health issues—grief, depression, stress

- Consider these realities

- PPE ***N95 mask worn 7 of 8 hours, 11 of 12 hours

- 5 patients died in one shift, multiple Code Blues

- Usual ratios in hospital wards

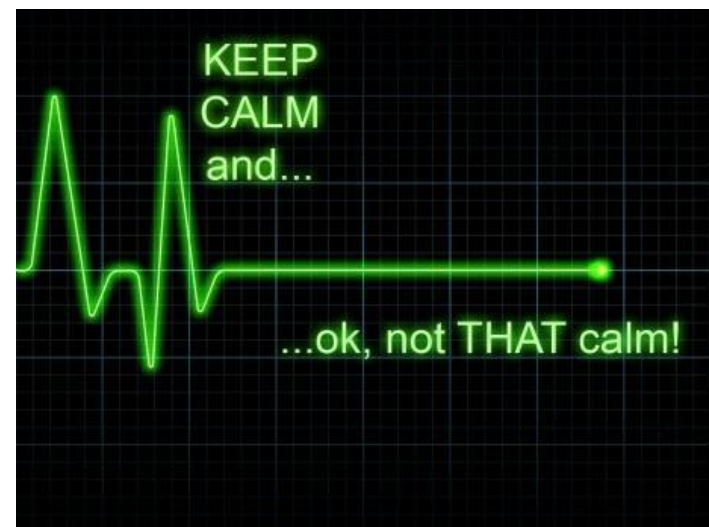
- 4:1 on days, increased to 6 to 8:1 due to shortages.

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- When staffing leaner, patient care alters to basic needs
 - Vital signs
 - Medications
 - Dressings, Treatments, Safety Checks
- What's limited (long list)
 - Baths
 - Mobility
 - Feeding Assistance > 10 minutes
 - Increased use of restraints

For All Communities

- Nurses need increased support immediately
- Nursing is an essential resource, basic care **is not** quality health care
- Find out what nurses do on a shift to shift basis—it's a lot



Communities

- Pandemic has created numerous challenges
 - Health of Nurses is now a very loud alarm
 - 25-30% vacancy rates in many agencies, some sectors higher

Acute Care Admitted Patients Need Nursing Care:

Hospitals are made of bricks nurses are the mortar---they keep the structures standing.



Thank You for Your
Support of Nurses
in Peel Region

