The Health of Nurses Related to the Future of Healthcare

Marion G. Mann, DNP
Personal Healthcare Advocate, Fernandina Beach, FL, USA

Background: In 2000, the Institute of Medicine (IOM) stated in their ground-breaking report, To Err is Human, that nurses’ long work hours are one of the most serious threats to patient safety. Joint Commission (2011), OSHA (2015), and the American Nurses Association (2015) have issued warnings regarding concerns of the health of nurses related to patient outcomes. Recent studies indicate physical and mental demands of Healthcare threaten losing its most valuable asset – nurses.

As early as 1935, Dr. Lillian Gilbreth, an Industrial Engineer (The American Journal of Nursing, 2016) published the serious nature of nursing based on an analysis of the job of the nurse. She stated that nurses were subject to fatigue because of the physical and emotional demands. She also stressed that it was enormously more serious when the product of the work is human comfort and sometimes-human life

Melnyk (2018) has recently identified clinician burnout as an epidemic, claiming careers and sometime the lives of clinicians. Despite increasing research noting real, potential, current, and future health risks for nurses who work 12-hour shifts, it has become the norm for nurse staffing. In agreement with these organizations, researchers have stressed that collective action is needed to address the issues.

Studies have linked nurse fatigue to poor quality of care, increased needle-stick injuries and medical errors. Working 12-hour shifts has become the norm for hospitals and with some nurses working back-to-back shifts patient care will suffer. Research has found that not only is fatigue causing problems to our patients but also to our nurses. Nurses are suffering from sleep deprivation, fatigue and depression leading to burnout and stress. In a recent student (Melnyk et al., 2018) depression was found to be the leading cost of medical errors.

Recently, New York City (2018) agreed to pay $20.8 million to settle federal discrimination charges brought by registered nurses and midwives because their work was not recognized as physically taxing. Prior to the suit, city employees in the predominantly-male ‘physically taxing’ jobs were allowed to retire with full pensions as early as age 50, while registered nurses and midwives, who are predominantly female, had to wait until age 55 or 57 to retire with full pensions.

Purpose: To describe the relationship between the health of nurses and it’s effect on the future of healthcare.

Methods: Evidenced-Based search of the literature for research to answer the question: What is the relationship between the health of nurses and patient outcomes?

Findings/Implications: The mental and physical stress involved in patient care combined with long work hours for nurses are taking a toll. The demands of pushing and pulling on patients as well as long periods of standing and walking cause stress on joints and muscles leading to musculoskeletal disorders.

Mentally, nurses are using critical thinking constantly assessing, intervening, re-assessing for very ill patients. Loss of sleep, inadequate rest and working at night can add more fatigue. Some of the effects that follow are lapses of attention to critical details, errors of omission, compromised problem solving, slowed reactions, a decrease in motivation, depression and diminished drive. In other words, the future of healthcare is in danger of losing the heart of healthcare – Professional Nurses. Healthcare systems must set a high priority for addressing improving the health of their nurses to enhance high quality care and decrease preventable medical errors.
Title:
The Health of Nurses Related to the Future of Healthcare

Keywords:
Clinician Burnout, Nurses’ Health and Patient Outcomes

References:


Abstract Summary:
Joint Commission, OSHA, and the ANA issued warnings regarding concerns of the health of nurses related to patient outcomes. Recent studies indicate physical and mental demands of Healthcare threaten losing its most valuable asset â€“ nurses. These organizations and the evidence indicate collective action is needed to address the issues.

Content Outline:

Background: In 2000, the Institute of Medicine (IOM) stated in their ground-breaking report, To Err is Human, that nurses’ long work hours are one of the most serious threats to patient safety. Joint Commission (2011), OSHA (2015), and the American Nurses Association (2015) have issued warnings regarding concerns of the health of nurses related to patient outcomes.

Recent studies indicate physical and mental demands of Healthcare threaten losing its most valuable asset – nurses. Recently, some nurses in New York filed a lawsuit (2018) to allow retired nurses to retire sooner and collect their pensions sooner. City jobs like EMTs or window washers were allowed early retirement because their jobs were listed as “physically taxing.”
Melnyk (2018) has recently identified clinician burnout as an epidemic, claiming careers and sometime the lives of clinicians. Despite increasing research noting real, potential, current, and future health risks for nurses who work 12-hour shifts, it has become the norm for nurse staffing. In agreement with these organizations, researchers have stressed that collective action is needed to address the issues.

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First Primary Presenting Author

**Primary Presenting Author**

Marion G. Mann, DNP
Personal Healthcare Advocate
Consultant
Fernandina Beach FL
USA

**Professional Experience:** Dr. Mann is a Clinical Nurse Specialist, Board Certified with ANCC. She holds Advanced Practice Licensure in the State of Florida. Prior to graduating with her Doctorate, she studied with Melnyk and Fineout-Overholt and graduated from Arizona State University with a Post Graduate Certificate in Evidence-Based Practice. She has worked in Nursing Education and was most recently Associate Dean of Operations for a Private Nursing College. Primarily, she has worked in hospitals.

**Author Summary:** Dr. Mann has most recently served on the Advisory Board for the Fourth Edition of Melnyk & Fineout-Overholt's, Evidence Based Practice in Nursing and Healthcare: A Guide to Best Practice. While working on her Doctorate, she wrote a grant for implementation of a tobacco cessation program within a hospital. She has presented at STTI Research Congress prior to this and also spoke at the Joanna Briggs Institute Biennial International Colloquium.