



July 11, 2005

Memorandum

To: Massachusetts Nurses Association

Fr: Chris Anderson

Re: Survey of Massachusetts Registered Nurses

This memorandum reports the main findings of a recent telephone survey of 400 Massachusetts registered nurses. Interviews were conducted between the dates of June 29 - 30, and July 5 - 6, 2005. Survey respondents were randomly selected from a complete file of the approximately 85,000 nurses registered with the Massachusetts Board of Registration in Nursing who are currently living in the state. The results can be assumed to be representative of these 85,000 individuals to within ± 4.9 percent at a 95% confidence interval. *It should be stressed that the survey results represent the opinions of all registered nurses in the state, not just MNA members—fully 67% of nurses interviewed are not MNA members.*

Overview

Little has changed since ODC last surveyed registered nurses in 2003—most nurses continue to report that the quality of patient care in Massachusetts hospitals is suffering due to RNs being forced to care for too many patients at once, causing an alarming number of negative outcomes for patients. In several key areas we found an increased number of negative patient outcomes as a result of understaffing, including medical errors and death.

Registered nurses rate understaffing of RNs in acute care units as the single biggest problem facing the profession, which directly affects patient care. Nurses rate establishing nurse-to-patient ratios as the best solution to the problem. When asked which is a better solution to the nurse staffing issue—establishing ratios, or requiring hospitals to post and report staffing plans—nurses select the establishment of ratios by more than a 40-percent margin.

The state of nursing and patient care

Short staffing is by far the most frequently mentioned item when nurses are asked to name to biggest problem in Massachusetts hospitals directly affecting the quality of patient care.

- Over 6-in-10 nurses volunteer short staffing as the biggest problem in Massachusetts hospitals affecting patient care.

- The next most frequently mentioned item is insurance reimbursements/restraints, mentioned by just 11% of nurses.

Nurses report multiple problems for patients and the profession of nursing as a result of understaffing, including a decreased quality of care for patients, and burnout among acute care nurses. As we found in 2003, nurses report a wide range of specific negative patient outcomes as a result of understaffing—including death. Since 2003, there has been virtually no sign of improvement in the quality of care as measured by specific patient outcomes, and in several key areas we recorded deterioration.

- 77% of RNs are aware of medical errors, such as improper medication, as a result of nurses caring for too many patients at once—up from 67% in 2003.
- 68% are aware of complications or other problems for a patient, up from 64%.
- 59% are aware of re-admission for a patient, up from 54%.
- 34% are aware of a patient’s death as a result of nurses being forced to take care of too many patients at once, up from 29% in 2003.

The same circular dynamic we found in our 2003 survey is still in full effect—patient care is suffering because of understaffing, and nurses are leaving the bedside because of the understaffing.

- 90% of RNs agree that the quality of patient care in Massachusetts hospitals is suffering because there are not enough registered nurses working in the hospitals.
- 89% of RNs agree that nurses are leaving the profession because they are burned out from high patient loads.
- Among nurses who stopped working in an acute care setting, short staffing is the number one reason cited for leaving the bedside—37%.

Solutions to the nurse staffing issue

Nurses were asked the rate ten different possible solutions to the nurse staffing issue on a scale of one to seven, with one representing “not effective at all”, and seven representing “very effective.” Establishing nurse-to-patient ratios is the top rated solution—well ahead of other possible solutions such as higher salaries, elimination of mandatory overtime, and requiring hospitals to post a nurse staffing plan.

- 54% rate regulating nurse-to-patient ratios as a “very effective” solution to the nurse staffing issue, followed by providing flexible scheduling programs (50%), increasing salaries (42%), and scholarship forgiveness programs (40%).

- When asked which of the ten possible solutions would be the single best approach to solving the nurse staffing issue, nurse-to-patient ratios top the list (44%), followed by increasing salaries (19%), and flexible scheduling programs (12%).
- Just 2% of nurses think that requiring hospitals to post nurse staffing plans is the best solution to the nurse staffing issue.

Support for legislation

After hearing descriptions of the two legislative proposals for addressing the nurse staffing issue, RNs were asked which they believed was the best approach. By an overwhelming margin, RNs think establishing nurse-to-patient ratios is a better approach than requiring hospitals to post staffing plans.

- 68% of RNs favor establishing ratios, while just 25% favor requiring hospitals to post staffing plans.
- Support for ratios is by no means limited to MNA members—fully 63% of RNs who are not MNA members support ratios, while just 26% of non-members support the posting and reporting plan.

Nearly two-thirds (64%) of nurses not currently working in an acute care setting say they would consider returning to the bedside if legislation is passed establishing nurse to patient ratios. This suggests that not only would establishing ratios immediately improve the quality of patient care, but ratios would also increase the pool of nurses willing to work in acute care settings.