THE NURSING PERSPECTIVE ON PATIENT SAFETY

• Patient safety has always been of utmost importance to Canadian nurses. Patient safety is not just a current issue; it is a commitment nurses make through their code of ethics to provide safe, competent, ethical care (Canadian Nurses Association [CNA], 2002). It is fundamental to nursing care and is a concern no matter where nurses work – hospitals, public health, home care, community centres, etc.

• Patient safety is a pressing concern for nurses. In a recent Canadian survey asking them about patient safety, nurses responded overwhelmingly that the environment in which they provide care is presenting increasing risk to their patients (Nicklin & McVeety, 2002).

• Large studies in other countries revealed that most of the harm caused to patients was not attributed to one individual or factor but to problems in the health-care system itself.

• Priority concerns for nurses are:
  - quality of the practice environment;
  - adequate staffing and workforce issues;
  - communication;
  - listening to patients;
  - listening to nurses;
  - use of technology and nurses involvement of selecting and assessing technology;
  - the need for data on patient safety; and
  - moving away from focus on individual blame to a culture that continuously strengthens patient safety.

How health-care reform and changes in demographics have affected patient safety

• The health-care system has been undergoing restructuring for over a decade. As a result of regionalization, mergers and downsizing, the system has become strained.

• As the Canadian population grows and ages, patients in hospitals and the community are becoming more acutely ill and require more complex and specialized care.

• Limited financial resources have meant that hospitals have had to cut costs in all areas, including human resources. For example, reducing the overall numbers of positions and increasing the number of part-time and casual employees who are not paid benefits.
• New technology has been introduced into health-care facilities, but staff training has not kept pace with these advances. With heavier workloads and more nurses working on a part-time or casual basis, there are fewer opportunities to attend orientation and in-service education about new care processes and technology.

• Fewer nurses working in full-time positions affect patient safety as the continuity of care is reduced. Patients are exposed to many people over the course of their care.

• In addition to the limitation of financial resources, there is a critical and growing shortage of qualified nurses. It is projected that Canada will have a shortage of 78,000 registered nurses by 2011 and up to 113,000 by 2016 (CNA & Canadian Federation of Nurses Unions, 2003).

• While the aging nursing workforce means that there is a greater number of experienced and knowledgeable nurses providing care, many will be eligible for retirement within 10 years, leaving gaping holes in terms of experience and fewer mentors available to guide young nurses (O’Brien-Pallas et al., 2003).

Positive and healthy work environments support patient safety

• Environments in which nurses practice either help or hinder them in providing patient care. At present, nurses are concerned that many factors in their practice environments are having a negative impact on patient safety.

• Increased workloads, time pressures, frequent work interruptions and the inability to predict what will happen in their work environments are affecting the health of nurses and their patients. Research demonstrates that people who work under stressful conditions for long periods of time are more likely to make errors (Buerhaus, 1999).

• The stresses and pressures nurses feel in the workplace are affecting the health of nurses and consequently, their patients. Health-care workers are more likely than other Canadians to be absent from work because of illness and disability. Nurses lose more days of work due to illness and disability than other health-care workers, suffer from a very high rate of strains and sprains and are subject to other injuries as a result of punctures from needles and other medical instruments (CIHI, 2001).

Solutions to patient safety: leadership needed at all levels

• The nursing perspective on improving systems and patient safety must be part of a collaborative approach involving the public, other health-care providers, employers, educators, administrators and governments at all levels of the health-care system.

• Nursing associations at the provincial, territorial and national levels have centred their work around patient safety and promoting excellence in nursing practice in the interest of the public.

• CNA led the development of standards of nursing practice and administration as well as the establishment of the Code of Ethics for Registered Nurses. These are revised and updated regularly.

• Nurse scholars and researchers are working to respond to pressures from the public and health-care providers to discover better ways of delivering safer care.
• CNA has partnered with the Canadian Council on Health Services Accreditation (CCHSA), a national, non-profit, independent organization and the national accreditation body for health services in Canada, to advance the use of quality work-life indicators in the accreditation process. This encourages employers to improve working environments to enable nurses to provide safe, competent, ethical care (CNA, 2002).

• Health system reforms will require judicious financial investment and political commitment but in the long term will lead to efficient use of public funding.

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References:


