

Nursing Shortages in Healthcare

Final Action Plan

Jerome Cunnigham

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Instructor: Dr. Warner

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Introduction

Nursing Shortage is not a new issue and is recognized as a global problem. Since 2001, many countries have been concerned about the worldwide growth of nursing shortage (Buchan, 2002). Many solutions have been tried to improve the situation. Nevertheless, the issue remains largely unresolved. The 2020 State of the World's Nursing report announced that the global nursing workforce was approximately 28 million. The global shortfall was around 6 million, and it will reach 10.6 million by 2030 (WHO, 2020). Zhang et al. (2018) forecast that a shortage of registered nurses (RNs) in the U.S. will be roughly 154,000 RNs by 2020 and 510,000 RNs by 2030. Moreover, it will spread across the country, and 37 out of 50 states will be facing significant nursing shortages by 2030.

The American Association of Colleges of Nursing has argued (2017) that the main factors influencing the nursing shortage include:

1. The growth in the projected demand for Registered Nurses (RN) is not met by a corresponding growth in Nursing school enrollment.
2. Nursing school enrollment is constrained by a shortage of faculty.
3. The median age of the nursing workforce is 45. A significant portion will be retiring soon.
4. An aging population will require a significant increase in the nursing workforce.
5. Insufficient staffing increases the workload for the existing staff, causing stress and job dissatisfaction and pushing many nurses to leave the profession.
6. High retirement and turnover rates.

Exacerbating an already difficult situation, the pandemic has led to one of the worst recessions in recent memory and thus dramatically increased the impact of cyclical workforce shortage in healthcare. In January 2022, the U.S News and World Report (<https://www.usnews.com>) reported that the number of hospitalizations in New Jersey hospitals and long-term healthcare facilities had climbed by nearly 60%. The New Jersey Hospital Association's survey demonstrated that 70% of the New Jersey state's hospitals are on the extent of the worker shortage. The vacancy rate of RNs increased from approximately 8% to 13% in 2021 (New Jersey Hospital Association, 2022). Due to the pandemic, the global number of nurses leaving the profession has increased by 20% (The International Council of Nurses, 2020).

The nursing profession is a key component of the healthcare service. They not only take care of patients but also play a vital role in advocating for health awareness, educating patients and the public on preventing injuries and illnesses, participating in rehabilitation, and providing general care and support to society (Freeman, 2021). Therefore, the nursing shortage is a growing problem undermining healthcare quality. It created substantial difficulties in delivering safe and effective healthcare services for citizens. Furthermore, the workload has a significant impact on nurses' well-being that can lead to the reason for leaving, which worsens the problem.

It becomes a challenging question for us in human resources management. What strategies will we use for recruiting and retaining nurses? How will we improve the work environment to increase job satisfaction, and relieve stress and burnout experiences?

Burnout & Family Leave

To answer the questions above, we must first consider the root causes of the nurse shortages. Nurses are the lifelines of our society. In the healthcare industry, they consist of the largest section. Although they play a big role in society, growing shortages within the field are a cause for concern. It affects the industry on a macro level (within the U.S and worldwide) and on a micro-level (individual experiences). As reported in the AACN nurse shortages grew from 40,000 in 2010 to 80,000 in 2020. It began in the early 1900s and heightened during the pandemic. There are several factors that lead to staff shortages in the nursing field. This paper will highlight three factors: burnout, family leave, and job satisfaction, which are major contributors to the shortages.

Burnout is a constant and intensified feeling of stress and being overwhelmed. It impacts a person's quality of life, leads to a loss of productivity in the workplace, and increases patient care errors. Nurses work around the clock and are usually on their feet for hours. It is reported that they work anywhere from eight to ten-hour shifts 3 or 4 days per week. And sometimes they take on extra shifts to compensate for staffing issues. Working long hours can be very taxing on them emotionally as well as physically. They usually work nights, weekends and on holidays. They are expected to work on short notice and must be on call, always. According to the CDC nurses that worked over 12.5 hours struggled to stay awake at work and it also increased patient care errors. Another study showed that nurses who work longer hours or while they were sick came from hospitals that had a higher patient mortality rate. They also experience emotional strain from their workplace and toxic environments. In a 2017 study, Jordanian nurses reported high levels of emotional exhaustion from being abused at work.

Their job takes a toll on them emotionally caring for their sick patients and dealing with deaths frequently. On top of the emotional and verbal distress from their patients, they are often victims of physical abuse too. Some nurses report caring for difficult patients that question every decision they make. Nurses also state they experience verbal abuse and a lack of appreciation from other healthcare professionals. If not corrected, burnout can lead to loss of motivation which is bad for nurses,

Another contributor to nurse shortages is family leave. The field of nursing is predominantly female. The 2019 American Community survey states that over 300,000 nurses are male and over 2 million nurses are female. Women in their childbearing years often leave to care for their young children or reduce the amount of time spent in their profession. In a 2013 Pew research study, 42% of mothers reduced their working hours to care for a child compared to 28% of fathers who did the same thing (Parker, 2020). Shortages are also affecting hospitals in different countries. In east England, a cancer hospital had to suspend chemotherapy due to a lack of nurses. And maternity leave was one of the reasons for the shortage. In Ireland, 44% of nurse shortages are due to family commitments. The data presented shows that there still needs to be a revision of healthcare reform to mitigate these concerns.

