

SPN Position Statement Safe Staffing for Pediatric Patients

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Society of Pediatric Nurses (SPN) recognizes that staffing is a complex issue composed of multiple variables, and therefore, no single published ratio for nurse staffing is automatically applicable in all settings where children receive care. The healthcare needs of pediatric patients present unique challenges and particular attention must be given to differing developmental stages, limited communication, differences in epidemiology, approaches to treatment and provision nursing care in the context of family centered care.

SPN believes that all children should receive safe, high quality, culturally competent, family-centered care in an environment that supports the health and development of the child. Building upon the <u>American Nurses Association (ANA) Principles for Nurse Staffing</u> (2020), SPN recommends the following be considered in the staffing plan for the nursing care of children:

- The use of an evidence-based pediatric acuity assessment tool to objectively measure patient acuity to guide staffing decisions and ensure assignment of fair and manageable workloads.
- The assessment of patient and family needs including developmental, physiological, psychosocial, and learning needs as well as the level of family involvement and the family's ability to meet the needs of the child.
- Published recommendations for staffing ratios must be carefully evaluated for the particular pediatric setting in which care will be provided and consideration must be given for the availability of specialized equipment, supplies and support services such as respiratory care, child life, social services, and spiritual care.
- Multiple studies have proven that lower nurse to patient ratios are associated with improved patient outcomes. Organizations must evaluate adverse patient outcomes such as mortality, infections, falls and longer lengths of stay to determine the adequacy of nurse staffing.
- The core concepts as cited in the following resources should be included in education and assessment of pediatric clinical competency:

- Scope and Standards of Pediatric Practice: Pediatric Nursing (2nd ed.), (ANA, 2015).
- SPN Position Statement: <u>Child Health Content in the Undergraduate Curriculum</u> (SPN, 2021).
- o <u>SPN Pediatric Nurse Core Competencies</u> (SPN, 2017)

Nurses providing care for pediatric patients should commit to ongoing maintenance of specialized clinical competency through continuing education.

REFERENCES

American Nurses Association. (2020). ANA principles for nurse staffing. Retrieved online: <u>https://www.nursingworld.org/practice-policy/nurse-staffing/staffing-principles/</u>

American Nurses Association. (2019). Nurse staffing advocacy. Retrieved online: https://www.nursingworld.org/practice-policy/nurse-staffing/nurse-staffing-advocacy/

American Nurses Association, National Association of Pediatric Nurse Practitioners, Society of Pediatric Nurses. (2015). Scope and standards of practice: Pediatric nursing, (2nd ed). Silver Spring, MD: American Nurses Association.

Society of Pediatric Nurses. (2021). Child health content in the undergraduate curriculum. Retrieved online: http://www.pedsnurses.org/p/cm/ld/fid=220&tid=28&sid=3861

Society of Pediatric Nurses. (2017). Pediatric nurse core competencies. Retrieved online: <u>http://www.pedsnurses.org/page/core-competencies</u>