

# Safe Rights

In Care Homes & Hospitals



**UI**  
global  
union

care

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# INTRODUCTION

Safe staffing levels are critical in ensuring high-quality care and safer work environments in hospitals and residential care homes. Numerous studies over decades have shown that an increase in the number of nurses and carers leads to better care outcomes, lives saved, and fewer complications. Despite this, chronic staff shortages remain a significant issue.

Understaffing in the health and care sector significantly harms worker morale, contributes to violence and harassment, leads to higher rates of illness and injury among nurses and carers, and drives high worker turnover. Care members of UNI Global Union frequently cite inadequate staffing as a key

reason for colleagues leaving. Health and care workers have long emphasized that insufficient staff and time prevent them from providing proper care.

Key to the sector's inability to attract and retain enough health and care staff are 3 fundamental workforce pressures: lack of strategic planning, poor wages, and understaffing.

Unfortunately, without standardized regulations, many care home employers cut costs by employing too few staff, leading to high turnover, poor occupational health and safety (OHS) outcomes, and substandard care, sometimes resulting in preventable deaths.



*“All of these threats represent a ticking time bomb which, if not addressed, is likely to lead to poor health outcomes across the board, long waiting times for treatment, many preventable deaths, and potentially even health system collapse.”*

**Hans Kluge**

*WHO Regional Director for Europe*

*“The same things that cause nurses to burnout are the same that cause patients to be dissatisfied with their care...All these things are connected, and they can be solved by improving staffing and the working environment.”*

**Professor Linda Aiken**

*Director of the Center for Health Outcomes and Policy Research*

# GLOBAL EFFORTS AND LEGISLATION

In response to union-driven campaigns and the clear link between staffing levels and care quality, several governments, including those in the U.S., Canada, and Australia, have recently legislated minimum care hours or staff-to-patient ratios in aged care facilities. These countries join others like Japan, Korea, and Finland, where such standards have been in place for a longer time.



## SEIU's Campaign in New York

*During the pandemic, SEIU 1199 members in New York engaged in continuous collective actions to push for better staffing ratios. Their efforts included public leafleting, informational pickets, and direct meetings with politicians. These actions highlighted the stark differences between facilities meeting proposed standards and those that were not. The campaign successfully won a standard of 3.5 hours of care per resident per day in New York and influenced the introduction of national staffing regulations by the Biden administration in 2024.*



# SAFE STAFFING MECHANISMS

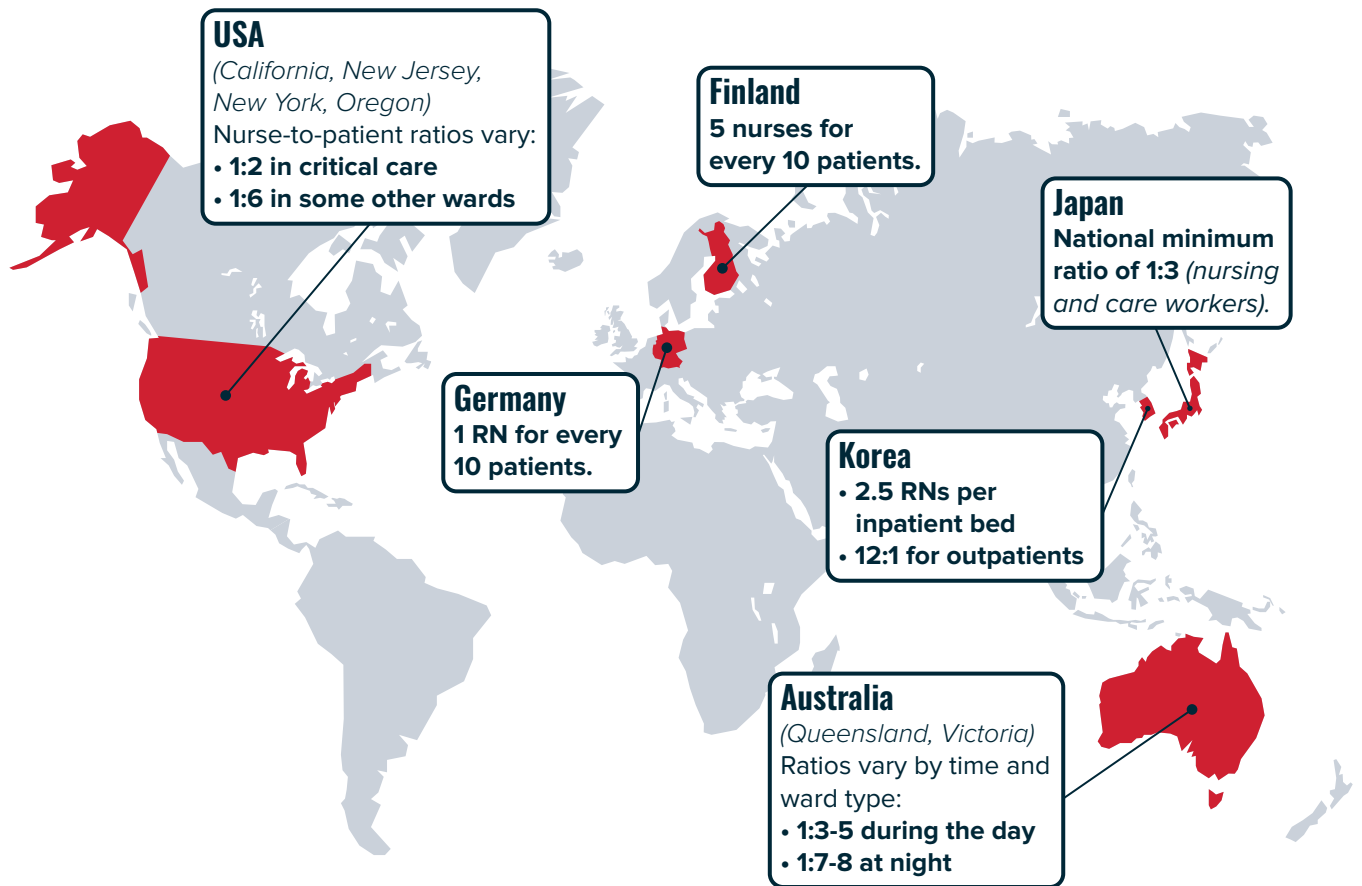
Safe staffing levels can be ensured through worker-to-patient ratios (e.g., 1 carer per 5 residents) or by setting Minimum Care Hours, which specify the daily direct care time each resident should receive. These standards may vary based on patient needs or time of day and can be established through legislation or collective bargaining agreements.



