Nurse to Patient Ratios: Can we do better?

Introduction

New Zealand nurses are under pressure and it is worsening as the population increases and is simultaneously aging. We are facing a major nursing shortage with Nursing Council of New Zealand estimating that New Zealand will be 15,000 nurses short in 2035 (2013). Currently nurses are fighting for increased pay with rallies across New Zealand and talks of strikes, as well as creating public social media platforms that share the stories of New Zealand nurses who have had enough of the current working conditions they face. Understaffed, underpaid, and unheard, it begs to raise the question, how is this effecting the public who come to us in their time of need.

What is the issue?

The number of patient to nursing ratios influences the outcomes of patient post operatively who have been on a surgical ward. The more patients to nurses, the higher prevalence's of post-operative complications occur.

Missed Nursing Care (MNC)

MNC is defined as a task that is delayed, partially completed or missed which can be caused by prioritizing, belief systems of the nurse, the working environment and access to other staff and work equipment.

MNC is attributed to mortality: a study conducted that involved 422,1730 surgical patients, 26,516 registered nurses across 300 hospitals from 9 countries found that each additional patient per nurse ratio is associated with an 7% increase in the odds of a patient dying within 30 days of admission each 10% of missed care is associated with 16% increase of the chance of a patient dying within 30 days of admission.(Ball & ETAL, 2018)

MNC is influenced by registered nurse staffing levels: studies that looked into RN staffing levels and MNC showed that RN staffing levels influences nursing cares that are missed. When RN staff was reduced, Increased MNC were noted. Thus in turn placing higher risks on venerable patients. (Ball & ETAL, 2018, Kalisch, Tschannen & Hee Lee, 2011)

We need registered nurses: A study across 108 surgical wards from 30 hospitals showed that reducing RN staff and replacing with less qualified staff to reduce costs can also jeopardise patients outcomes. By creating unsafe environments for staff and patients.(Kirwan, Matthews, & Scott 2013)

Lower RN staff are associated to higher readmission rates: In America, an Hospital Readmissions Reduction Program (HRRP) has been introduced to reduce readmissions. Hospitals are penalized based on readmission rates. If readmission rates post 30 days of discharge are low, hospitals are less likely to be penalized. Studies showed the correlation between higher nursing staff with lower odds of readmissions penalties in comparison to hospitals with lower nursing staff. (Berez, McHugh, Small 2015, Desai, Ross & Kwon, 2016)

Recommendations:

With the aim to provide health care to health consumers in New Zealand that promotes safety and increase positive health outcomes I would recommend:

- Mandating lower patients to nurses ratios, this can be achieved by reducing patients on wards or increasing RN nursing staff and making more RN staff available on the bureau
- Better incentives for people to become Registered nurses, this can be achieved by increasing wages and having safer working environments
- Nursing Council work with DHB's to make clear policies that protect Registered nursing staff from working in unsafe environments, specifically the workload nurses have, with this information being clearly stated in a public format
- Using funding as an incentive to promote health outcomes across New Zealand

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PECOT (Whitehead, 2013)	Information relating to question	explanation
Population	Patients post op who receive care from registered nurses	Patients post operatively are definitely going to be under the care of a team, mainly registered nurses. Therefore, results of care will reflect in the outcomes of
Exposure (Intervention)	Patients who have nurses with a lower ratio of patients to nurses and their health outcome (specifically if deemed a successful recovery)	these patients The aim of this research question is to identify outcomes of patients when using services with registered nurses who have high workloads in a post-surgical setting
Comparison	Patients who have nurses with a higher ratio of patients to nurses and their health out come	The comparison group will indicate if higher nursing staff and/or lower ratios of patients to nurses will positively influence patients outcomes
Outcomes	Having a lower patient to nurse ratio will increase the chance of a better recovery for patients post operatively	Comparing the two groups will indicate the positive effects of increasing nursing staff and/or lowering nurse patient ratios
Time	Post operatively and discharge	As the effects may be known after discharge, some time after discharge needs to be considered.

Summary:

I choose to discuss nursing ratio's as it was one identified area that nurses usually would complain about during clinical times. Nurses often seemed frustrated at the beginning of shifts when they realized they were understaffed as it meant they were required to pick up the extra work and in most cases, they could not disagree because they were expected to do their job. This type of environment is unsafe for nurses and patients short term and long term. Also, the current climate around health care provision with nurses and midwifes also heavily influenced my choice in topic. Overworked and underpaid nurses are feeling the pressure of the future of nursing in New Zealand which, personally, is hard to ignore as a student nurse in my graduating year.

I decided to convey the results of my research as a poster format as it great communicative way to carry a message to a wide audience. An effective poster can provide a summary of ideas that can begin a conversation across many people (Price, 2011). I also had to keep in mind that I wanted to convey a message regarding the issues that nurses face which is currently a very public topic. I wanted to add research and recommend ideas that could help elevate these issues without adding 'fuel to the fire'. Essentially, we need registered nurses for our growing and aging population, that aren't burnt out, if we are going to succeed in providing safe and productive health care across New Zealand.

References

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