Mandated minimum nurse-to-patient ratios assures patients that they can rely on a safe and consistent level of care across public hospitals in Queensland.

**Nurse-to-patient ratios**

From 1 July 2016, acute medical and surgical wards in prescribed Queensland public health services will be required to comply with minimum nurse-to-patient staffing ratios.

A nurse-to-patient ratio is the number of nurses or midwives working on a particular ward, unit or department, in relation to the number of patients they care for.

The mandated ratios set the minimum number (the ‘floor’) of nurses required on prescribed wards. The ratios will support and operate in conjunction with the existing resource management process, the Business Planning Framework: Nursing Workload, in all public hospitals.

### Evidence for change

- The impact of nurse staffing levels on patient outcomes has been researched for over 15 years.
- The vast majority of studies demonstrate the benefits of having higher numbers of nurses caring for patients. For example, one additional registered nurse can decrease patient mortality by 7 per cent.
- Other studies have shown there are fewer pressure injuries, infections and falls when there are more nurses on the ward.

**Benefits** of minimum nurse staffing numbers include:
- quicker critical situation rescues
- prevention of complications
- prevention of adverse events
- decreased lengths of stay
- fewer work-related injuries, less absenteeism and turnover, and higher job satisfaction for nurses.


Minimum nurse-to-patient ratios were made law in Queensland with historic legislation introduced by the Queensland Government on 12 May 2016.

Changes to the Hospital and Health Boards Act 2011 set the minimum number of nursing staff that a public sector health service must provide on prescribed wards during morning, afternoon and night shifts.

The Business Planning Framework is used to determine the optimum nurse staffing levels needed to safely meet the needs of patients. The Framework is underpinned by adherence to professional nursing standards and clinical judgment in determining appropriate staffing levels to meet demand.

### On the ward

In the day to day operations of the wards, the way patients are cared for will remain unchanged after the introduction of minimum staffing ratios. What may change is the proportion of registered and enrolled nurses to the number of patients on the ward.

The minimum ratios are 1:4 on morning and afternoon shifts, and 1:7 on night shifts.

### Research and evaluation

The impact of introducing minimum nurse-to-patient ratios in Queensland’s public health services will be assessed by the world leader in nurse-to-patient research, the University of Pennsylvania in collaboration with the Queensland University of Technology. The University of Pennsylvania has carried out similar studies in more than 30 countries.