Job Satisfaction

There are several factors that attract individuals to the nursing field. Often one's desire to serve and care for others leads them to healthcare. However, the systems in place often discourage people from continuing in the profession. To reduce nursing shortages, the entire healthcare system must be reformed in the policies and procedures put in place to support the

nursing field. “The nursing shortage is a problem that is being experienced worldwide. It is a problem that, left unresolved, could have a serious impact on the or the profession is imperative if efforts to increase retention are to be successful” (Chan et al., 2012). There are organizational and individual factors that are causes of the nursing shortage that the healthcare sector is facing. “From a career perspective, nurses’ tendency to leave is related to their overall level of job satisfaction” (Chan et al., 2012). Stress, overwork, and non-supportive work environments lead to job dissatisfaction. “Job satisfaction is defined as the degree to which employees enjoy their jobs” (Mrayyan, 2005). “About 68% of nurses currently working in the field reported low morale in the workplace” (Andrews & Dziegielewski, 2005). Moreover, “nurses with higher average patient loads were more likely to report an intention to leave their current position” (Chan et al., 2012). The workload assigned to nurses often leaves them feeling under-supported and fatigued. In healthcare, the distribution of the workload for nurses is an area of weakness for the sector.

Potential Solutions

In the healthcare sector patients have a full clinical team and nurses are the professionals, who spend the most time with patients, nursing them back to health. With the nursing shortage being at an all-time high globally, it is difficult and affects the United States the most, since the US has the most advanced and extensive nursing system compared to China (Yun et al., 2010). The United States needs one million-plus nurses to fill the nursing gap. Health care workers have faced a working environment with poor work conditions. In their textbook, Berman et al. (2016) state that “People are assets whose value can be enhanced through

investment". Thus, we developed an intervention plan, comprising three steps to mitigate nursing staff shortages.

Action Plan

The first step is to incorporate nursing residency programs into recruitment packages. Through the nursing residency, the public hospitals will hire qualified candidates from schools. The residency program will consist of mentorship, professional development, and clinical experience. In addition, a \$4,000 sign-on bonus will be provided for all students who have graduated. The nursing students would be eager to attend the program knowing they will have a job when they graduate. Stipulations of tuition reimbursement would be written in the employee-friendly policies, stating that after five years of service the corporation would forgive the employees' tuition. If the nursing candidate leaves the job before the five-year contract is matured, they would be responsible for their entire tuition. The following program and contract should also have a continuum of educational training with a minimal financial burden on the staff member. This is our first action item because a large portion of nurses are approaching retirement. It is essential for the public sector to focus efforts on recruitment. Collaboration between schools and public hospitals will help to promote nursing careers to prospective students. This residency program will provide an opportunity for positive anecdotes to be shared and clinical experience within the field. The hope is that the installment of residency programs will create a student to career pipeline for the public sector. After the first two years, the enrollment data will be analyzed to draw conclusions as to whether there is an increase or

decrease between both years. This data will aid us in measuring the efficacy of the residency programs. Furthermore, satisfaction surveys will be distributed to students within the program after the first and last quarter.

The second action item to reduce the nursing shortage, is to create hiring packages that consist of mental health accessibility. This would include the accrual of mental health days. Human Resource will implement the accrual of two extra days a quarter for mental health days use, as the employee sees fit for self-care. The goal is for employees to use mental health days to rejuvenate themselves over the year. To ensure employees take the time accrued, they will not be able to carry these days over to the following year. Mental health days are encouraged for nurses to take since they work under a lot of stress and up to 12 hours a day with several hours straight on their feet. We believe this will help to foster a positive culture and climate within the work environment. Human resource management will run a report every six months to evaluate the use of the days.

Lastly, the public sector must find a way to compete with private agencies that employ nurses at a higher pay rate. We cannot avoid speaking of salary requirements in the package. Other places globally are controlling what agencies can pay their nurses, so they still have a competing edge in the market for hiring individuals for longevity (Yun et al., 2010). Pay equality will create an equitable environment, encouraging nurses to stay in a job longer. China ensures that the temporary nurses that come into the hospital to work are not contracted at a rate higher than the nurses on staff. The working environment must create a culture within the organization that encourages nurses to work in the public sector. Through these measures, the goal is to improve the public sector's culture and enhance employee-friendly policies for the

nursing staff. Human Resource Management and the Chief Financial Officer will be responsible for implementing this action item. Every three months human resources will pull a report on the number of staff that resign. In addition, human resources will analyze data from exit surveys to verify if the pay is a key factor in staff resignations. This will help to improve the strategy of equalizing the pay rate between the private and public sector.

Conclusion

To conclude, the nursing shortage is a challenge we are currently facing. However, we plan on turning this around by improving the image of the public sector and showing employees that we are invested in the staff's well-being. Consistent visibility and involvement from senior leadership, creates a positive working environment for the nursing field. Closing the gap with the right chemistry of incentives and selfcare makes for the right recipe to ensure the nursing industry will once again be in abundance and motivated to take care of the sick. Being innovative when faced with a crisis is always key to combating an issue.

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