Welcome

Welcome to AMN Healthcare’s Staffing Matters. This brief newsletter brings relevant news to nursing leaders in a short, easy-to-read format. Created by AMN Healthcare’s clinical leadership team, Staffing Matters delivers the expertise of industry leaders whose hands-on experience and insights are influencing the trends and issues impacting healthcare staffing today.

This Issue’s Contributors

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Marcia Faller, PhD, RN, joined AMN Healthcare in 1989. Dr. Faller is responsible for the clinical quality, competency and continuing education of all healthcare providers represented by the company. Her clinical background is in critical care and nurse recruitment. She earned a bachelor of science in nursing from the University of Arizona, a master of science in nursing from the University of San Diego, and a doctoral degree in nursing from the University of San Diego.

Dr. Kim Windsor
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Kim Windsor, RN, MSN, MBA, DHA, CNAA, FACHE has become a thought leader in quality management and professional education programs. Dr. Windsor’s experience includes more than 25 years in hospital management. She is a fellow in the American College of Healthcare Executives, is a certified nursing administrator, holds the credential of SPHR and is a legal nurse consultant. She holds a Doctor of Health Administration degree from the University of Phoenix.

2012 RN Survey Explores Job Satisfaction, Career Patterns and Trajectories

By Dr. Kim Windsor, Vice President, Clinical Services, AMN Healthcare

As the economy continues to recover, issues such as nursing retention and turnover within health facilities will be a strong consideration in planning for the future of nurse staffing. In accordance with these anticipated changes, AMN Healthcare’s 2012 Survey of Registered Nurses explored current career plans and trends, satisfaction levels and professional concerns for registered nurses (RNs). The results are offered as an information resource for healthcare industry leaders, policy makers, academics, staffing professionals, journalists, and others who follow clinical staffing and supply trends.

The survey was distributed via e-mail to 86,288 RNs nationwide during April 2012. Survey results were received by nearly 3,000 participants, representing various nursing specialties and experience levels.

Key Findings:

• Less than one fifth (17%) of nurses plan to seek a new place of employment as the economy recovers, a decline from 24% in 2011.

• RNs are still more likely to be employed by a hospital where there is permanent employment, but this number is down by 7% (total of 57%) from 2011.

• Thirty-one percent of nurses plan to take steps in the next one to three years that would take them out of nursing altogether (by retiring or seeking non-nursing jobs) or reduce the volume of clinical work they do (by switching to part-time or less demanding roles).

• Sixty-six percent report that they will continue as they are, a significant rise from 55% last year.

• Slightly less than half (40%) said they either would not recommend nursing as a career to young people or were not sure that they would.

• Ninety-one percent are satisfied with their careers, up significantly from 2011.

• Yet, 44% would not select nursing as a career if they had it to do over or are not sure that they would, unchanged from a year ago.

• Four percent plan to work as a travel nurse in the next one to three years, compared to 14% in 2011.

• Nearly 60% will pursue further education in nursing in the next one to three years.

In all, the 2012 survey results show a much improved sense of satisfaction with both career and job, but with a consistent one-third of nurses wanting to move on to something different in the near future.

To view the complete 2012 Survey of Registered Nurses visit www.amnhealthcare.com and click on the Industry Research tab.
Find it Online

About AMN
AMN Healthcare is the innovator in healthcare workforce solutions, including managed services programs, recruitment process outsourcing solutions, recruitment and placement of healthcare professionals into temporary and permanent positions, and consulting services. AMN achieves unparalleled access to quality healthcare talent through its innovative recruitment strategies and breadth of compelling career-building opportunities offered to healthcare professionals. For more information, visit www.amnhealthcare.com.

In the Next Issue...

Social Recruiting in Healthcare
Recently, the Bureau of Labor Statistics projected registered nurses and other healthcare professionals to see the largest numerical growth between now and 2018 in the U.S. With healthcare hiring a given, the question is, are organizations in the sector considering how job seekers are looking for jobs today? Learn how social media is helping match healthcare organizations with job seekers.

Social Media Lessons for Nurses
Social networking can be a tool to foster professional connections, enrich a nurse’s knowledge base, and promote timely communication with peers, patients and family members. Yet, unlike in many other industries, if used inappropriately, it can result in professional misconduct.

Safety and Savings: The Value of More Staff Time with Patients
By Marcia Faller, Ph.D., RN, Chief Clinical Officer, AMN Healthcare

We’ve all heard the expression that “Time is money.” This rings true in industry and in healthcare in regards to the importance of overall efficiency. But a clinician’s time with patients can mean more than that—it can literally mean the difference between life and death.

The more time that clinicians spend in direct patient care, the more likely they are to catch changes in a patient’s condition or to discover a symptom that may have a bearing on that individual’s treatment and recovery. In fact, a number of recent studies have shown that maximizing the time that nurses have to care for their patients by adjusting staffing numbers is a key factor in improving outcomes and avoiding “never events,” and the unfortunate and costly consequences that accompany them.

I explored the relationship between nurse staffing and preventable medical errors in a recent white paper entitled Preventing Never Events: Evidence-based Nurse Staffing, co-written with Bette Case Di Leonardi, Ph.D., RN-BC, an independent healthcare consultant, and Karen Siroky, MSN, RN-BC, AMN Healthcare’s clinical director, education and training.

While reducing preventable adverse events is a complex issue, a few points were made clear:

• **You can make a business case for staffing changes that improve safety.** By combining the latest research and the financial implications for your particular institution, you can help quantify safety goals and enact positive changes.

• **Multiple definitions and measurements for adverse events exist.** There are various lists of “adverse events” and “never events,” including the list of Serious Reportable Events from the National Quality Forum and the Healthcare Acquired Infections list from the Centers for Medicare and Medicaid Services. We looked at these and provided a comparison.

• **Improvement efforts are plentiful.** There are a number of quality initiatives with similar goals of reducing adverse events among top healthcare organizations. Although there are mandatory elements, hospitals also have some leeway to determine which initiatives they can and should embrace.

• **Errors still happen, with enormous human and financial consequences.** Despite the many initiatives addressing never events, the errors continue—and they are both devastating and costly. A 2010 study found that 1.5 million injuries occur in hospital settings each year, at an average cost of $13,000 per injury, or more than $19.5 billion in the United States alone. Another 2010 study tracked 15,000 Medicare patient deaths due to medical errors in just one month, at which rate we would see 180,000 patient deaths in one year due to medical errors.

• **Nurses can make a difference in reducing errors.** We looked at more than 40 studies from top researchers and government agencies and found ample evidence that putting more qualified nurses on the floor can significantly reduce the rate of medical errors.

• **Spending more (but wisely) can help you save.** Using the research data, we were able to extrapolate the potential financial impact on facilities that might choose to increase their permanent and supplemental nurse staffing.

Just increasing the number of nurses on your payroll is not the whole answer, of course, but a strategic staffing plan can help you become more efficient and find the right balance of people at the right time—resulting in more time with patients, better care and lower costs.

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