

## Nursing Shortage Paper

It has been noted by many authors that nurses comprise the largest percentage of health care providers in the United States. At various times in the history of the profession, nursing shortages have existed due to a variety of factors. This paper will not only provide a description of nursing shortages in the past, but it also discusses the current nursing shortage in the United States. This paper uses research by means of literary analysis on the topic of the United States nursing shortage and there were no gaps identified in the literature review. First, a brief history of nursing shortages is provided. Contributing factors to the shortage such as retiring baby boomers, decreased numbers of nursing faculty, and an expansion in nurse workloads are examined. Several solutions to combat the shortage were discovered in the literature review. Retaining aging nurses, increasing faculty and student enrollments in nursing programs, and ways to reduce nurse burnout are investigated. Nurses need to promote nursing as a profession to students as a potential career choice. Future projections of the nursing shortage across the United States will necessitate innovative solutions to address this far-reaching problem.

*The Future of the Nursing Workforce in the United States: Data, Trends and Implications* provides a timely, comprehensive, and integrated body of data supported by rich discussion of the forces shaping the nursing workforce in the US. Using plain, jargon free language, the book identifies and describes the key changes in the current nursing workforce and provide insights about what is likely to develop in the future. *The Future of the Nursing Workforce* offers an in-depth discussion of specific policy options to help employers, educators, and policymakers design and implement actions aimed at strengthening the current and future RN workforce. The only book of its kind, this renowned author team presents extensive data, exhibits and tables on the nurse labor market, how the composition of the workforce is evolving, changes occurring in the work environment where nurses practice their profession, and on the public's opinion of the nursing profession.

We all want to believe that when people get cancer, they will receive medical care of the highest quality. Even as new scientific breakthroughs are announced, though, many cancer patients may be getting the wrong care, too little care, or too much care, in the form of unnecessary procedures. How close is American medicine to the ideal of quality cancer care for every person with cancer? *Ensuring Quality Cancer Care* provides a comprehensive picture of how cancer care is delivered in our nation, from early detection to end-of-life issues. The National Cancer Policy Board defines quality care and recommends how to monitor, measure, and extend quality care to all people with cancer. Approaches to accountability in health care are reviewed. What keeps people from getting care? The book explains how lack of medical coverage, social and economic status, patient beliefs, physician decision-making, and other factors can stand between the patient and the best possible care. The board explores how cancer care is shaped by the current focus on evidence-based medicine, the widespread adoption of managed care, where services are provided, and who provides care. Specific shortfalls in the care of breast and prostate cancer are identified. A status report on health services research is included. *Ensuring Quality Cancer Care* offers wide-ranging data and information in clear context. As the baby boomers approach the

years when most cancer occurs, this timely volume will be of special interest to health policy makers, public and private healthcare purchasers, medical professionals, patient advocates, researchers, and people with cancer.

"Nurses play a vital role in improving the safety and quality of patient care -- not only in the hospital or ambulatory treatment facility, but also of community-based care and the care performed by family members. Nurses need to know what proven techniques and interventions they can use to enhance patient outcomes. To address this need, the Agency for Healthcare Research and Quality (AHRQ), with additional funding from the Robert Wood Johnson Foundation, has prepared this comprehensive, 1,400-page, handbook for nurses on patient safety and quality -- Patient Safety and Quality: An Evidence-Based Handbook for Nurses. (AHRQ Publication No. 08-0043)." -- Online AHRQ blurb, <http://www.ahrq.gov/qual/nursesfdbk>.

