

NEW MEXICO
NURSES ASSOCIATION

SAFE STAFFING

SHEENA FERGUSON, DNP, RN
CHAIR

NEW MEXICO NURSES ASSOCIATION
PRACTICE COMMITTEE

SEPTEMBER 30, 2021
LHHS



WHAT IS SAFE STAFFING?

Nurse quality of care is dependent upon patient factors and nurse characteristics.

Nurse quality equals better patient outcomes.

Matching of patient factors and nurse characteristics is intended to:

- Increase patient/family satisfaction
- Reduce the rate of adverse events (ex. falls, pressure injuries, infections)
- Prevent complications (ex. ventilator-associated pneumonia)
- Facilitate readiness for discharge planning
- Decrease mortality
- Reduce hospital length of stay

(AACN, 2002)

**NEW MEXICO NURSES ASSOCIATION &
NEW MEXICO NURSE PRACTITIONER COUNCIL**

- [NMNA Video v5.mp4](#)

SAFE STAFFING DEFINED

- The topic of “safe nurse staffing” is a broad issue that carries different meanings to different people.
- The topic of safe nurse staffing denotes a balance between the availability of nursing staff and the demand to meet patient needs. Beyond nurse-to-patient ratios, safe nurse staffing means that nurses should be competent in the care that they provide (Camphor, 2018).
- 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; it is achieved by dynamic, multifaceted decisionmaking processes that must take into account a wide range of variables (ANA, 2012).

NURSE EXPERIENCE: MOVING FROM NOVICE TO EXPERT

- Years of experience as a nurse
- Years of experience in the specialty area
- Level of education: LPN, Associates, Bachelor's, Master's, Doctorate
- State of the science keeping a current practice (access to continuing education)
- Ongoing validation of nurse competence
- National specialty certification
- Type/length/model of orientation
- Nurse preceptors/nurse educators
- Nurse residency: four accredited programs in the state: Memorial, Lovelace, Presbyterian, & UNMH
- RN supervisor experience: 20 years vs 1 year
- Unlicensed experiences:
 - i. Externship: 1st year of nursing school
 - ii. Internship: 2nd year of nursing school
 - iii. Previous roles: e.g. nurse aide

PATIENT FACTORS

Patient factors to be considered in staffing, more than a number.

- Resiliency
- Vulnerability
- Stability
- Complexity
- Resource availability
- Participation in care
- Decision-making
- Predictability

Not just where located (ex. ICU, ED, Outpatient), but what is specifically needed.

NURSE RESOURCES

- Nurse Leadership is essential to achieving safe staffing.
- Nurse Leaders want safe staffing.
- Nurse Leaders must be supported in this goal by addressing the nursing shortage.
- Nurse Leaders must be supported in this goal by improving the work environment.
 - Investing in nursing education is critical to graduate more nurses
 - Investing in work environment is critical to retaining nurses
 - Resources and support are also important
 - Safe harbor program: “Stop the titanic”
 - ✓ Texas
 - ✓ New Mexico

NURSING SHORTAGE DATA

Transparency is needed to improve nurse resources

- ✓ High vacancy rates
- ✓ High turnover rates
- ✓ High numbers of travelers
- ✓ Low hours of nursing care
- ✓ Workplace desirability may concern potential employees

- ✓ Lack of nurse resources leads to burn-out
- ✓ Unchecked, nurse burnout causes nurses move from hospital to hospital or leave the profession
- ✓ Employers are faced with ever-increasing sign-on bonuses (ex. 10K, 20K, 30K)
- ✓ Nurses ask: If we can afford travelers and sign-on bonuses, why can't we afford more support?

WHAT IS BURN-OUT?

- A state of mental, physical, and emotional exhaustion caused by sustained work-related stressors:
 - long hours, mandatory overtime, inadequate sleep between shifts; all caused by inadequate staffing
 - the pressure of quick decision-making and feeling like "you didn't do your best"
 - feeling that there is a lack of support in difficult situations and that "no one is listening"
 - the strain of caring for patients who may have poor outcomes
 - violence against nurses is also a major cause of burnout
- Burn-out which is untreated contributes to lack of engagement, poor performance, poor teamwork, and ultimately, staff turnover; nurses will leave a unit, an organization, a community, or the profession.

IF A PATIENT IS JUST A NUMBER

Then the state that has mandated numbers:

- Should have the safest hospitals
- Should have the highest quality outcomes
- Should have the highest patient satisfaction
- Should have the highest nurse satisfaction
- Should have the lowest nurse turnover
- Should have the lowest nurse vacancy rates

And that it does not.