*“There are only 3 caregivers on the day shift out of 95 residents. Often it happens that the resident will ask to sit with them for a while even just for 10 minutes. Unfortunately, we can’t afford it, because it means that someone will sit in a dirty diaper. Sometimes we are the only people they can talk to at the end of their lives, and we, for lack of staff and time, have to treat them mechanically, like things that have to be kept clean.”*

**Grażyna**  
Nursing Home Carer

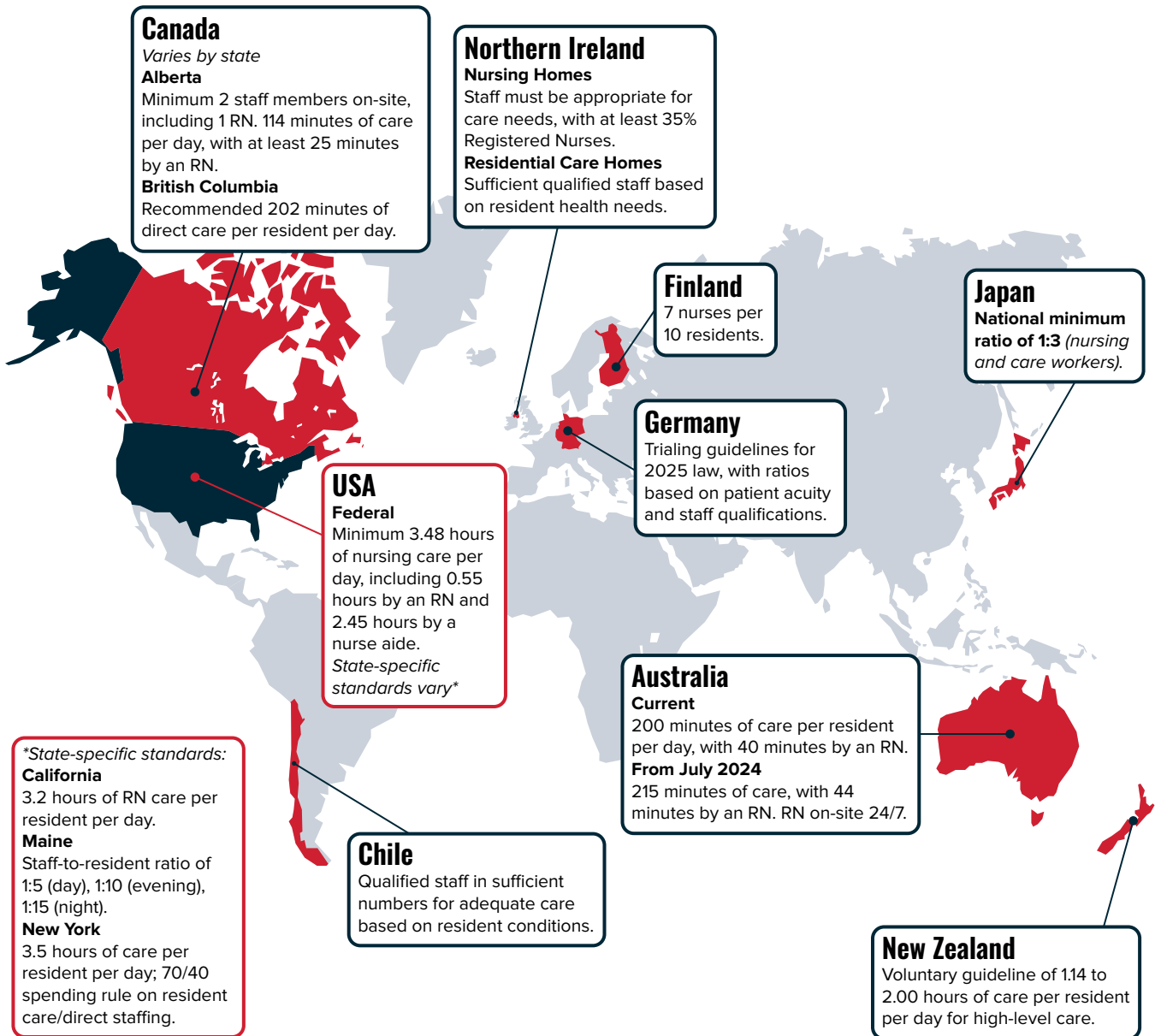
# HOSPITAL SAFE STAFFING STANDARDS EXAMPLES



## Korean Health Workers Strike

In July 2023, 64,000 members of the Korean Health and Medical Workers Union (KHMU) launched a nationwide strike, following failed negotiations with the government and employers. The strike, part of a broader initiative by the Korean Confederation of Trade Unions (KCTU), involved healthcare workers from 127 branches across Korea. The key demands included enforcing a nurse-to-patient ratio of 1:5, expanding public medical services, and a 10.7% wage increase for frontline workers. Despite earlier agreements with the government in 2021 and 2022 to improve working conditions, political shifts and the election of a Conservative President in 2022 hindered progress. The strike, despite being labelled illegal by the government, emphasized the critical need for systemic healthcare reforms in Korea.

# NURSING HOME SAFE STAFFING STANDARDS EXAMPLES



*“Last week I stayed back after my shift. As I was leaving through the corridor, and I found laying unconscious on the floor the only carer on the night shift. I started curing her... If I had left at a normal time, they might not have found her until the morning.”*

**Dorota**  
Nursing Home Cleaner



# ORGANIZING FOR SAFE STAFFING

Ratios save lives. That's why health and care workers, supported by their unions, are building collective power to advocate for and win safe staffing standards globally. These efforts have led to significant legislative victories, ensuring safer and more effective care environments.



*“There is not a lack of care workers, but there is a lack of workers wanting to work under current conditions in the care sector.”*

**Alan Sable**

*UNI Global Union’s Head for Care*