Results are presented of a study of nursing and nursing education that focused on the need for continued federal support of nursing education, ways to attract nurses to medically underserved areas, and approaches to encourage nurses to stay in the profession. Findings are presented on whether the aggregate supply of generalist nurses will be sufficient to meet future demand, and how changes that could occur in the health care system might affect demand. Attention is also directed to: how the current and future supply of nurses may be influenced by the costs of nursing education and the sources of education financing; and education for generalist positions in nursing. In addition, the supply and demand situation for nurses educationally prepared for advanced professional positions in nursing is examined. The influence of employer policies and practices in utilization of nursing resources on demand and supply is also addressed. Finally, areas in which further data and studies are needed to better monitor nursing supply and demand are identified. In addition to 21 recommendations, appendices include information on Nursing Training Act appropriations, state reports on nursing issues, certificates for specialist registered nurses, projections of registered nurse supply and requirements, and doctoral programs in nursing. (SW)

Role Development in Professional Nursing Practice, Third Edition examines the progression of the professional nursing role and provides students with a solid foundation for a successful career. This essential resource includes recommendations from current research and utilizes a comprehensive competency model as its framework. Key Features: \* Incorporates the Nurse of the Future (NOF): Nursing Core Competencies, based on the AACN's Essentials of Baccalaureate Education, the IOM's Future of Nursing Report, and QSEN competencies, throughout the text \* "Competency Boxes" highlight knowledge, skills, and abilities (KSA) required of the professional nurse \* Includes new case studies and content congruent with recommendations from the Carnegie Foundation and the Institute of Medicine \* Provides updated information on evidence-based research, informatics, legal issues, the healthcare delivery system, and future directions Accompanied by Instructor Resources: \* Save time with a Test Bank and sample syllabi \* Encourage critical thinking using sample professional development assignments \* Plan classroom lectures using PowerPoint Presentations created for each chapter Navigate eFolio: Role Development in Professional Nursing Practice, a fully supported and hosted online learning solution featuring an ebook and course management tools is also available for this text. Navigate eFolio transforms how students learn and instructors teach by bringing together authoritative and interactive

content aligned to course objectives, with student practice activities and assessments, an ebook, and reporting tools For more information visit [go.jblearning.com/Mastersefolio](http://go.jblearning.com/Mastersefolio).

President Bush has declared that ending the nursing shortage is a national priority. The shortage of Army nurses jeopardizes military beneficiaries' health care. An insufficient supply of nurses threatens force protection and emergency preparedness of our public health system, which must prepare to respond effectively to attacks by weapons of mass destruction. Factors contributing to the registered nurse shortage are impacting recruitment of Army nurses. Further, the low retention rates among junior active duty Army nurses exacerbate the problem. Departing nurses cite several concerns and desires to begin a family, not to work fulltime, and to remain in the same duty location. Implementation of preemptive strategies will ensure an adequate supply of active duty Army nurses in the pipeline to provide quality health care to retirees and military family members in the homeland, and especially to troops operating in volatile, uncertain, complex, and ambiguous environments. Corrective strategies should include policy and regulation changes, more economic incentives, and establishment of an undergraduate School of Nursing within the United States Uniform Health Services for all services. This Strategy Research Paper (SRP) describes the global nursing shortage. It analyzes the reasons for the shortage of non-Department of Defense civilian nurses, comparing them with the reasons for the shortage of nurses in the Army. It outlines the implications of the nurse shortage for health care beneficiaries. It reviews findings from Army Nurse Corps exit surveys. It discusses current strategic initiatives. It provides recommendations to achieve and sustain sufficient numbers of Army nurses to continue supporting the Army Medical Department goals and transformation initiatives in the face of a nationwide health care crisis. It raises critical questions for further examination: What impact will the availability of onsite child care services for shift workers have on AMEDD retention? What is the correlation between age of active duty Army nurses and personal military readiness? Will ending the shortage of nurses in the Army depend on ending the shortage of nurses in the civilian sector?