NURSING SHORTAGE DATA

National definitions

- National metrics: National Database for Nurse Quality Indicators (NDNQI)
- Vacancy rate
- Turnover
- Hours of nursing care
 - ✓ Required public reporting by hospitals: Five states
 - ✓ Transparent, everyone sees it, including nurses looking for positions

NURSING WORKFORCE CRISIS IN NM

- According to the most recent New Mexico Health Care Workforce Report, the state is 6,223 nurses short.
- In 2020, the Board of Nursing licensed 28,400 nurses of which 15,588 live and probably practice here – Over 5,800 are NOT practicing at all and 6,700 do NOT actually live in New Mexico.
- In FY2019, New Mexico colleges graduated 1,383 ADN and BSN degree and higher nurses.
- Nationally, 11% of the over 60 years of age RNs leave the practice of nursing every year.
- A 2017 study of baby boomer nurses indicated 73% of them would leave the profession in five years.
- Nurses tend to practice in states where they have been educated.
- Per the HRSA Health Workforce Report 2017-2030, nursing shortages largely reflect local conditions, such as the number of new graduates from nursing schools.

GOVERNOR'S TASKFORCE ON THE NURSING WORKFORCE: 2019-2020

Recommendations: Critical Challenge 1

- Increase the number of qualified applicants to postsecondary RN and LPN programs.
- Health Care Career Prep Programs in High School (HS)
 - Dual credit (College): Pre-Nursing Classes
 - Partnerships between HS, JC & Facilities
 - Reimbursement for Hospitals/Clinics: Interns

GOVERNOR'S TASKFORCE ON THE NURSING WORKFORCE: 2019-2020

Recommendations: Critical Challenge 2

- Increase the ability to grow the total output of registered nurses, annually
- All hospitals need to work with programs
- Evening shifts, Not just M-F, Alternate sites
- Faculty development & support
- Rural hospitals receive students
- Explore expanding Master Teacher/Master Clinician concept

GOVERNOR'S TASKFORCE ON THE NURSING WORKFORCE: 2019-2020

Recommendations: Critical Challenge 3

- Increase RN program Faculty Recruitment/Retention rates
- Assess Salaries
- Assess Vacancies and Increase Development
- Loan Forgiveness or Tuition Assistance
- Simulation Expansion



GOVERNOR'S TASKFORCE ON THE NURSING WORKFORCE: 2019-2020

Recommendations: Critical Challenge 4

- Increase RN retention within the profession and the state of New Mexico
- Role Transition/Work Environment
- Consistency & standardization across state using a devoted IT access
- Expand Residencies
- Externship & Intern Programs
- Reduce turnover/Safe Harbor implementation
- White papers on complex clinical issues
- Specialty nurse development

COORDINATION OF NURSING TASKFORCE RECOMMENDATIONS

Recommendation

Create within the Department of Health a statewide “Chief Nurse” position

- Duties to include:
 - Formalize the coming together of educational institutions with clinical entities
 - Assist in creating a statewide student clinical rotation plan
 - Assist in creating capacity for clinicals in underutilized hospitals and facilities
 - Help address the rural residency issue with a statewide residency option
 - Increase internship options outside Albuquerque
 - Explore innovative ways to increase supply such as supporting LPN education in high school
 - Explore adoption of successful programs that reduce turnover

NURSING SCHOOL PROGRAM EXPANSION: A HUGE PART OF THE SOLUTION

Recommendations

- The Ask: \$15 million to create a nursing program development enhancement fund in HED to award grants on a competitive basis for schools of nursing
- \$15 million when fully implemented would increase students by 1,545 per year and increase annual graduation by 308 R.N.s
- Grant requests must address:
 - competitive nursing faculty salaries;
 - incentives for clinical preceptors;
 - aid students with a lodging / transportation stipend for clinical placement outside of their homes;
 - tutoring and mentoring for student success;
 - recruitment plans for increased number and diversity;
 - majority of the clinical rotations in New Mexico; and
 - retention plans for at-risk students.

EXPANSION OF NURSING EDUCATION – LFC MADE RECOMMENDATIONS IN 2020

Recommendations

- Contained within the LFC Program Evaluation: Nursing Expansion & Workforce July 2020, were the following recommendations related to Higher Education:
 - Put a future nurse expansion fund into the program development enhancement fund for HED to award grants on a competitive basis; and
 - Increase targeted financial aid especially loan repayment for nurses by \$750,000 to meet demand

REGULATORY ENVIRONMENT: NEW MEXICO BOARD OF NURSING

- Ongoing anecdotal information from nurses that they are not able to get their licenses in a timely manner
- Problems with an out-of-state continuing education broker system which all nurses must use when renewing license: cumbersome, confusing, and an internet-only option
- Unresponsiveness of BON staff – no one answers the phone – no one calls back
- Communication mandated through the website via email which is problematic without good access to internet
- Board has a \$900,000 cash balance; uncertainty about amount of money transferred by BON to HED for NP loan repayment and the BON scholarship process , and grants awarded

RECOMMENDATION

- utilize cash balance to waive initial licensure fee for NM graduates to retain them in NM