## Japan’s Approach to Combat Workplace Harassment

*In response to Japan’s aging population, the government has emphasized the need for a “community-based comprehensive care system” that includes stable staffing levels to support medical and daily life needs. To combat increasing incidents of workplace harassment, including physical and psychological violence, the Japanese Ministry of Health, Labour, and Welfare released a “Manual on Countermeasures against Harassment in the Workplace” in 2017. This manual, developed with unions, highlights poor staff-to-patient ratios as a major risk factor for harassment, recommending improved staffing levels to reduce one-on-one or one-to-many situations that could lead to such incidents.*



# 4 STEPS TO SAFE STAFFING



1

## Assess Current Staffing Levels

Evaluate the adequacy of current staffing against industry standards and patient needs.

## Engage Stakeholders

Collaborate with workers, patients, and families to gather support and raise awareness about the importance of safe staffing.

2



3

## Campaign for Change

Use collective actions, such as public campaigns, meetings with policymakers, and union-driven advocacy, to push for legislated staffing standards.

## Negotiate and Implement

Work through collective bargaining or legislative processes to establish and enforce safe staffing standards.

4



*“As a result of actually having the number of staff we have been fighting to get for years, we didn’t have one single fall or incident last night. We even managed to have breaks. And not be injured. Amazing what a difference proper staffing levels makes!”*

**Shannon**  
Aged Care Worker

# CONCLUSION

Safe staffing is not just about numbers; it's about ensuring quality care and protecting both patients and staff. Adequate staffing levels reduce the risk of burnout, improve job satisfaction, and most importantly, save lives. It is imperative for unions and workers to continue advocating for safe staffing to ensure that health and care workers can perform their duties effectively and safely.



## Useful Links for Further Reading:

- *ICN White Paper on Nurse Staffing Levels for Patient Safety and Workforce Safety*
- *Australian Residential Aged Care Staffing Levels Comparison*
- *Korea's Nurse Staffing Improvement Plan*
- *Nurse Staffing Levels For Patient Safety and Workforce Safety*
- *Health and care workforce in Europe: time to act*
- *Graying, graying, gone: Europe's deepening health care staffing crisis*
- *Years of lobbying pays off for long-term care workers as Ontario finally commits to four hours of care*



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