

APPENDIX 6
ONTARIO NURSES' ASSOCIATION (ONA)/HOSPITAL
PROFESSIONAL RESPONSIBILITY WORKLOAD REPORT FORM

Article 8 – Professional Responsibility provides a problem-solving process for nurses to address concerns relative to patient care. This form is intended to appropriately identify employee concerns relative to their workload issues in the context of their professional responsibility. These issues include but are not limited to: gaps in continuity of care, balance of staff mix, access to contingency staff and appropriate number of nursing staff. This report form provides a tool for documentation to facilitate discussion and to promote a problem-solving approach.

SECTION 1: GENERAL INFORMATION

Name(s) of Employee(s) Reporting (Please Print)

Jane Smith _____
 John White _____

Employer: XYZ Hospital Unit/Area/Program: ICU

Date of Occurrence: May 30, 2023 Time: 1500 7.5 hr. shift 11.25 hr. shift Other _____

Date/ May 30, 2023

Name of Supervisor/Charge Nurse: Sally Jones
 Time notified: 1500

Manager/Designate notified: yes Date: May 30, 2023 Time: 1500

SECTION 2: WORKING CONDITIONS

In order to effectively resolve workload issues, please provide details about the working conditions at the time of occurrence by providing the following information:

Regular Staffing #: MD/NP _____ RN 8 RPN 0 Unit Clerk 2 Service Support 2
 Actual Staffing #: MD/NP _____ RN 15 RPN 7 Unit Clerk 3 Service Support 4
 Agency/Registry RN: Yes No How many? ____
 Novice RN Staff on duty*: Yes No How many? 6
 RN Staff Overtime: Yes No If yes, how many staff? _____

**as defined by your unit/area/program.*

If there was a shortage of staff at the time of the occurrence (including support staff), please check one or all of the following that apply:

Absence/Emergency Leave Sick Calls Vacancies Off Unit
 Management Support available on site? Yes No

SECTION 3: PATIENT CARE FACTORS CONTRIBUTING TO THE OCCURRENCE

Please check off the factor(s) you believe contributed to the workload issue and provide details:

Rounds
 Consultation with MD/Delay _____
 Change in patient acuity Telemedicine _____

Normal number of beds on unit 15 Beds closed 0 Beds opened during tour 3

Patient census at time of occurrence 45

of Admissions 3 # of Discharges _____ # of Transfers _____

of assigned patients _____

Lack of/or equipment/malfunctioning equipment. Please specify:

Visitors/Family Members. Please specify:

Number of patients on infectious precautions 38

Over Capacity Protocol. Please specify:

Lack of a protocol

Resources/Supplies _____

Interdepartmental Challenges _____

System Issues _____

Exceptional Patient Factors (i.e. significant time and attention required to meet patient expectations). Please specify:

38 patients on isolation due to Covid positive - 40 patients on ventilators

Other (e.g. Non-nursing duties, student supervision, mentorship, etc.). Please specify:

SECTION 4: DETAILS OF OCCURRENCE

Provide a concise summary of the occurrence and how it impacted patient care:

Assignment stretched due to census and high acuity of patients. RPN and PSW added to staffing complement which did not support RN workload as patient acuity and instability was inappropriate for RPN assignment. RNs too busy with unstable patients to support RPNs/PSWs and novice RNs. Increased workload due to being assigned 3 patients when normal ratio is 1:1. Struggled with meeting the CNO Code of Conduct and practice standards and properly supporting patient care. 45 patients requiring 1:1 due to instability. Due to needs of acutely unwell patients, other patients in assignment had late assessments/follow up, late documentation, and medications. Not able to monitor as per hospital policies, not able to provide care in a timely manner according to CNO Code of Conduct and practice standards, not able to document in a timely manner according to CNO - standard. Not able to provide support for new/novice/redeployed staff on unit.

Identify the Nursing Standard(s)/Practice Guidelines or hospital/unit policies that are believed to be at risk and why:

Medication

Documentation

Professional Standards – Specify

Therapeutic nurse/client relationship

RN and RPN Practice, The Client, The Nurse and the Environment

Working with Unregulated Care Providers (Check all that apply)

Personal Support Workers/Aides

Volunteers

Students

Physician Assistants

- Working in different roles
- Telepractice
- Consent
- Clinical pathways/medical directives
- Supporting Learners
- Disagreeing with the Plan of Care
- Guiding Decisions about End-of-Life Care
- Nurse Practitioner
- Employer policy – Specify Ventilated patients, blood infusion reassessments/monitoring, medication orders and policies, cardiac monitoring (include policy if able)
- Other Supporting Novices nurses

Why: Busy with 1:1 and other patients had to wait, no other staff available to cover those patients for care other than "keeping an eye on them".

Is this an Isolated incident? Ongoing problem? (Check one)

SECTION 5: REMEDY

(A) At the time the workload issue occurs, discuss the issue within the unit/area/program to develop strategies to meet patient care needs. Provide details of how it was or was not resolved.

Team leader aware, assisting with increased critically acute patients requiring closer monitoring, TL notified manager - no assistance available - I gave you an RPN and a PSW, that's all I got.

