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Introduction

taffing for nursing professionals is in the midst of a shortage, one that's been going on for decades.

These shortages are impacting the business operations of many hospitals and healthcare facilities, especially during adverse events. Nursing professionals' main responsibility is their patients' well-being, from communicating with doctors, running tests and updating charts to changing IVs and administering medications. Their jobs don't stop with their patients; it extends to their patients' families by allaying concerns and offering comfort. And it becomes more challenging when a flu outbreak happens or severe weather hits a community.

Hospitals and healthcare facilities must maintain continuity of operations during a public health emergency or a disaster. Having adequate nursing personnel during and after these events is critical to meet the increased healthcare demands, as well as ensure the continuity of patients' care and safety. When these emergencies strike a community, staff may not only be responding to an event, but may also have been impacted. Nursing professionals may struggle with their dual responsibilities, affecting their ability and willingness to go to work.



Healthcare organizations need to ensure there's enough staffing to mount an effective response to an emergency or disaster, as well as for recovery. That responsibility likely rests with emergency managers, who need to find an emergency notification system that communicates with the entire organization, informs them about what's happening and what steps to take, and make sure that staffing needs are met.



The Staffing Burden

his shortage of nursing professionals, which include registered nurses (RNs), licensed practical nurses (LPNs), nurse practitioners (NPs), advanced practice registered nurses (APRNs) and home health aides, is expected to reach epidemic proportions in the coming years, according to numerous reports. The influx of patients into the healthcare system, the retirement of baby boomers, more patients experiencing age-related and chronic conditions, an aging nursing workforce, and educational bottlenecks are creating a nursing shortfall.

The nursing sector makes up the largest part of the healthcare industry, and there are currently <u>3.9</u> <u>million</u> nurses in the U.S. Nursing employment opportunities will grow at a faster rate (15 percent) than any other occupation from 2016 to 2026, according to the Bureau of Labor Statistics (BLS).

Though there will be more opportunity for career development, there's a gap about the number of nursing professionals available. More than 1 million new registered nurses will be needed by 2022 to fulfill healthcare needs in the U.S., according to the American Nurses Association (ANA).



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Other positions in the nursing profession are also expected to have staff shortages. A recent study by Mercer, a global healthcare staffing consultant, reports that there will be a deficit of home health aides (446,300) and a combined shortage of nursing assistants and nurse practitioners (125,000) by 2025.

Compounding the problem is nursing school enrollment isn't growing fast enough to meet the projected demands for nursing professionals. Nursing schools in 2017 turned away more than 56,000 qualified applicants from undergraduate nursing programs because there were not enough

openings, ANA reports. For the last decade, these schools annually reject about 30,000 qualified applicants. And nursing schools are struggling to hire more qualified teachers; the annual national faculty vacancy rate is more than 7 percent.

Various reports found that the majority of registered nurses, who are currently employed either full-time or part-time, range in age from 45 to 50. There are currently about <u>1 million registered nurses older than 50</u>, so one-third of the workforce will reach retirement age in the next 10 to 15 years.



Complex Care

he nation's population continues to age. The U.S. has a higher number of Americans over the age of 65 than ever before, and that amount is expected to steadily grow. Americans 65 and older will total 71 million in 2019, up from 41 million in 2014. The last of the baby boomer generation will reach retirement age in 2029.

As the number of older adults grow, there will be an increased need for geriatric care. Three in four Americans aged 65 and older have multiple chronic conditions, such as hypertension and arthritis.

Meanwhile, more individuals have health insurance through the Affordable Care Act and Medicaid expansion, resulting in more people seeking care.

Patients are waiting an average of 24 days to schedule an appointment with a doctor, according to a survey by Merritt Hawkins, a unit of healthcare staffing firm AMN Healthcare.



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All of this is impacting nursing professionals who work in the field. As more nurses retire and fewer nurses enter the workforce, the work is piling up for those still practicing.

Nursing professionals typically either work three 12-hour shifts weekly or five 8-hour shifts. Work-related illness and injuries to these employees are even greater than those who work in manufacturing and construction. One in five nonfatal occupational injuries occurred among



healthcare workers, according to a report by the <u>Centers for Disease Control and Prevention (CDC)</u>. In one year alone, 66,910 cases of occupational musculoskeletal disorders (MSDs) were reported among healthcare workers.

MSD-related injuries are common with nurses, nursing aides and other related positions. Sprains and strains are the most often reported injuries, while shoulders and lower back are the most affected body parts. The BLS reports there are more than 35,000 back injuries among nursing professionals every year. These injuries are common from lifting patients without enough assistance. Nurses lift the equivalent of 1.8 tons every eight hours.

And there's a cost for these injuries, both financially and emotionally. Back injuries in the healthcare industry are estimated to total more than \$7 billion every year. The direct and indirect costs associated only with back injuries are estimated to be \$20 billion annually. These injuries are also costly in terms of chronic pain, absenteeism and turnover, as well higher employer expenditures due to medical expenses, disability compensation and litigation. Nursing professionals may be less productive and attentive, as well as less likely to effectively care for their patients.

Workplace violence is also having an impact on the nursing profession. Patients may have complex physical, psychological, psychiatric and social needs and may strike out at a nursing professional. Over an 11-year period, the rate of serious workplace violence incidents (those requiring days off for an injured worker to recover) was <u>four times greater</u> in the healthcare industry compared to the private industry.

The shortage is fueling burnout and frustration among nursing professionals, causing an increase in turnover rates. Some burnout symptoms include chronic fatigue, insomnia, headaches, back pain, depression, weight gain and high blood pressure. About 20 percent of nurses who leave direct patient care do so because of the work-related risks.

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The turnover is also resulting in practitioner and patient dissatisfaction, as well as negative patient outcomes, such as higher readmissions, medication errors and increased patient mortality.

Some states are using various methods to address the nurse staffing shortage. Fourteen states currently address the nurse staffing in hospitals through laws and regulations: California, Connecticut, Illinois, Massachusetts, Minnesota, Nevada, New Jersey, New York, Ohio, Oregon, Rhode Island, Texas, Vermont and Washington. California is the only state that requires a minimum nurse-to-patient ratio maintained at all times by any hospital unit. Massachusetts' law mandates ICUs to have a 1:1 or 1:2 nurse-to-patient ratio, depending on the patient's stability.



Rising to Extreme Challenges



he pressure increases when an emergency or an adverse event occurs.

When a hurricane, blizzard or another emergency strikes a hospital,
nursing professionals may experience burnout from working very long
and intense shifts.

They're continuing patient care, though at the same time nursing professionals may be concerned with their own essential accommodations, such as finding daycare and pet shelter assistance. Hospitals offer on-site accommodations to make it easier for staff to remain throughout the event.

In some cases, hospitals may split up medical staff, including nursing professionals, into teams. For example, one team might already be in place when an adverse event occurs. Another team also might be at the hospital, going into action to relieve the other group when it's necessary.



The Evolution of Staffing

he managers of these nursing professionals know there's a problem with the staffing shortage and are looking at ways to solve it.

Ninety-four percent of nurse supervisors report that scheduling and staffing problems negatively impact the morale of their staff, according to an <u>Avantas survey</u>. Other findings in the survey include:

 Nearly 70 percent of survey respondents say they're concerned about the effects of nurse scheduling and staffing problems on the patient experience and satisfaction



- More than half are very concerned about the impact on the quality of care. Nurse fatigue may increase the risk of medical errors, complications and readmissions
- More than 40 percent indicate that last-minute schedule changes are the most frequently occurring staffing problem. Nurse managers also said scheduling mistakes, day-of sick calls and specialty vacancies are significant issues

Even though more technology is available to nurse managers, they're slow to adopt it for their scheduling needs. The survey reports that 23 percent of respondents don't use any nurse scheduling tools at all, while 24 percent use paper-based staffing tools and 19 percent use digital spreadsheets.

Meanwhile, email (48 percent), phone tree/voicemail (40 percent) and mass text messaging (38 percent) are the top modes of communication hospitals and healthcare facilities use when they need to reach their personnel about shift coverage, according to the survey, <u>Emergency Preparedness and Security</u> Trends in Healthcare.



The survey looked at what the biggest safety concerns are for hospitals and healthcare facilities throughout the U.S. More than 300 respondents, which included personnel in emergency management/preparedness, security, operations and environmental, health and safety, participated in the survey. They work in hospitals and healthcare facilities in rural, suburban and city/urban settings, ranging from about 50 employees to more than 10,000 employees.

Mass notification systems have the ability to deliver important messages instantaneously, while providing two-way communications between healthcare organizations and their nursing personnel.

Sending an email to healthcare personnel about organization news, shift information, weather alerts and other matters is often the easiest way for hospitals and healthcare facilities to communicate. However, nursing professionals are likely so focused on providing patient care, they may misplace or not even see a specific email with a crucial piece of information.

Some hospitals and healthcare facilities are using phone tree or automated voicemail systems to contact nursing professionals about shift

coverage. Though these systems are simple and cost-effective, their success is dependent on if the key callers are available to keep the continuous chain going. If a key caller isn't available to call the next person in line, then the message won't reach the necessary nursing personnel. Phone tree systems also require constant updating, so nursing staff and their contact information will always be up-to-date.

Mass notification systems have the ability to deliver important messages instantaneously, while providing two-way communications between healthcare organizations and their nursing personnel. But there are challenges with these systems. There's no guarantee nursing personnel will opt in to receive messaging, so not all of an organization's staff would see a request to fill a shift. System administrators would need to send multiple alerts to nursing staff to get their current status about filling a shift and then administrators would need to sort through the responses. The information that's collected is generally incomplete with delayed responses and the lack of mobile app adoption, as well as the time it takes to manually go through the responses.

Meanwhile, nursing professionals might not know if their organization has enough people to cover a shift because the system lacks an automatic response to say so. As a result, they keep responding to the shift request, causing administrators to sift through all of these responses.

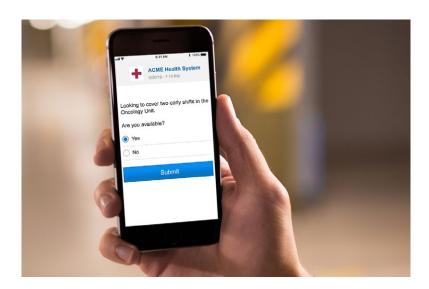


A Staffing Assistant

rying to scramble to fill a last-minute callout or resolve ongoing understaffing is time-consuming for nurse managers. It's taking away from caring for patients and interrupting daily operations.

One way to resolve this issue is a polling module, a feature within a mass notification system. The automated poll allows nursing supervisors and other management personnel to solicit information from a select group of nurses and other staff through SMS text, email and voice calls and send automated follow-up notifications based on their responses.

Healthcare personnel can use the polling module to fill a staffing shortage quickly by sending out a quota poll to nursing personnel that automatically concludes after a certain amount of required responses are reached. An automated message follows informing respondents what steps to take next, as well as that the poll closed. The automated poll collects basic text-based responses, which can be organized into reports that allow healthcare organizations to make informed staffing decisions.



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The polling module can also be used to assist nurses, home health aides and other personnel who travel to care for patients. The automated polling feature adds an extra layer of protection for traveling nursing personnel, who often work in isolation and may need to resolve issues without immediate help from their employers or coworkers. If an incident occurs and a healthcare organization needs to do a wellness check on traveling staff, it can use an automated poll through SMS text, email and voice to determine where the workers are located and if they are safe. When traveling staff respond to this poll, they can automatically share their real-time location, even if nursing personnel haven't downloaded a mobile safety app.

For example, a healthcare organization wants to do a wellness check to

traveling staff following severe weather. The organization can send the following message to nursing professionals who are traveling:

"Regarding the recent storm, are you safe?"

Each employee will be prompted to choose one of three required answer fields: "Yes," "No" or "I don't know." The healthcare organization can also require location data with each poll response, so it can view the traveling nursing personnel locations on a map.

If an employee responds either "No" or "I don't know" to the poll, a follow-up question is automatically sent asking if additional assistance is required. From these reports, a healthcare organization can determine the location of specific traveling personnel affected by an adverse event and respond accordingly.



Conclusion

The U.S. healthcare system has been grappling with staff shortages in nursing and other related professions for decades and soon this shortfall will reach epidemic levels. Hospitals and healthcare organizations are experiencing an influx of patients into the healthcare system and more patients are reporting age-related and chronic conditions, as the nursing workforce ages and nursing school enrollment isn't growing fast enough to stave off personnel shortages.

The priority of nursing professionals is the health and well-being of their patients, yet the lack of their fellow nurses is putting a strain on them. Nursing professionals have some of the highest number of work-related injuries. Staffing shortages are also causing frustration and burnout with nursing professionals, while they're impacting patient care.

Nurse managers and other supervisors are seeking ways to alleviate this well-known problem. A polling module would enable them to fill shifts within minutes by sending out a quota poll to nursing professionals through SMS text, email and voice. A feature like this

would be part of a mass notification system and would automatically close when there are enough responses. Nursing supervisors then would be able to organize this information into reports so they can make informed decisions about shift management.

An automated poll feature would also provide an extra layer of protection to traveling nursing personnel, so they'd know what to do when an adverse event occurs and informs them about next steps to take. Plus, the security professionals and others at hospitals and healthcare organizations would know the location of these traveling workers in real time, even if these workers don't use a mobile safety app.

Nursing personnel and their supervisors would be more empowered about staffing, so they can focus on offering quality medical care to their patients and ensure their personal and professional needs are met.

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healthcare organization's needs and challenges.

www.ravemobilesafety.com

Phone: 888.605.7164

Email: sales@ravemobilesafety.com

