



Safe staffing of nursing and midwifery services

It is the policy of the Australian Nursing and Midwifery Federation that:

1. Widely accepted research clearly demonstrates relationships between nursing and midwifery staffing levels and skills mix and the adequacy, safety and quality of care.^{1 2 3}
2. There is strong evidence validating the positive impact that an appropriate, safe number of registered nurses and midwives will have on clinical outcomes. There are well-established causal links between safe staffing levels and skills mix and quality health outcomes for people and the work health and safety of nurses and midwives.^{4 5}
3. There must be in place a minimum staffing system that is enforceable and is supported by the nursing and midwifery professions.
4. Excessive staff turnover, absenteeism and injury, which may occur with inadequate staffing levels and skills mix, especially in the absence of medical staff, can adversely affect staff morale and contribute to financial inefficiencies.
5. The staffing methodologies used by health and aged care facilities⁶ must provide a reliable mechanism to determine the relationship between factors such as inadequate or inappropriate staffing and/or increased workload and staff turnover, absenteeism, injury and attrition, and their detrimental effects on the safety and quality of patient care outcomes.
6. Staffing methodologies used to determine nursing and midwifery staffing levels and skills mix, must enable the provision of nursing and midwifery care in accordance with the Professional Practice Framework of the Nursing and Midwifery Board of Australia.

Staffing methodologies must:

- a. Enable nurses and midwives to meet their legal and professional obligations;
 - b. Support nurses and midwives in their professional judgement;
 - c. Enable nurses and midwives to work within the professions' scope of practice and to their full individual scope of practice;
 - d. Take into account variability of needs, outcome⁷ and safety and quality data of the people for whom nurses and midwives provide care;
 - e. Support ongoing professional development.
7. Nurses and midwives must have decision-making power in relation to the development, implementation and evaluation of systems designed to determine the staffing and skills mix of nursing and midwifery services.
 8. Nurses and midwives should be involved in the establishment of any nursing and midwifery service delivery costs, in order to ensure accurate, reliable, transparent, valid and timely methodology design, data input and interpretation.
 9. The system of accounting for nursing and midwifery care costs, to either individuals or groups, should accurately reflect nursing and midwifery costs and should be separated from costs generated by other departments and services. Nursing and midwifery involvement in work unrelated to nursing and midwifery care should be costed separately.
 10. Staffing methodologies used to determine nursing and midwifery staffing levels and skills mix and data pertinent to budget planning, control and justification must be easily available to the nurses and midwives using those systems.



11. Organisational and nursing / midwifery management must ensure there is ongoing monitoring and evaluation of staffing / skills mix models undertaken through agreed tools. Agreed tools for monitoring and evaluating staffing / skill mix must include escalation processes that enable nurses and midwives to raise concerns.

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