



NOVA SCOTIA'S Nursing Strategy

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EMERGING ISSUES IN NURSING

There is significant agreement across Canada that the current shortage of nurses is getting worse, and that left unchecked, this situation will lead to a deterioration in the quality of the nation's health-care system. Some of the issues that have led to this situation are outlined below.

- The Canadian Nurses Association released a report in 1997 that identified the following major contributing factors to a predicted nursing shortage:
 - an aging work force that will retire in large numbers during the next decade
 - an aging population predicted to require increased nursing and other health care; and
 - an inadequate number of new graduates

These contributing factors remain today.

- The availability of alternative career choices for women (who make up 98 per cent of registered nurses in Nova Scotia) and public perception that nursing may no longer be an attractive career option are creating recruitment challenges.
- Hospitals and nursing homes continue to be the employers for nearly 80 per cent of registered nurses in Nova Scotia. Factors such as increased average acuity (resulting from reduced

beds and shorter lengths of stay) and introduction of new technologies and treatments have had significant impact on nursing practice requirements, demanding increased skills, autonomy, and ability to work within multidisciplinary teams.

- Opportunities for continuing education and training are an important quality of care issue and also a quality of work life issue: nurses want to have the skills to provide competent care and also meet their own needs for professional satisfaction.
- The majority of new graduates are no longer able to find permanent full-time positions and are often used to fill casual positions that do not offer a stable and supportive environment for transferring academic skills to patient care. Nursing workloads and higher patient acuity may be reducing the flexibility needed to support new graduates and clinical placements of students.
- Nurses report a deteriorating quality of work life. Issues include appropriate workloads, professional leadership and clinical support, adequate continuing education, career mobility and career ladders, flexible scheduling and deployment, professional respect, protection against injuries and diseases related to the work place, and good wages.

BACKGROUND

These emerging issues in nursing, together with other sources of information and input, have set the stage for Nova Scotia's first Nursing Strategy. We know that:

- Registered Nurses (RNs) and Licensed Practical Nurses (LPNs) are a vital part of the health-care system in Nova Scotia.
- Nurses make up approximately two-thirds of all health professionals in Canada and play a unique role in maintaining a high-quality health-care system and meeting the needs of the population.
- Continuity and quality of care is highly dependent upon maintaining an adequate supply of nursing personnel who are appropriately educated, distributed, and deployed in the province, now and in the future.
- Nurses want to work in settings that offer professional satisfaction and in a system that acknowledges the central value of nursing to health-care delivery.

In developing the Nursing Strategy we drew from the work already done in Nova Scotia by Nova Scotian nurses. Reports, such as *Nursing in Nova Scotia: Strengthening the Foundation* and the *Report of the Action Teams on Nursing*, provided valuable information. We obtained information from other provinces and considered the recommendations of *The Nursing Strategy for Canada*, a collaborative, multi-step approach by

federal, provincial, and territorial governments to address Canada's nursing shortage. We also received advice and input from the Provincial Nursing Network.

The Provincial Nursing Network is a group of nurses who meet with the province's Nursing Policy Advisor on a regular basis to provide proactive advice to enhance co-operation on all issues relating to nursing. Members of the network include nursing employers, educators, professional associations, unions, and practising nurses. Their assistance in identifying the key areas of the Nursing Strategy and focusing the specific initiatives has been invaluable.

In 1999, the Health Human Resources Planning Division of the Department of Health coordinated an extensive consultation process with nurses in Nova Scotia. Front-line nurses and nurse managers were consulted to confirm the priority nursing issues. Participants represented a cross-section of all major stakeholders, including Regional Health Boards, non-designated organizations, and every major sector of the province's nursing community. The results of: (1) internal research and literature reviews, (2) external research contracts, and (3) the focus group consultations were integrated into a comprehensive picture of the provincial nursing situation and reported in *Nursing in Nova Scotia: Strengthening the Foundation*.

Findings of this report reveal that there have been significant changes in nursing in recent years.

- From 1993 to 1998, the province recorded an average net loss of about 150 nurses per year. The losses were mainly in regular full-time positions; the number of registered nurses employed full time fell by nearly 800 over this five-year period.
- Institutions became increasingly dependent on the casual nursing work force. The percentage of nurses employed on a casual basis reached a high of 23 per cent in 1998.
- The reduction of hospitals beds and shorter lengths of stay resulted in a significant increase in patient acuity. As such, traditional staffing ratios (nurses per bed or patient day), staff mix ratios (RNs to LPNs), and deployment patterns (casuals to full time) are proving to be inadequate to meet these new demands.
- With the closure of the diploma schools of nursing and the initial expansion of the university baccalaureate programs, funded nursing education seats dropped from about 330 in 1990 to about 210 in 1998. A further expansion of 75 seats occurred in the fall of 1999. Given the four-year lead time, the first new graduates of this expansion will not be seen until the spring of 2003.

In June 1999, two nursing action teams were established. The Action Team on Nursing Education Strategies was formed with the mandate to provide recommendations for nursing school enrolment expansion and continuing education for registered nurses and licensed practical nurses. The mandate of the Action Team on Staffing was to address strategies to stabilize the existing nursing work force through recommendations for an equitable distribution of new nursing positions among health-care organizations; a methodology for the conversion of casual positions to full-time positions; and the development of a provincial nursing recruitment framework. In January 2000, the action teams submitted the *Report of the Action Teams on Nursing* to the Department of Health.

To address the issues affecting nursing in Nova Scotia, we need to build on the initiatives of the past year and a half and move forward with a comprehensive, coordinated approach, which enhances the quality of work life for nurses, retains experienced nurses in the system, and creates an environment in which recruitment efforts will be successful.

Nova Scotia's Nursing Strategy is based on four key areas:

- Support to practising nurses
- Support to student nurses
- Enhanced recruitment resources
- Work force development and utilization

The next step will be to work with the chief executive officers and senior nursing leaders of the District Health Authorities, along with other key stakeholders, to develop the specific initiatives and the implementation time line for each key area of the Nursing Strategy.

SUPPORT TO PRACTICING NURSES

ACTION:

Funded Orientation

\$2,000,000

Continuing Education

\$1,500,000

Specialty Education Programs

\$600,000

As the health system becomes more and more complex, the need for accessible funding and organizational support for a wide range of nursing education opportunities is essential.

Lack of resources and access to orientation and ongoing staff development programs are long-standing concerns for front-line nurses. The system expects recent graduates and newly hired experienced nurses to commence their roles as relatively independent, autonomous practitioners with minimal or no time for orientation and integration to the workplace.

The demand for nursing education by registered nurses to support clinical competence in a broad spectrum of nursing specialties and advanced practice roles has increased significantly in recent years. Advances in technology, medical specialization, and general increases in patient acuity have signalled the need for highly competent clinicians and education programs to support these practice environments.

Currently the Department of Health funds certificate programs for registered nurses in critical care, peri-operative, and mental health. The issue of providing post-entry level education for registered nurses in specific specialty areas has been a source of concern for more than a decade. Access issues related to funding and geographic disparity continue to challenge the system. We need to ensure that nurses in all areas of the province have access to relevant, accessible, and cost-effective educational programs that support improved health outcomes for all Nova Scotians.

SUPPORT TO STUDENT NURSES

ACTION:

Co-operative Learning Experience
\$ 300,000

A co-operative learning experience for student nurses in the Dalhousie and St. Francis Xavier University nursing programs will provide an employment experience in nursing practice between the third and fourth years of study.

Students will acquire valuable experience by working with seasoned practitioners, become more proficient and better able to handle heavier workloads, increase their nursing knowledge and skill, and earn income to help reduce their student debt load. The Department of Health will benefit through reduced orientation costs for new graduates and an increased likelihood that new graduates will remain in the province.

