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To: Nevada State Legislature Assembly Health and Human Services Committee

From: Lisa Black, BSN, RN; Executive Director, Nevada Nurses Association

Date: April 2, 2003

Regarding: Assembly Bill 313

Good afternoon Madam Chair and Members of the Assembly Health and Human Services Committee. For the record, my name is Lisa Black. I am a Registered Nurse and the Executive Director of the Nevada Nurses Association. On behalf of the Nevada Nurses Association, I would like to thank you for the opportunity to present to you this afternoon on this very important topic.

For the past several years, we have been talking about the need to address inadequate RN staffing in the hospital setting as a step toward ensuring patient safety. Multiple research studies have demonstrated that the safety and quality of care provided in the nation's health care facilities is directly related to the number and skill mix of direct care nursing staff. More than a decade of research shows that nurse staffing levels and skill mix do make a difference in the outcomes of patients. We have submitted detailed written testimony to the committee for review, so in the interest of time, I will not go into significant detail on the multitude of studies that have examined this issue, but will provide just a brief overview of the pertinent findings. In short, studies by four U.S. Health and Human Services agencies have found strong and consistent evidence that increased Registered Nurse staffing is directly related to decreases in the incidence of urinary tract infections, pneumonia, shock, upper gastrointestinal bleeding, and decreased hospital length of stay.

An October 2002 study published in the Journal of the American Medical Association (JAMA) found that Registered Nurse staffing levels have a significant effect on preventable hospital deaths among surgical patients. According to researchers, the odds of patient dying after surgery rose 7 percent for every additional patient added to the average nurse's workload. This study from the University of Pennsylvania affirms the critical role Registered Nurses play in patient safety when able to make direct assessments and life-saving interventions. This article also reported that RN patient load had a direct impact on nurse retention rates. Adding one patient-per-nurse to a hospital's staffing level increased nurse burnout by 23 percent and job dissatisfaction by 15 percent. These data further indicate that more than 40 percent of nurses who reported high burnout and job dissatisfaction intended to leave their job within the next year.

A 2002 study by the Joint Commission on Accreditation of Health Organizations (JCAHO) showed that almost 25% of patient deaths and serious injuries reported to them by hospitals in the last five years were directly related to inadequate nurse staffing levels. Another 2002 study by Health Insight, Nevada's contracted Medicare peer review organization conducted a study of medication errors in Nevada and Utah. Over 70% of the respondents were nurses. This study showed that 60% had observed at least one stage of a medication error during the last month. It included a comment section allowing respondents to describe what they felt contributed to the error. Responses included descriptions of time pressures, excessive workloads, and communication breakdowns. A 2003 study conducted by the National Council of State Boards of Nursing studied new nursing graduates who had been practicing for six months to determine workplace factors that contribute to medical errors. Seventy percent of these new Registered Nurses cited inadequate staffing as the primary contributing factor to medical errors in the workplace.

Additionally, a recent American Nurses Association survey revealed that 75 percent of nurses feel that the quality of nursing care at the facility in which they work has declined over the past two years. Sixty-eight

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percent of the nurses surveyed cited inadequate staffing as a major contributing factor to the decline in the quality of care. More than half of the respondents believed that the time they have available for patient care has decreased.

In short, the aforementioned offers compelling evidence that nurse staffing remains a significant problem in our health care facilities. Adequate staffing levels allow nurses the time that they need to make patient assessments, complete nursing tasks, respond to health care emergencies, and provide the level of care that their patients deserve. Enhanced communication creates a situation whereby nurses are empowered to provide quality care. Both increase nurse satisfaction and reduce nursing turnover.

As you will hear, there are many in the health care industry who do not feel it is appropriate to legislatively dictate issues such as Registered Nurse staffing. Multiple other options have been sought and, regrettably, have consistently failed. Many of the same people who will come before you today, also participated with the Nevada State Health Division four years ago to promulgate regulations that require nurse-staffing levels to be based on patient acuity as measured by a direct care Registered Nurse. Many different perspectives can be offered as justification or rationalization as to why, but the bottom line is that these regulations have not adequately improved nurse staffing in Nevada's hospitals and have done little, if anything, to improve patient safety. Current work force shortages stem, in large part, from workplace trends over the past decade. It should be noted that despite the industry's claim of market pressures, hospital profits more than doubled between 1986 and 1996 according to data from the American Hospital Association. In 1997, however, new Medicare prospective payment systems and increased cost savings measures instituted by the managed care industry exerted downward pressures on reimbursements. Following implementation of these cost saving measures, providers eagerly sought out and implemented programs designed to reduce expenditures. New models of health care delivery were implemented, and highly trained, experienced - and therefore higher paid - Registered Nurses were replaced by less expensive and most often unlicensed ancillary staff. Through these shortsighted methods, the industry has contributed significantly to the crisis we all now face. Now, it is time for all of us to fix the problem we have created. Doing that is not going to be easy, but to ensure the health of Nevada, it must be done.

We do recognize, however, that addressing and remediating this issue is truly a monumental task and that it may, quite possibly be beyond the scope of this committee to fully address this issue during this session given the confines of an intense 120-day session. We would ask of you that this issue be commissioned for study by the interim health care committee of this elected body so that it can be adequately and thoughtfully deliberated and sound solutions can be achieved to ensure the future of Nevada's nursing workforce. Truly, nursing in Nevada is in critical condition and we must act thoughtfully, deliberately, and decisively to stem the flow of nurses from the profession and to ensure the safety of all Nevadans in need of nursing care.

The nursing shortage we now face will remain and will likely worsen if adequate steps are not taken to address it from multiple angles. Changes in the workplace must be addressed simultaneously with any effort to recruit nurses into the profession. The profession of nursing will be unable to compete with the myriad of other career opportunities available in today's economy unless we improve working conditions simultaneously with recruiting new nurses. That means that we must address the concerns of Registered Nurses practicing at the bedside. Registered nurses, hospital administrators, other health care providers, health system planners, consumers, and the legislative community must come together in a meaningful way to create a system that supports quality patient care and all health care providers.

The Nevada Nurses Association looks forward to working with you and others to make the current health care environment conducive to high quality nursing care. Improvements in the environment of nursing care, combined with aggressive and innovative recruitment efforts will help avert the potentially catastrophic consequences of this very real nursing crisis. The resulting stable nursing workforce will improve health care for all Nevadans.