During a difficult year, acclaimed writer Susan Gubar celebrates her lasting partnership and the reciprocity of lovers in later life. On Susan Gubar's seventieth birthday, she receives a beautiful ring from her husband. As she contemplates their sustaining relationship, she begins to consider how older lovers differ from their youthful counterparts—and from ageist stereotypes. While her husband confronts age-related disabilities that effectively ground them, Susan dawdles over the logistics of moving from their cherished country house to a more manageable place in town and starts seeking out literature on the changing seasons of desire. Throughout the complications of devoted caregiving, her own ongoing cancer treatments, apartment hunting, the dismantling of a household, and perplexity over the breakdown of a treasured friendship, Susan finds consolation in books and movies. Works by writers from Ovid and Shakespeare to Gabriel García Márquez and Marilynne Robinson lead Susan to appraise the obstacles many senior couples overcome: the unique sexuality of bodies beyond their prime as well as the trials of retirement, adult children, physical infirmities, the multiplications or subtractions of memory, and the aftereffects of trauma. On the page and in life, Susan realizes that age cannot wither love. A memoir proving that the heart's passions have no expiration date, *Late-Life Love* rejoices in second chances.

Building on the revolutionary Institute of Medicine reports *To Err is Human* and *Crossing the Quality Chasm*, *Keeping Patients Safe* lays out guidelines for improving patient safety by changing nurses'™ working conditions and demands. Licensed nurses and unlicensed nursing assistants are critical participants in our national effort to protect patients from health care errors. The nature of the activities nurses typically perform — monitoring patients, educating home caretakers, performing treatments, and rescuing patients who are in crisis —

provides an indispensable resource in detecting and remedying error-producing defects in the U.S. health care system. During the past two decades, substantial changes have been made in the organization and delivery of health care and consequently in the job description and work environment of nurses. As patients are increasingly cared for as outpatients, nurses in hospitals and nursing homes deal with greater severity of illness. Problems in management practices, employee deployment, work and workspace design, and the basic safety culture of health care organizations place patients at further risk. This newest edition in the groundbreaking Institute of Medicine Quality Chasm series discusses the key aspects of the work environment for nurses and reviews the potential improvements in working conditions that are likely to have an impact on patient safety.

Brings together a series of detailed case studies undertaken to assess the key issues affecting the health workforce in a range of European countries. Countries include: France, Germany, the United Kingdom, the Russian Federation, Spain, Poland, Norway, Lithuania and Malta. During clinical practice the author of this research paper has become aware of declining nurse retention rates amongst new graduate nurses in critical care areas. This can be attributed to a lack of support received by the new graduate nurse. The nursing shortage has burdened many hospitals with poor staffing and decreasing job satisfaction, ultimately leading to decreased retention rates. A question to be asked is, for new graduate nurses in the critical care setting, will participation in a nurse residency program as opposed to the traditional 6 week orientation, increase retention? By organizations implementing new graduate nurse training programs, many hospitals have seen retention rates rise. Implementation of a new graduate training or mentorship program will increase new graduate nurse retention; thus increase overall staffing. Due to a lack of experienced nurses applying to specialty areas, hiring new graduates and training them allows for experience to be built. The following paper will discuss how the implementation of new graduate nurse training/mentorship programs will help to increase the rate of nurse retention. The implementation of mentorship programs is an essential element that health care institutions employ to retain nurses who have graduated nursing school and have obtained licensure (Chen, and Lou, 2014). By understanding how the effectiveness of these mentorship programs work, the retention rate for these nurses can be improved (Chen, and Lou 2014).

The Fourth Edition of this popular text expands on the third by taking an in-depth look at teaching strategies appropriate for educators working in all health related professions. Chapters present a broad range of strategies, as well as the learning environment to best use the strategies, detailed practical and theoretical information about the strategies, how to deal with problems that could occur, specific examples of the strategies as they have been used, and resources available for further information. Focusing on innovation, creativity, and evaluation, the strategies are developed for use in traditional classroom settings, technology-based settings, and clinical settings.