(B) Failing resolution at the time of the occurrence, seek assistance from an individual(s) who has responsibility for timely resolution of workload issues. Discussion details including name of individual(s):

Sally Jones stated that staffing looking for others to help - was able to find the one RPN, no RN's available, Float team already utilized elsewhere

Was it resolved? Yes No

SECTION 6: RECOMMENDATIONS

Please check off one or all of the areas below you believe should be addressed in order to prevent similar occurrences:

- In-service Orientation Review nurse/patient ratio
- Change unit layout Float/casual pool Review policies & procedures

Change Start/Stop times of shift(s). Please specify:

Add mid shift during day to assist with increased transfers/support for testing.

- Review Workload Measurement Statistics
- Perform Workload Measurement Audit
- Adjust RN staffing Adjust support staffing
- Replace sick calls, vacation, paid holidays, other absences
- Equipment. Please specify:

Other:

Provide home grown critical care education for RN's interested in working in ICU

SECTION 7: EMPLOYEE SIGNATURES

Signature: Jane Smith Date: May 30, 2023 Phone #: 1 234 567 8901 Personal Email: Jsmith@google.ca

Signature: John White Date: May 30, 2023 Phone #: 1 987 654 3210 Personal Email: Jwhite@google.ca

Signature: _____ Date: _____ Phone #: _____ Personal Email: _____

Signature: _____ Date: _____ Phone #: _____ Personal Email: _____

Date Submitted: may 30, 2023 Submitted to (Manager Name): Sally Jones

SECTION 8: MANAGEMENT COMMENTS

The manager (or designate) will provide a written response to the nurse(s) within 10 days of receipt of the form with a copy to the Bargaining Unit President as per Article 8.01 (a) iv). Please provide any information/comments in response to this report, including any actions taken to remedy the situation, where applicable.

Management Signature: _____ Date: _____

Date response to the employer: _____ Date response to the union: _____

SECTION 9: RECOMMENDATIONS OF HOSPITAL-ASSOCIATION COMMITTEE

The Hospital-Association Committee recommends the following in order to prevent similar occurrences:

Dated: _____

- Copies: (1) Manager
 (2) Chief Nursing Officer (or designate)
 (3) ONA Rep
 (4) ONA Member
 (5) ONA LRO

**ONTARIO NURSES' ASSOCIATION (ONA)/HOSPITAL
PROFESSIONAL RESPONSIBILITY WORKLOAD REPORT FORM
GUIDELINES AND TIPS ON ITS USE**

The parties have agreed that patient care is enhanced if issue relating to professional practice, patient acuity, fluctuating workloads and fluctuating staffing are resolved in a timely and effective manner. The collective agreement provides a problem-solving process for nurses to address concerns relative to their workload issues in the context of their professional responsibility. These issues include but are not limited to gaps in continuity of care, balance of staff mix, access to contingency staff and appropriate number of nursing staff. This report form provides a tool for documentation to facilitate discussion and to promote a problem-solving approach.

PROBLEM SOLVING PROCESS

- 1) At the time the workload issue occurs, discuss the matter within the Unit/Area/Program to develop strategies to meet patient care needs using current resources. Using established lines of communication as identified by the hospital, seek immediate assistance from an individual(s) (e.g. team leader/charge nurse/manager /supervisor) who has responsibility for timely resolution of workload issues.
- 2) Failing resolution of the workload issue at the time of the occurrence or if the issue is ongoing, discuss the issue with the Manager (or designate) on the next day that both the employee and Manager (or designate) are working or within ten (10) calendar days, whichever is sooner, and complete the form. The Manager will provide a written response within ten (10) calendar days of the receipt of the form.
- 3) When meeting with the manager, you may request the assistance of a Union representative to support/assist you in the meeting. Every effort will be made to resolve the workload issues at the unit level. A Union representative shall be involved in any resolution discussions at the unit level. All discussions and action will be documented.
- 4) Failing resolution, submit the Professional Responsibility Workload Report Form to the Hospital-Association Committee within twenty (20) calendar days from the date of the Manager's response or when they ought to have responded under Article 8.01 (a) iv). (SEE BLANK REPORT FORM ATTACHED TO THESE GUIDELINES.)
- 5) As per Article 8, the Hospital-Association Committee shall hear and attempt to resolve the issue to the satisfaction of both parties and report the outcome to the nurse(s) using the Workload/Professional Responsibility Review Tool to develop joint recommendations. Any settlement/resolution under 8.01 (a) (iii) (iv) or (v) of the collective agreement will be signed by the parties.
- 6) Failing resolution of the issues through the development of joint recommendations it shall be forwarded to an Independent Assessment Committee as outlined in Article 8 of the Collective Agreement within the requisite number of days of the meeting in 4) above.
- 7) The Union and the Employer may mutually agree to extend the time limits for referral of the issue at any stage of this procedure.

TIPS FOR COMPLETING THE FORM

- 1) Review the form before completing it so you have an idea of what kind of information is required.
- 2) Print legibly and firmly as you are making multiple copies.
- 3) Use complete words as much as possible. Avoid abbreviations.
- 4) As much as possible, you should report only facts about which you have first-hand knowledge. If you use second-hand or hearsay information, identify the source if permission is granted.
- 5) Identify the CNO standards/practice/guidelines/hospital policies and procedures you believe to be at risk. College of Nurses Standards can be found at www.cno.org.
- 6) Do not, under any circumstances, identify patients.