



Canadian Federation of Nurses Unions

THE NATIONAL VOICE FOR NURSES

A Position Statement on Hallway Nursing

Background

The Canadian Federation of Nurses Unions supports the abolishment of hallway nursing. As members of the Quality Worklife – Quality Healthcare Collaborative (QWQHC), we reject the practice of hallway nursing because it contradicts the indicator of a healthy workplace defined as:

A work setting that takes a strategic and comprehensive approach to providing the physical, cultural, psychosocial and work/job design conditions that maximize health and well-being of healthcare providers, quality of patient outcomes, and organizational performanceⁱ.

It is widely acknowledged that the nursing shortage has negatively impacted quality practice and patient/resident/client care. Bed closures due to lack of staff often result in overcrowding: a situation in which demand for service exceeds the ability to provide care within a reasonable timeⁱⁱ and in an appropriate environment. Healthcare institutions trying to accommodate influxes of new admissions force nurses to take patients regardless of workload, staffing and appropriate supports for patients.ⁱⁱⁱ Many facilities frequently operate at unsustainable occupancy rates, resulting in bed shortages, overcrowding and risks to patients and nurses.

In order to deal with overcrowding, healthcare institutions often are forced to have patients in hallways or to place beds into rooms that were not designed for patient care (visitor lounges, storage rooms), or to put additional beds into already crowded patient rooms. These practices frequently result in a failure to comply with Fire Code regulations, i.e. access to fire exits creating a health and safety risk to both staff and patients.

Risks to nurses

Hallway nursing and overcrowding increase the risk of illness and injury for nurses.

Hallways do not constitute quality practice settings and therefore increase the risk of stress, job dissatisfaction, and negative health outcomes.^{iv} The risk for burnout is 23% higher when nurse staffing is inadequate.^v Negative or diminished teaching, learning and mentorship experiences, and increased risk of violence are also more prevalent when overcrowding occurs.^{vi} CFNU acknowledges that all nurses (community, acute, long-term care, etc.) are negatively impacted by overcrowding.

Risks to patients

Hallway nursing compromises the ability of nurses to meet their ethical and professional practice standards, thereby increasing risk to the patient. Another consequence of hallway nursing is a lack of privacy for patients/clients/residents that compromises their therapeutic relationship with their nurse^{vii}. Research tells us that when even one patient is added to an average nursing caseload, nursing errors are higher and risk of patient mortality and incidents of failure to rescue also increase by 7%.^{viii} Overall, overcrowding results in unpleasant care environments,

prolonged pain and suffering, lack of patient privacy, increased potential for errors, and poor clinical outcomes for patients.^{ix}

Overcapacity protocols

It is our belief that the normalization of overcapacity protocols, which sustain the practice of hallway nursing, is detrimental to nurses, patients, and the healthcare system as a whole. If institutions continue to maintain policies that rely on overcrowding as the solution, much of the pressure on the system to eradicate these practices is relieved – thereby enabling the practice.^x

Planning and implementation of any overcapacity protocol should be strictly limited to situations of extreme surge capacity and should involve frontline nurse leaders in order to ensure that there is a comprehensive nursing perspective included in policy and decision making.^{xi} When overcapacity protocols put the safety of patients or themselves at risk, nurses are encouraged to complete incident reports or grievances; report to joint occupational health and safety committees; and complete professional responsibility forms so that data can be gathered to measure the impact of overcapacity and support policy and decision making.^{xii}

Solutions

Hallway nursing is a systems issue that cannot be easily solved by implementing overcapacity protocols at institutional levels. The Ontario Nurses Association explains that hallway nursing is a symptom of a lack of funding for hospital beds and for sufficient staff for patients to be admitted or transferred to long-term care or home care.^{xiii} In support of this, CFNU calls upon the federal/provincial/territorial governments to fund public home care, long-term care and hospitals in ways that meet the current realities of patient demographics and take action to eliminate hallway nursing.

Systems beyond hospitals also contribute to overcrowding. Increased capacity within and access to primary care services – including family physicians and nurse practitioners – are required to ameliorate this situation. Achieving reductions in wait times and overcrowding should not result in financial (pay-for-performance) incentives to hospitals. Instead, the focus should be on making improvements to community-based healthcare services, enhancing accessibility of multidisciplinary care providers, and increasing the efficiency of triage processes^{xiv} and ensuring appropriate staffing levels. Systemic change that makes viable attempts to improve the retention and recruitment of nurses is also needed.

Additional strategies to target overcrowding include: controlling input wherever possible; avoiding unnecessary admissions; enhancing flow of sick patients from the emergency department to the ward; optimizing inpatient acute care lengths of stay; provide alternate levels of care when appropriate.^{xv} Further, research suggests that hospitals should operate at occupancy rates that do not exceed 85%.^{xvi} Therefore, human resource planning that is comprehensive and well supported by multiple stakeholder groups is imperative.

As advocates for both nurses and patients, the CFNU is committed to collaboration with all stakeholders, including governments, employer associations, professional organizations, patient advocacy groups and the public to banish the practice of hallway nursing and promote the health needs of Canadians.

References

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