Having students directly employed in the health system will promote integration of students into the workplace culture and provide for further consultation on education and practice between worksites and nursing schools.

ENHANCED RECRUITMENT RESOURCES

ACTION:

Relocation Allowances

*Provincially Coordinated
Attendance at Job Fairs*

*Communications and
Marketing Strategy*

Total **\$300,000**

Nursing recruitment resources will be enhanced to support a comprehensive recruitment campaign, which includes the marketing of nursing opportunities in Nova Scotia.

Nova Scotia has much to offer. The beauty of this province and our way of life are being successfully marketed by the tourism industry; and recruitment initiatives must use similar intensity to 'sell' our attributes to prospective employees. The capacity of the Internet, job fairs, and other advertising venues must be exploited to their fullest. To hold our own we must create a bona fide presence in the nurse-marketing arena. Marketing materials have to be of a sufficiently high calibre to compete with those being produced by the larger centres in Canada and the United States. In order for us to recruit nurses, we will offer financial support for relocation to Nova Scotia.

Recruitment efforts must also target new entrants into the profession to ensure that seats in the university schools of nursing and the community college remain full. This will become more challenging as the cohort of those eligible to enter nursing reduces in the years to come and other careers continue to offer alternative choices.

WORK FORCE DEVELOPMENT AND UTILIZATION

ACTION:

*Full Utilization RN/LPN
Scopes of Practice*

*Practice Environment
Collaboration Program*

Work Force Deployment

Total **\$300,000**

Establishing the appropriate balance of RNs and LPNs needs to be explored. LPNs report they are not consistently used across the province and that they frequently work below their competency level. The lack of definitive research on the efficacy of various nurse-mix configurations has contributed to ongoing debate about the appropriate utilization of LPNs and may have limited employers from taking the opportunity to maximize LPN skills while augmenting their work force.

We need to ensure that all nurses are used to their full potential. In accordance with recommendation # 8 of *The Nursing Strategy for Canada*, we need to develop a comprehensive strategy to determine what types of nursing human resources are required and for which practice settings, based on an analysis of the needs of the population and of the health system as a whole and on the skills and capacities of all types of nurses.

Nurses want to have the skill to provide competent care and also meet their own needs for professional satisfaction. However, the manner in which nurses practise is influenced by many factors within their practice environment, such as care delivery processes, communication systems, facilities and equipment, and professional development systems.

We need to gather data, through the use of a survey tool, that clearly explicates practice setting attributes and identifies issues and solutions that affect nurses' work life and quality of patient care, making this information available for future decision making. This can be accomplished by building upon the earlier work of the Registered Nurses Association of Nova Scotia and introducing a nursing Practice Environment Collaboration Program to employers in Nova Scotia.

CONCLUSION

The Nursing Strategy for Nova Scotia builds on the work of the past year and a half. It moves us closer to our goal of achieving and maintaining the optimal number, mix, and distribution of nurses to meet the health needs of Nova Scotians, at a cost the province is able to afford. We want to see nurses working in settings that offer professional satisfaction and quality nursing care. These are important first steps that signify for the first time that government has put forth a coordinated, comprehensive strategy to address nursing concerns.

Nursing Strategy—Financial Summary

1. Support to Practising Nurses, including	
Funded orientation	\$2,000,000
Continuing education	\$1,500,000
Specialty education programs	\$600,000
2. Support to Student Nurses, including	
Co-operative learning experience	\$300,000
3. Enhanced Recruitment Resources, including	\$300,000
Relocation allowances	
Provincially co-ordinated attendance at job fairs	
Communications and marketing strategy	
4. Work Force Development and Utilization, including	\$300,000
Full utilization of RN/LPN scopes of practice	
Practice Environment Collaboration Program	
Work force deployment (staffing principles, scheduling, etc.)	
Total	\$5,000,000