

ANA's Principles for Practice

ANA's

Principles for Nurse Staffing

Second Edition



Silver Spring, Maryland
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Summary

The 2012 ANA Principles for Nurse Staffing identify the major elements needed to achieve optimal staffing, which enhances the delivery of safe, quality care. These principles apply to all types of nurse staffing at every practice level and in any healthcare or practice setting. They are grounded in the substantive and growing body of evidence that demonstrates the link between adequate nurse staffing and better patient outcomes. Focused on addressing the complexities of nurse staffing decisions, the principles and supporting material in this publication will guide nurses and other decision-makers in identifying and developing the processes and policies needed to improve nurse staffing.

American Nurses Association
8515 Georgia Avenue, Suite 400
Silver Spring, MD 20910-3492
1-800-274-4ANA

www.Nursingworld.org

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Overview of Nurse Staffing

Overview of Nurse Staffing

Appropriate nurse staffing is critical to the delivery of safe, quality care that impacts patient care outcomes. Nursing is an essential component of comprehensive healthcare. Staffing impacts the ability of a nurse to deliver safe, quality care at every practice level and in all practice settings. Because the delivery of nursing care is a multifaceted process, the determination of appropriate nurse staffing is complex. The solution is not as simple as increasing the number of nurses beyond what is minimally necessary.

While the issue of staffing is complex, it is not unsolvable. It challenges the profession to create dynamic solutions that are adaptable to the ever-evolving nature of health care. Many types of staffing solutions have been developed, which are in turn tested and evaluated through quality measurement and research. In turn, this evidence drives the nursing profession to support principles that are needed to guide registered nurses and others in determining their individual solutions to this enigmatic issue.

Using this evidence, the American Nurses Association (ANA) develops and disseminates principles that served as the guidelines for determining registered nurse staffing solutions. Since the initial publication of *Principles for Nurse Staffing* (ANA, 1999), the evidence supporting the link between adequate nurse staffing and better patient outcomes has grown. ANA's advocacy for nurse staffing includes developing data collection methods, principles, and policy solutions for nurse staffing. Among these are the National Database for Nursing Quality Indicators® (NDNQI®), ongoing lobbying at the federal and state levels, and facilitation of ANA expert panels and research synthesis.

Another culmination of the growth of the body of evidence and ANA's advocacy is this document, *Principles for Nurse Staffing, Second Edition*. After conducting a thorough review of the available literature, those original staffing principles were assessed systematically and scientifically for relevance, applicability, and gaps. The original edition had been supported by twelve publications (which are denoted in this document by asterisks in the Bibliography). The support documentation for this revision was expanded to include the increasing published literature currently available on the topic of nurse staffing. These revised staffing principles set forth in this edition apply to any level or setting of nursing, and form the basis of the activity or policy of specialty nursing associations around staffing.

The ANA Principles for Nurse Staffing as delineated in this document reflect the intricate nature of how decisions are made toward ensuring appropriate nurse staffing. Supporting these principles are foundational statements regarding key aspects of nurse staffing that are enduring and core beliefs of ANA's approach, and are described on page 6.

An overarching characteristic of these principles are the different dynamics of given healthcare settings and situations and what elements of these dynamics must be considered when developing staffing plans. Accordingly, the ANA Principles for Nurse Staffing are organized into five sets according to these topics:

- The characteristics and considerations of the healthcare consumer
- The characteristics and considerations of the registered nurses and other interprofessional team members and staff
- The context of the entire organization in which the nursing services are delivered
- The overall practice environment that influences delivery of care
- The evaluation of staffing plans

¹A healthcare consumer is “the person, client, family, group, community, or population who is the focus of attention and to whom the registered nurse is providing services as sanctioned by the state regulatory bodies.” (ANA, 2012; pg. 65)

Principles for Nurse Staffing

Definition of Appropriate Nurse Staffing

Core Components of Nurse Staffing

Principles Related to the Healthcare Consumer

Principles Related to Registered Nurses and Other Staff

Principles Related to Organization and Workplace Culture

Principles Related to the Practice Environment

Principles Related to Staffing Evaluation

Principles for Nurse Staffing

Definition of Appropriate Nurse Staffing

Appropriate nurse staffing is a match of registered nurse expertise with the needs of the recipient of nursing care services in the context of the practice setting and situation. The provision of appropriate nurse staffing is necessary to reach safe, quality outcomes; it is achieved by dynamic, multifaceted decision-making processes that must take into account a wide range of variables.

