

NURSE STAFFING

INADEQUATE NURSE STAFFING AND POOR ORGANIZATIONAL SUPPORT AFFECT PATIENT SAFETY GLOBALLY

Source

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Objective

To examine in an international sample of hospitals the effects of nurse³ staffing and organizational support for nursing care on nurses' job dissatisfaction, nurse burnout and quality of patient care as reported by registered nurses (RNs).

Background

The public and health care providers have expressed concern about the impact of changes in the health care system on the quality of hospital care. Among the challenges being experienced in the hospital sector are escalating costs, bed reductions and closures, an increase in the complexity of patient needs and a shortage of nurses. Earlier research in magnet hospitals⁴ in the United States demonstrated the importance of organizational features in attracting and retaining nurses. Little is known about how organizational factors affect patient outcomes or what their impact is on both nurse and patient outcomes in countries whose health care systems are organized and financed differently.

Methods

- A multi-site cross-sectional study was conducted in adult acute care hospitals in one state of the United States, in two provinces in Canada, and in England and Scotland (United Kingdom).
- The sample included 10,319 RNs employed on medical and surgical units in 303 hospitals in the five jurisdictions.

¹ These authors represent the International Hospital Outcomes Research Consortium, which includes interdisciplinary research teams from the U.S., Canada, England, Scotland and Germany. Staffing skill mix is one of the variables in the conceptual model that guides the work of the consortium. The model addresses mechanisms by which organizational features of the hospital affect patient and nurse outcomes. The reader is encouraged to review reports of other studies conducted by the consortium.

² This research summary was prepared with the permission of Oxford University Press.

³ In this study, 'nurse' refers to registered nurses (RNs) in Canada and the U.S. and to employed nurses in Scotland, England and Germany working in direct patient care roles comparable to those held by RNs in North America.

⁴ For further information on magnet hospital designation, see the website of the American Nurses Credentialing Center (www.nursingworld.org/ancc).

- The RNs were surveyed by means of a self-administered questionnaire mailed to their homes.
- RNs were asked to provide details about the staff on the last shift they worked, including the number of patients they were assigned, and to rate whether particular aspects of organizational support were present in their current jobs.
- The outcome variables included nurses' satisfaction with their current jobs, burnout as indicated by reported level of emotional exhaustion, and nurses' assessment of the quality of care on their unit.

Principal Findings

This research article reports on the preliminary findings of the nurse survey, one component of the larger International Hospital Outcomes Study.

- In all five jurisdictions, 38.3 to 48.1 per cent of RNs reported job dissatisfaction, and 32.9 to 54.2 per cent said they experienced burnout.
- Approximately 10 to 30 per cent of RNs in all five jurisdictions rated the quality of care on their units and on their last shift as fair or poor.
- RNs in lower-staffed hospitals (where there were more patients assigned per nurse) were 1.3 times more likely to rate the quality of care as fair or poor, when the effect of organizational support was controlled, as those in higher staffed hospitals (fewer patients assigned per nurse).
- In hospitals with lower staffing and weak organizational support, RNs were three times more likely to report low quality care than RNs in hospitals with higher staffing and strong organizational support.
- RNs in Canada were, in general, more likely to report job dissatisfaction, burnout and poor quality of care on their last shift than nurses in the United Kingdom but less likely than nurses in the United States.
- RNs who perceived organizational support for nursing practice to be weak were twice as likely to report job dissatisfaction and burnout as those perceiving organizational support to be strong.

What do the Study Findings Mean?

- Adequate RN staffing is essential for producing good patient outcomes.
- RNs who work in quality practice environments are more likely to report higher quality of care.
- Quality practice environments are those with characteristics such as adequate staffing, good working relationships, nursing control of its own practice and adequate support services to allow nurses to spend time with their patients.
- Poor quality practice environments can negate the positive effects of good RN staffing.
- Health administrators and nurse leaders in Canada can learn from other countries about strategies for improving quality of care and increasing recruitment and retention of nurses.

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