Nurse-to-Patient Ratio Compliance: Team Leader / Shift Coordinator Principles

Purpose

The below principles have been developed to ensure compliance with the Minimum nurse-to-patient ratio legislation¹ regarding the practice of allocating a patient load to Team Leaders / Shift Coordinators. These principles acknowledge previous correspondence from the Department of Health (Deputy Director-General Clinical Excellence Division) to the Health Service Chief Executives on 12 October 2016 regarding Team Leaders / Shift Coordinators ².

Overarching principles

- 1. The best available evidence underpins the delivery of safe and quality health services.
- 2. Staffing requirements in the service profile align with legislation, regulations, non-mandatory standards³, guidelines, benchmarks, policies and frameworks and relevant college standards.

What is meant by Team Leader / Shift Coordinator?

A registered nurse/registered midwife who:

- (a) is designated this function on a particular shift within a unit by the line manager and is recognised by the nursing/midwifery staff within the unit on the particular shift as fulfilling this function.
- (b) is directly responsible for providing oversight, leadership, communication and coordination of nursing/midwifery unit activities for the shift to ensure delivery of safe patient care.

What is the function of the Team Leader / Shift Coordinator?

The responsibilities of these roles in relation to patients, staff and organisation must be evidence based and form part of the model of care as defined annually in each service profile.

Examples of the responsibilities include:

- patient and staff coordination
- ensuring compliance with hospital policies and procedures
- liaising with medical and allied health staff to formulate patient clinical management plans
- monitoring the appropriateness and effectiveness of clinical care
- · ensuring a safe environment is maintained
- responsibilities in relation to a clinical patient load and direct care

How the Team Leader / Shift Coordinator counted in the nurse-to-patient ratio for compliance?

- Within the service profile, the Model of Care is documented including the function of the Team Leader / Shift Coordinator for each shift and when this role is allocated a patient load.
- The legislation states for compliance with the ratio legislation that a nurse or midwife is taken to be engaged in delivering a health service only if directly involved in providing care to 1 or more of the patients receiving the service¹.

³ Clinical Services Capability Framework (CSCF) Version 3.2 Fundamentals of the Framework, pg. 26 @ https://www.health.qld.gov.au/ data/assets/pdf file/0030/444666/cscf-fundamentals-of-the-framework.pdf





¹ http://www.legislation.qld.gov.au/LEGISLTN/CURRENT/H/HHNA11.pdf

² "One concern has been raised at the Ratios Implementation Working Group is the new practice in some hospitals of allocating a patient load to Team Leaders so they can be included in the ratio calculation. There is no legislative impediment to this practice, and I am advised in many circumstances, Team Leaders have had a patient allocation for years. However, it is the view of the RIWG that where this change has taken place recently and for the primary purpose of improving ratios compliance, that this is not supported."

- Therefore for application of the Team Leader / Shift Coordinator in the nurse-to-patient ratio compliance reporting is:
 - If the Team Leader / Shift Coordinator is providing care and allocated to 1 or more patients they are included in the compliance reporting.
 - o If the Team Leader / Shift Coordinator is <u>not</u> providing care or allocated patients they are excluded in the compliance reporting.

How are changes in the function of the Team Leader / Shift Coordinator addressed?

- When a Model of Care is altered, any changes that have an impact on the function of the Team Leader / Shift Coordinator are incorporated into a revised service profile.
- The revised service profile is then tabled and discussed at the local Hospital and Health Service Nursing and Midwifery Consultative Forum for consultation and negotiation with affected staff and Queensland Nurses' Union.