



## Nurses Doing More with Less

“In New Zealand, how does understaffing and work environments affect Registered Nurses outcomes within a hospital setting?”.

### INTRODUCTION

Understaffing of Registered Nurses in Hospitals is a complicated ongoing issue that is leaving nurses experiencing negative outcomes due to excessive workloads and unsafe environments. Understaffing in nursing is often referred to as excessive workloads, high patient to nurse ratios, or high nurse hours per patient and these factors restrict nurses from completing required tasks during a shift (Glette, Aase & Wiig, 2017). In New Zealand, one DHB has implemented the Care Capacity Demand Management tool, leaving several hospitals suffering from serious unsafe staffing (Cassie, 2018).

### EVIDENCE AND FINDINGS

**Nurse Burnout**—Stress related to staffing issues were all associated with the three dimensions of burnout; emotional exhaustion, depersonalization and personal accomplishment (Khamisa, Oldenburg, Peltzer & Ilic, 2015).

**Job Satisfaction**—Nurses who experience excessive workloads become more exhausted, find it difficult to recover and lose satisfaction that comes with providing efficient and effective care. The ratio between patients and nurses and the work environment they're exposed to still have greater effects on the nurses outcome (McHugh & Ma, 2014).

**Job Retention**—By 2035, New Zealand will be faced with a major shortage of nurses due to the ageing workforce and population and 50% of the current nursing workforce will retire within this time (NZ College of Mental Health Nurses, 2014).

**Decreased Quality of Care**—Under staffing led to poor quality care where cares such as hygiene, skin care, documentation, mobilization and communication were missed or not prioritized due to insufficient time available during their shifts (Knutsen Glette, Aase, & Wiig, 2017).

### IMPLICATIONS & RECOMMENDATIONS

- Nurses have limited time to give patient centred care.
- High job dissatisfaction and intention to leave their job.

#### Free nurses from non-nursing work :

This will allow nurses to achieve outcomes and focus on delivering high quality patient centred care. Reducing stressful workloads will help by decreasing nurse burnout, job dissatisfaction and improve nurse's wellbeing (Khamisa, Oldenburg, Peltzer & Ilic, 2015).

#### Increase employment recruitment:

With the predicted increase in demand for health care by 2035, the supply of nurses must replace the increasing numbers of nurses who are retiring and meet the extra demand for nurses as a result of population changes (Nursing Council of New Zealand, 2013).

### CONCLUSION

With New Zealand's population and ageing workforce increasing, it's important for recruitment and training to keep the level of staffing adequate to provide safe care. The literature iterates that nurses are struggling with the outcomes from understaffing which is affecting their health, wellbeing and ability to provide high quality care.

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By Amber Priddle



SUMMARY:

I have decided to present my evidence-based literature in the form of a poster. Using a poster to summarise key points is an effective and visual way of making the audience aware of my chosen clinical issue. I used a colour scheme, font sizes and framing of information to enhance key points and make it easier for the reader to read (Ilic & Rowe, 2013). Using a poster to display my evidence also allows me to provide an interactive environment and has success in increasing knowledge, changing the viewer’s attitudes and actions (Ilic & Rowe, 2013). Research identified that information on the poster needed to be supplemented by an oral presentation or the author’s presence, to further communicate the context (Ilic & Rowe, 2009). I will be able to do this at the evidence-based practice forum. By displaying my work in a poster, this will allow readers to identify understaffing as a serious issue and potentially encourage them to do further research to make a positive change for both nurses and student nurses.

PECOT TABLE:

PECOT	Information relating to question	Explanation
Population	Registered Nurses	I selected Registered Nurses as the population because they are exposed to understaffing frequently during their career. I decided to choose registered nurses instead of patients because improving nurse outcomes contributes immensely to patient outcomes (McHugh, Kutney-Lee, Cimiotti, Sloane & Aiken, 2011).
Exposure (Intervention)	Understaffing in a hospital setting	As understaffing is a huge topical issue in New Zealand, I will look for articles that show common themes as a result from understaffing. I have chosen the hospital as a broader clinical area as understaffing occurs in different wards and units requiring different needs.
Comparison (Control)	Compare between nurses working in understaffed area and nurses working in appropriately staffed areas. I will also compare the outcomes evidenced in other countries compared to New Zealand.	Comparing understaffing to appropriate staffed clinical areas will allow me to find articles that express the outcomes on nurses and the interventions in well-staffed areas to see what difference it makes. Because there is a lack of research in New Zealand, I used research from other countries to compare but New Zealand’s evidence based safe staffing strategies use overseas evidence in their research (McKelvie, 2016).
Outcome	The outcome of my research will identify the outcomes associated with understaffed nurses and what needs to implemented to reduce these outcomes.	Evidence suggests that by improving understaffing and work environments in hospital settings, this will improve nurse outcomes and wellbeing (Khamisa, Oldenburg, Peltzer & Ilic, 2015).
Time	N/A	With this clinical issue, time is not applicable. There is no time frame for when understaffing will be reduced as the implementation of models in New Zealand haven’t progressed and understaffing has been an issue within the nursing workforce for over a decade (Cassie, 2018).

(Schneider, Whitehead, LoBiondo-Wood & Haber, 2014, p79).

Using this PECOT template I have formulated a research question: “In New Zealand, how does understaffing and work environments affect Registered Nurses outcomes within a hospital setting?”.

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