ONA received an Independent Assessment Committee (IAC) report on October 9, 2017 addressing serious concerns raised by ONA members working in the Southlake Emergency Department (ED). The RNs reported challenges in meeting CNO standards and guidelines in addition to the standards established by the National Emergency Nurses Association (NENA). The report contains 28 recommendations addressing all 8 areas of concern raised by ONA during the hearing.

The members’ primary concern related to a lack of adequate staffing which made it difficult for nurses to meet their professional standards. They brought forward persuasive evidence of their workload issues and filed over 100 professional responsibility workload forms since 2016.

Achievements Prior to IAC

After a series of meetings, ONA leadership, members and staff achieved significant agreed to changes that would improve the working conditions of the RNs and their ability to meet their standards. They include:

- Adding an additional bed in the medical/surgical ICU for a total of 14 beds
- Creating 10 additional Regular Part Time (RPT) positions
- Adding a phlebotomist to do the morning blood work on all admitted patients in the ED
- Convincing the Hospital to conduct an independent Infection Control Risk Assessment
- Increasing the Pharmacy technician hours to 7 days a week, on days and evenings
- Hospital agreed to begin conducting exit interviews
- Revised policy ‘Registered Nurse Staff Replacement in the Emergency Department’
- Convincing Hospital to resurvey staff on the LEAN initiative regarding EMS offload
- Convincing Hospital to add an additional unit clerk to the Yellow Zone on the night shift

While these were significant improvements, there remained a number of outstanding issues and concerns. ONA continued to work with the Employer and the front-line members continued to complete their workload forms. When it became evident that the Employer would not resolve the outstanding professional practice concerns, ONA referred the matter to an Independent Assessment Committee. The panel heard the issues on September 27, 28, 29, 2017.

Achievements from the IAC

ONA identified eight practice issues to the panel and proposed 28 recommendations to resolve them. ONA is pleased that the panel clearly accepted the evidence and concerns brought forward by the members, and indicated as such by making recommendations and advancing all 8 issues raised by ONA.
Key highlights of the recommendations include:

- Adding at least 5 permanent full time positions to roaster, to help reduce reliance on agency and the Virtual Nursing Team in replacing sick calls and replacing overtime
- Moving to an all Psychiatric Emergency Nurses’ model in the Mental Health Wellness Area
- Increasing RN hours in yellow zone by 11.25 additional hours and reallocating an additional 11.25 hours to this area from sub-acute
- Maintaining a patient to nurse ratio of 5:1
- Maintaining 1:1 care for critically ill patients during surge
- Increasing the number of permanent full-time positions, rather than hiring permanent part-time or casual positions
- Extending the hours of operation in the fast track area by 4 hours with staffing
- Conducting an independent evaluation on whether the current staffing model meets patient needs and conducting an audit on the nature of patients and care provided in this area
- Auditing the Physician Navigator role and function
- Consideration using in-patient medical/surgical staff in the consult area

ONA did argue for increased RN base-line staffing. The panel was not comfortable making significant increases in staffing on the evidence before it. The panel was sufficiently concerned about the issues raised by ONA members to recommend the parties to conduct audits and continue to evaluate.

For this reason, it is important for ONA members to continue to complete workload forms that document where practice issues remain unresolved. This information will be of value to an independent evaluation.

Significance to ONA

These recommendations are valuable not only for ONA members at Southlake but for ONA provincially. In particular, the expert panel clearly indicated concerns about use of agency, supported appropriate patient to nurse ratios and supported the value of creating full-time RN positions vs the casualization of nursing positions we see across the province.

Next Steps

After such a significant investment of resources in this report, it is critical that both parties work together to draft a plan to implement these recommendations. ONA remains committed to ensuring that we see implemented the recommendations that we have fought so hard for. And we commend ONA members on the front-lines for having worked so hard to document the evidence and ensure their nursing voices are heard on behalf of their patients.