Nursing Shortage in the Hospital Sector, 1982-87A Background PaperEvidence-based-practice Proposal PaperNursing Shortage Chicago MetropolitanWhere Have All the Nurses Gone?The Impact of the Nursing Shortage on American HealthcarePrometheus Books

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The Institute of Medicine study Crossing the Quality Chasm (2001) recommended that an interdisciplinary summit be held to further reform of health professions education in order to enhance quality and patient safety. Health Professions Education: A Bridge to Quality is the follow up to that summit, held in June 2002, where 150 participants across disciplines and occupations developed

ideas about how to integrate a core set of competencies into health professions education. These core competencies include patient-centered care, interdisciplinary teams, evidence-based practice, quality improvement, and informatics. This book recommends a mix of approaches to health education improvement, including those related to oversight processes, the training environment, research, public reporting, and leadership. Educators, administrators, and health professionals can use this book to help achieve an approach to education that better prepares clinicians to meet both the needs of patients and the requirements of a changing health care system.

The American Society of Clinical Oncology (ASCO) predicts that by 2020, there will be an 81 percent increase in people living with or surviving cancer, but only a 14 percent increase in the number of practicing oncologists. As a result, there may be too few oncologists to meet the population's need for cancer care. To help address the challenges in overcoming this potential crisis of cancer care, the National Cancer Policy Forum of the Institute of Medicine (IOM) convened the workshop Ensuring Quality Cancer Care through the Oncology Workforce: Sustaining Care in the 21st Century in Washington, DC on October 20 and 21, 2008.

For the author of this book, disease is not an "enemy" that strikes a "victim." Rather, health and disease comprise a unitary whole of individual and environment. Health as Expanding Consciousness is an inspiration to those seeking a full experience of personal health.

Terminus was a Harry Potter conference that took place August 7-11, 2008, in Chicago, Illinois. The conference featured more than 180 hours of educational programming presented by scholars, teachers, business and industry professionals, librarians, readers, and others with an interest in the Harry Potter novels, films, and phenomenon; at the time of the conference, presenters were able to analyze all seven novels and many related works. Following the conference, presenters were invited to contribute papers for this compendium, which includes perspectives on Harry Potter as part of the curriculum, an analysis of the wizarding world's legal system, criticism of gender roles in the series, sets of questions from roundtable discussions, and many additional essays.

The decade ahead will test the nation's nearly 4 million nurses in new and complex ways. Nurses live and work at the intersection of health, education, and communities. Nurses work in a wide array of settings and practice at a range of professional levels. They are often the first and most frequent line of contact with people of all backgrounds and experiences seeking care and they represent the largest of the health care professions. A nation cannot fully thrive until everyone - no matter who they are, where they live, or how much money they make - can live their healthiest possible life, and helping people live their healthiest life is and has always been the essential role of nurses. Nurses have a critical role to play in achieving the goal of health equity, but they need robust education, supportive work environments, and autonomy. Accordingly, at the request of the Robert Wood Johnson Foundation, on behalf of the National Academy of Medicine, an ad hoc committee under the auspices of the National

Academies of Sciences, Engineering, and Medicine conducted a study aimed at envisioning and charting a path forward for the nursing profession to help reduce inequities in people's ability to achieve their full health potential. The ultimate goal is the achievement of health equity in the United States built on strengthened nursing capacity and expertise. By leveraging these attributes, nursing will help to create and contribute comprehensively to equitable public health and health care systems that are designed to work for everyone. *The Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity* explores how nurses can work to reduce health disparities and promote equity, while keeping costs at bay, utilizing technology, and maintaining patient and family-focused care into 2030. This work builds on the foundation set out by *The Future of Nursing: Leading Change, Advancing Health* (2011) report.