Core Components of Nurse Staffing

- Appropriate nurse staffing is critical to the delivery of quality, cost-effective health care.
- All settings should have well-developed staffing guidelines with measurable nurse sensitive outcomes specific to that setting and *healthcare consumer* population that are used as evidence to guide daily staffing.
- Registered nurses are full partners working with other healthcare professionals in collaborative, interdisciplinary partnerships.
- Registered nurses, including direct care nurses, must have a substantive and active role in staffing decisions to assure the necessary time with patients to meet care needs and overall nursing responsibilities.
- Staffing needs must be determined based on an analysis of healthcare consumer status (e.g., degree of stability, intensity, and acuity), and the environment in which the care is provided. Other considerations to be included are: professional characteristics, skill set, and mix of the staff, and previous staffing patterns that have been shown to improve outcomes.
- Appropriate nurse staffing should be based on allocating the appropriate number of competent practitioners to a care situation; pursuing quality of care indices; meeting consumer-centered and organizational outcomes; meeting federal and state laws and regulations; and attending to a safe, quality work environment.
- Cost effectiveness is an important consideration in delivery of safe, quality care.
- Reimbursement structure should not influence nurse staffing patterns or the level of care provided.

Principles Related to the Healthcare Consumer

Staffing decisions should be based on the number and needs of the individual healthcare consumer, families and population served. These include:

- Age and functional ability
- Communication skills
- Cultural and linguistic diversities
- Severity, intensity, acuity, complexity, and stability of condition
- Existence and severity of multi-morbid conditions
- Scheduled procedure(s)
- Ability to meet healthcare requisites
- Availability of social supports
- Transitional care, within or beyond the healthcare setting
- Continuity of care
- Complexity of care needs
- Environmental turbulence (i.e., rapid admissions, turnovers, and/or discharges)
- Other specific needs identified by the healthcare consumer, the family and the registered nurse

In any approach used to determine staffing consideration must be given to the elements affecting care at the individual setting level. No single method, model or assessment tool (e.g., nursing hours per patient day [NHPPD], nursing intensity weights, strict nurse-to-patient ratios) has provided sufficient evidence to be considered optimal in all settings and all situations. Each setting should have staffing guidelines based on safety indicators and outcomes specific to that area.

The following elements are to be considered when making the determination:

- Governance within the setting (i.e., shared governance)
- Involvement in quality measurement activities
- Quality of work environment of nurses
- Development of comprehensive plans of care
- Practice environment
- Architectural geography of unit and institution

- Evaluation of practice outcomes that include both quality and safety
- Available technology
- Evolving evidence

Principles Related to Registered Nurses and Other Staff

The specific needs of the population served should determine the appropriate clinical competencies required of the registered nurse practicing in that area.

The organization must specify the appropriate credentials and qualifications of registered nurse staff, while ensuring registered nurses are permitted to practice to the full extent of their education, training, and licensure.

The following nurse characteristics should be taken into account when determining staffing:

- Licensure
- Experience with the population being served
- Level of experience (i.e., novice to expert)
- Competency with technology and clinical interventions
- Professional certification
- Educational preparation
- Language capabilities
- Organizational experience

Staffing plans should accommodate for experienced registered nurses who can offer clinical support to other staff. Adjustments in staffing should be considered to incorporate mentoring and skill development needs of nurses, including novice nurses.

Factors such as nurse satisfaction, burnout, turnover, retention, precepting students or new staff, acting as a mentor, care coordination, skill with technology, use of agency or contractual staff, competency requirements, and staff development should be monitored regularly to ensure that staffing outcomes are measured and adjusted. Nursing students and precepted students are not staff and cannot be treated as such.

Registered nurses must have the decision-making authority to alter staffing to accommodate changing and anticipated healthcare consumer needs, registered nurse competency and skill levels, in order to assure appropriate staffing in rapidly changing situations.

Principles Related to Organization and Workplace Culture

Organizations must create a work environment that values registered nurses and other employees as strategic assets and fills budgeted positions in a timely manner.

Policies should support the ability of registered nurses to practice to the full extent of their education, documented competencies, and scope of practice.

To maximize safe patient care and quality outcomes, organizations should recognize that in addition to appropriate registered nurse staffing, they must provide interprofessional support and ancillary services. These include at a minimum:

- Effective and efficient support services (e.g., transport, clerical, housekeeping, and laboratory)
- Timely coordination, supervision, and delegation as needed to maximize safety
- Access to timely, accurate, relevant information provided by communication technology that links clinical, administrative, and outcome data
- Sufficient orientation and preparation, including nurse preceptors and nurse experts to ensure registered nurse competency
- Preparation and ongoing training for competency in technology or other tools
- Sufficient time for patient documentation
- Necessary time to collaborate with and supervise other staff
- Necessary time to accommodate increased documentation demands created by integration of technology, electronic records, surveillance systems, and regulatory requirements
- Support in ethical decision-making
- Resources and pathways for care coordination and healthcare consumer/client and/or family education

- Adequate time for coordination and supervision of nursing assistive personnel by registered nurses
- Processes to facilitate transitions during work redesign, mergers, and other major changes in work life
- Supporting the registered nurse's professional responsibility to maintain continuing education and engagement in lifelong learning

Successful staffing requires organizational and administrative support from all levels. In addition, registered nurses, including direct care nurses, must be engaged and participatory in decision-making.

