

24 Hour RN Coverage in Special-Care Homes

In Saskatchewan, the term “special-care home” refers to a nursing home or other facility designated by the government and is operated by the Saskatchewan Health Authority (SHA), or an affiliated or contracted agency of the SHA. These facilities provide long-term care, respite care, day programs, convalescent and palliative care services. Special-care homes employ various care providers including Nurse Practitioners (NP), Registered Nurses (RN), Registered Psychiatric Nurses (RPN), Licensed Practical Nurses (LPN), Unregulated Care Providers (UCPs) and other health care professionals to meet the care needs of the residents and clients.

The purpose of this resource is to provide information to support the application of the standards and competencies for RNs working in long-term care settings. It is intended for use by all RNs practicing in special-care homes. It is recognized that RNs are one health care provider within the larger health system and there are many factors that lead to better outcomes for residents.

What professional responsibilities do RNs practicing in special-care homes that provide long-term care have for advocating for safe staffing levels consistent with legislation and regulations?

- RNs are responsible for practicing safely, competently and ethically, and are accountable to the client, public, employer and profession (1) (SRNA, 2019). They advocate in the best interest of clients to help achieve positive health outcomes, especially when clients are unable to advocate for themselves, such as when living in long-term care (2) (SRNA, 2019).
- RNs collaborate with other members of the health care team to strengthen the team and environment surrounding the resident to support resident health and well-being (3) (SRNA, 2019).
- Nurses utilize practice standards, best practice guidelines, policies and research to minimize risk and maximize safety, well-being and dignity for persons receiving care (4) (CNA, 2017).
- RNs uphold their practice standards by practicing in accordance with current relevant legislation (5) (SRNA, 2019). Special care home regulations include the requirement for the provision of nursing care by an RN or RPN on a 24-hour basis (6) (Government of Saskatchewan, 1966).
- RNs provide and support leadership in nursing for optimal coordination and provision of care (7) (SRNA, 2019).
- RNs advocate in the client’s best interest to protect the client from actual or perceived harm and challenge and take action on unclear or questionable orders, decisions or actions by other health care team members, such as decisions about staff mix. The complexity of the client, the regulated and non-regulated nursing team and the environment must guide decisions about the staff mix required for safe care (8) (SRNA, 2019, CNA, 2017, SRNA, 2917).
- Nurses advocate for persons receiving care if they believe the health of those persons is being compromised by factors beyond their control, including the decision-making of others (9) (CNA, 2017).
- RNs practice using evidence from a variety of sources, skills and judgment to address current and emerging health care issues (10) (SRNA, 2019). Some examples of current evidence are included in this document for quick reference.

- In addition to the bullets above, RN administrators/managers in long-term care are responsible to:
 - Ensure policies and procedures are in place to support models of care, staff skill mix and safe care for residents (11) (SRNA, 2019).
 - Ensure the roles and responsibilities for each care provider are clearly articulated and communicated to the health care team to foster role clarity and to support a collaborative practice environment (12) (SRNA, 2019).
 - Ensure clear lines of reporting authority between care providers are established and communicated to all health care providers (13) (SRNA, 2019).
 - Are knowledgeable of individual resident care plans when providing supervision for resident care (14) (SRNA, 2019).

What actions can RNs take if they believe resources are not in place to support safe, competent and ethically safe care?

- When resources are not available to provide appropriate or safe care, nurses collaborate with others to adjust priorities and minimize harm. Nurses keep persons receiving care informed about potential and actual plans regarding the delivery of care. They inform employers about potential threats to the safety and quality of health care through effective communication methods and approved reporting mechanisms (15) (CNA, 2017).
- RNs are professionally responsible for demonstrating effective collaborative practice by communicating respectfully, using problem-solving strategies and managing conflict to create a safe care environment (16) (SRNA, 2019, CNA, 2017). The SRNA resource, *Resolving Professional Practice Issues: A Toolkit for Registered Nurses* may be helpful in addressing conflicts in the workplace that create professional practice issues.
- Nurses make fair decisions about the allocation of resources under their control based on the needs of persons receiving care. They advocate for fair treatment and fair distribution of resources (17) (CNA, 2017). Application of the *Collaborative Decision-making Framework: Quality Nursing Practice* can assist the RN to determine the appropriate care provider for residents in long-term care settings (18) (SRNA, 2017).

What current evidence shows the positive impact of 24-hour RN care in long-term care?

- Canadian seniors are a rapidly growing segment of society. Statistics Canada reported on July 1, 2019 the number of seniors nationally, those 65 years of age and older, was 6,592,611. In Saskatchewan, that number was reported to be 184,697 (Statista, 2019).
- Seniors are living longer than ever before. Although there are seniors living active and independent lives, there are many seniors living in long-term care that are suffering from many chronic health conditions. The Canadian Foundation of Nurses Unions (CFNU) found that nine out of 10 nurses working with seniors in home care and long-term care settings report that the acuity of the clients they work with has increased in the last three years (CFNU, 2017, p.2).
- One of the contributing factors to this increasing acuity is the increase in clients with dementia. One in four seniors, age 85 or older, have been diagnosed with dementia (CIHI, 2020).

December 2020

- The BC Care Providers Association states, “The strongest positive relationships have been found between Registered Nurses (RNs) and quality” (BCCPA, 2019, p.17). “When RN staffing is low, increases in assistant staff levels are not associated with improved quality of staff-patient interactions. Beneficial effects from adding assistant staff are likely to be dependant on having sufficient RNs to supervise, limiting the scope for substitution” (Bridges, Griffiths, Oliver, & Pickering, 2019, p.706).
- Long-term care is a complex area of care and is now recognized as a speciality. Nurses working in long-term care have high levels of autonomy, are leaders, and have well-honed and exceptional assessment skills (Harrington, 2020). As seniors are living longer and with comorbidities, the continual presence of an RN is required. *The Housing and Special-care Homes Regulations, 1966* under nursing care, section 4(3) states, “Nursing care by a registered nurse or a registered psychiatric nurse shall be provided on a 24-hour basis.” Seniors in long-term care can experience significant and rapid changes in their health status that requires the immediate assessment and intervention of an RN. RNs implement best practices and ensure that care plans that are implemented for residents are individualized to the resident and are current (NANB, 2020, p.27).
- RNs advocate for residents to make certain that they are receiving the services they need (NANB, 2020, p.27).
- “More direct care by RNs has been linked to improved cognitive functioning, fewer pressure ulcers, hospitalizations and urinary tract infections; less weight loss and deterioration in the ability to perform activities of daily living” (NANB, 2020, p.27).
- Increased direct care RN hours in LTC are associated with better client outcomes and quality of care. Increased RN hours have been shown to result in reduced rates of pressure ulcers and urinary tract infections (UTIs), fewer hospitalizations and decreased mortality rates. RNs improve client outcomes when there is sufficient staffing and RNs have the time to conduct thorough assessments and implement the care clients require (ONA, 2020, p.4-5).

Regulatory Authority

The Registered Nurses Act, 1988 (the Act) provides the legislative authority for Registered Nurse practice in Saskatchewan. Section 15(2) of the Act enables the SRNA to create bylaws that:

- prescribe the powers and procedures of the Council,
- provide for a code of professional ethics,
- set the standards for professional conduct, competency and proficiency of nurses, and,
- further specify categories of practice and the rights and privileges of those categories.

SRNA Bylaw IV details the privileges and obligations of practicing members. Obligations of practicing members include adhering to the code of ethics, nursing standards and competencies that are incorporated by reference in Bylaw XV and set the standards for professional conduct, competency and proficiency of nurses.

SRNA Resources

- [Code of Ethics for registered nurses \(2017\)](#)
- [Registered Nurse Practice Standards \(2019\)](#)
- [Registered Nurse Entry-Level Competencies \(2019\)](#)
- [Resolving Professional Practice Issues: A Toolkit for Registered Nurses \(2019\)](#)
- [Collaborative Decision-making Framework: Quality Nursing Practice \(2017\)](#)

External Resources

- [The Housing and Special-care Homes Regulations](#)
- [Program Guidelines for Special-care Homes](#)
- [Evidence-based hospital nurse staffing: the challenges](#)
- [RN Staffing Time and Outcomes of Long-Stay Nursing Home Residents: Pressure ulcers and other adverse outcomes are less likely as RNs spend more time on direct patient care.](#)
- [Nursing Home Regulations: RNs in Long Term Care Research Summary](#)
- [Long-term care staffing study](#)
- [Transforming long-term care to keep residents healthy and safe](#)
- [Staffing Standards for Nova Scotia Nursing Homes](#)