Nurse administrators are responsible for facilitating the provision of appropriate nurse staffing and to collaborate with others in the organization to assure the best use of resources.

Principles Related to the Practice Environment

Staffing is a structure and process that affects the safety of patients, as well as nurses themselves, and others in the environment. Institutions employing a culture of safety must recognize appropriate nurse staffing as integral to achieving goals for patient safety and quality.

Registered nurses have a professional obligation to report unsafe conditions or inappropriate staffing that adversely impacts safe, quality care, and the right to do so without reprisal.

Registered nurses should be provided a professional nursing practice environment in which they have control over nursing practice and autonomy in their workplace. Appropriate preparation, resources and information should be provided for those involved at all levels of decision-making. Opportunities must be provided for individuals to be involved in decision-making related to nursing practice.

Routine mandatory overtime is an unacceptable solution to achieve appropriate nurse staffing. Policies on length of shifts; management of meal and rest periods; and overtime should be in place to ensure the health and stamina of nurses and prevent fatigue-related errors.

Principles Related to Staffing Evaluation

Organizations must have registered nurse staffing plans that demonstrate a logical method for determining staffing levels and skill mix, and are conducive to change based on analysis of evaluation data.

Organizations should evaluate staffing plans based on factors including, but not limited to:

- Outcomes, especially as measured by nurse-sensitive indicators
- Time needed for direct and indirect patient care
- Work-related staff illness and injury rates
- Turnover/vacancy rates
- Overtime rates
- Rate of use of supplemental staffing
- Flexibility of human resource policies and benefit packages
- Evidence of compliance with applicable federal, state, and local regulations
- Levels of healthcare consumer satisfaction and nurse satisfaction.

Staffing plans must be conducive to adjustment to reflect changes in evidence and outcomes, care scenarios, and the needs of the population served, all of which can vary from hour to hour, day to day, and shift to shift.

Evaluation of any staffing system should include factors associated with the environment with an understanding of how that particular environment affects healthcare consumer safety and outcomes.

When evaluating cost of nursing staffing, the organization should take into account the cost of adverse outcomes when staffing is inappropriate.

Conclusion

Despite the efforts at all levels of the nursing profession, heightened and more immediate attention is needed to assure the provision of safe, quality nursing care. Appropriate nurse staffing must be considered an asset to ever-evolving health care systems, rather than simply a cost factor. Evidence demonstrates that nursing care has a direct impact on the overall quality of services received, and that when registered nurse staffing is adequate, adverse events decline and overall outcomes improve. It is imperative that the healthcare paradigm shift towards better health at lower costs includes an increased emphasis on the importance of appropriate nurse staffing. Nurses make a tremendous contribution to quality care: the value of registered nurse staffing cannot be underestimated.

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(*=included in original 1999 *Principles for Nurse Staffing* document)

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Contributors

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Expert Panel: Principles of Nurse Staffing Workgroup, 2011–12

Rosemary Mortimer, MS, MEd, RN, CCBE – Co-chair

Patricia Pearce, PhD, MSN, MPH, RN, FNP-BC, FAANP– Co-chair

Robin Bissinger, PhD, APRN, NNP-BC • National Association Neonatal Nurses (NANN)

Sharon Canariato, MSN, MBA, RN

Linda Rose Frank, MSN, PhD, ACRN, CS • Association of Nurses in AIDS Care (ANAC)

Lesly Kelly, PhD, RN

Eileen Kohlenberg, PhD, RN, NEA-BC

Eileen Letzeiser, MPH, RN

Debra Maust Martin, MSN, MBA, RN, NE-BC, FACHE

Mary Moller, DNP, APRN, PMHCNS-BC, CPRP, FAAN • American Psychiatric Nurses Association (APNA)

Karen Tomajan, MS, RN, NEA-BC

Rebecca Wheeler, MA, BSN, RN

Cinda Zimmer, MSN, BSN, RN

ANA Staff

Katherine Brewer, MSN, RN – Content editor

Eric Wurzbacher – Project editor

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