Resource Key		
Number	Resource	Reference
1	Registered Nurse Practice Standards (2019)	Standard 1, p. 4
2	Registered Nurse Practice Standards (2019)	Indicator 31, p. 5
3	Registered Nurse Entry-Level Competencies (2019)	4. Collaborator, p. 10
4	Code of Ethics (2017)	D6, p. 12
5	Registered Nurse Practice Standards (2019)	Indicator 49, p. 7
6	The Housing and Special-care Homes Regulations	Section 4(1)
7	Registered Nurse Practice Standards (2019)	Indicator 40, p. 6
8	Registered Nurse Practice Standards (2019) Code of Ethics (2017) Collaborative Decision-making Framework: Quality Nursing Practice (2017)	Indicators 4, 7 and 8, p. 4 A4, p. 8 p. 4
9	Code of Ethics (2017)	C5, p. 11
10	Registered Nurse Practice Standards (2019)	Standard 2, p. 4 Indicator 14, p. 4

11	Registered Nurse Practice Standards (2019) Code of Ethics (2017)	Indicator 6, 11 p. 4; 43 p. 6 A12, p. 9
12	Registered Nurse Practice Standards (2019) Code of Ethics (2017)	Indicator 4, 5, p. 4; 34, p. 5; 41(a) p. 6 B4, p. 10
13	Registered Nurse Practice Standards (2019)	Indicator 29 p. 5; 52 p. 7
14	Registered Nurse Practice Standards (2019)	Indicator 19, 20, p. 5
15	Code of Ethics (2017)	A7, p. 9
16	Registered Nurse Practice Standards (2019) Code of Ethics (2017)	Indicator 5, p. 4 A12, p. 9
17	Code of Ethics (2017)	F6, p. 15
18	Collaborative Decision-making Framework: Quality Nursing Practice (2017)	p. 1, 2

Note: RN is used to represent all SRNA members including NPs and RN(AAP)s.

References

- BC Care Providers Association. (2019). *Filling the Gap: Determining appropriate staffing & care levels for quality in long term care*. Retrieved from <https://bccare.ca/wp-content/uploads/2019/03/Filling-the-Gap-March-2019.pdf>
- Bridges, J., Griffiths, P., Oliver, E., and Pickering., R.M. (2019). *Hospital nurse staffing and staff– patient interactions: an observational study*. Retrieved from <https://qualitysafety.bmj.com/content/qhc/28/9/706.full.pdf>
- Canadian Federation of Nurses unions. (2017). *The Vector Poll™ – Canadian Federation of Nurses Unions Membership Poll on Long-Term Care and Home Care Conditions, 2017*. Retrieved from https://nursesunions.ca/wp-content/uploads/2017/10/Vector-Poll_2017_HomeCareLongTermCare_Summary.pdf
- Canadian Institute of Health Information. (2020). *Dementia in Canada: Summary*. Retrieved from <https://www.cihi.ca/en/dementia-in-canada/dementia-in-canada-summary>
- Canadian Nurses Association. (2017). *Code of Ethics for registered nurses*. Retrieved from <https://www.srna.org/wp-content/uploads/2018/11/Code-of-Ethics-2017-Edition.pdf>
- Government of Saskatchewan. (1966). *The Housing and Special-care Homes Regulations, 1966*. Retrieved from <https://publications.saskatchewan.ca/#/products/1538>
- Harrington, C. (2020). *Staffing Standards for Nova Scotian Nursing Homes*. Retrieved from <https://www.nsnu.ca/sites/default/files/LTC%20Staffing%20Report.pdf>
- Nurses Association of New Brunswick. (2020). *The Contribution of RNs and NPs to Improved Patient Outcomes*. Retrieved from <http://www.nanb.nb.ca/media/resource/INFO-Contribution-RNs-NPs-Improved-Patient-Outcomes-E.pdf>
- Ontario Nurses Association. (2020). *Ontario Nurses’ Association Submission on Long-Term Care Staffing Study*. Retrieved from https://www.ona.org/wp-content/uploads/ona_govtsub_ltcadvisorygroup_20200619.pdf
- Saskatchewan Registered Nurses Association (SRNA). (2019). *Registered Nurse Entry-Level Competencies*. Retrieved from <https://www.srna.org/wp-content/uploads/2019/09/RN-Entry-Level-Competencies-2019.pdf>
- Saskatchewan Registered Nurses Association (SRNA). (2019). *Registered Nurse Practice Standards*. Retrieved from <https://www.srna.org/wp-content/uploads/2019/09/RN-Practice-Standards-2019.pdf>
- Statista. (2019). *Population estimate of Saskatchewan, Canada in 2019, by age and sex*. Retrieved from <https://www.statista.com/statistics/605967/population-of-saskatchewan-by-age-and-sex/>
- Statistics Canada. (2020). *Seniors and aging statistics*. Retrieved from https://www.statcan.gc.ca/eng/subjects-start/seniors_and_aging