Hospitals and nursing homes are responding to changes in the health care system by modifying staffing levels and the mix of nursing personnel. But do these changes endanger the quality of patient care? Do nursing staff suffer increased rates of injury, illness, or stress because of changing workplace demands? These questions are addressed in *Nursing Staff in Hospitals and Nursing Homes*, a thorough and authoritative look at today's health care system that also takes a long-term view of staffing needs for nursing as the nation moves into the next century. The committee draws fundamental conclusions about the evolving role of nurses in hospitals and nursing homes and presents recommendations about staffing decisions, nursing training, measurement of quality, reimbursement, and other areas. The volume also discusses work-related injuries, violence toward and abuse of nursing staffs, and stress among nursing personnel--and examines whether these problems are related to staffing levels. Included is a readable overview of the underlying trends in health care that have given rise to urgent questions about nurse staffing: population changes, budget pressures, and the introduction of new technologies. *Nursing Staff in Hospitals and Nursing Homes* provides a straightforward examination of complex and sensitive issues surround the role and value of nursing on our health care system.

This book presents the stories of 11 nurse leaders, all of whom have changed the profession of nursing through their personal commitment to the profession, to their patients, and to health care worldwide.

*The Future of Nursing* explores how nurses' roles, responsibilities, and education should change significantly to meet the increased demand for care that will be created by health care reform and to advance improvements in America's increasingly complex health system. At more than 3 million in number, nurses make up the single largest segment of the health care work force. They also spend the greatest amount of time in delivering patient care as a profession. Nurses therefore have valuable insights and unique abilities to contribute as partners with other health care professionals in improving the quality and safety of care as envisioned in the Affordable Care Act (ACA) enacted this year. Nurses should be fully engaged with other health professionals and assume leadership roles in redesigning care in the United States. To ensure its members are well-prepared, the profession should institute residency training for nurses, increase the percentage of nurses who attain a bachelor's degree to 80 percent by 2020, and double the number who pursue doctorates. Furthermore, regulatory and institutional obstacles -- including limits on nurses' scope of practice -- should be removed so that the health system can reap the full benefit of nurses' training, skills,

and knowledge in patient care. In this book, the Institute of Medicine makes recommendations for an action-oriented blueprint for the future of nursing. Over the many years nurses have been struggling with a big issue for them at many healthcare facilities. This problem is ever present, and its solution has been thought about but never been answered. The problem is the nursing shortage. Research has shown as well as experience this is an ever growing problem that not only in the United States is facing but many other countries as well. This essay shows the problem and reasons for it. The way to go about solving the nursing shortage as well as using different methods to help facilitate the problem and even help the situation be improved will help nurses to experience a less of a shortage. This paper offers a solution, a way to help implement the plan, a way to spread the plan amongst the nation in the United States and how we can evaluate the plan over a period of time. The nursing shortage is a big deal and the problem is inevitable and cannot be avoided and by put off any longer, it is important that this problem be solved soon and this paper is here to address this problem. The more than one solution and methods mentioned should be enough to get started to help less the burden most nurses have at the work place due to the under staffing of nurses because there are not enough nurses out there. With enough evidence and explanation this paper will be a basis for most and all nurses to be an interactive as well as an imperative part to help close the gap.

Nurses make up the largest segment of the health care profession, with 3 million registered nurses in the United States. Nurses work in a wide variety of settings, including hospitals, public health centers, schools, and homes, and provide a continuum of services, including direct patient care, health promotion, patient education, and coordination of care. They serve in leadership roles, are researchers, and work to improve health care policy. As the health care system undergoes transformation due in part to the Affordable Care Act (ACA), the nursing profession is making a wide-reaching impact by providing and affecting quality, patient-centered, accessible, and affordable care. In 2010, the Institute of Medicine (IOM) released the report *The Future of Nursing: Leading Change, Advancing Health*, which made a series of recommendations pertaining to roles for nurses in the new health care landscape. This current report assesses progress made by the Robert Wood Johnson Foundation/AARP Future of Nursing: Campaign for Action and others in implementing the recommendations from the 2010 report and identifies areas that should be emphasized over the next 5 years to make further progress toward these goals.

...an important book...a wake-up call... -Bookviews.com At 6:30 A.M. a head nurse reviews room assignments and the day's challenges ahead: twenty-nine patients, most of them seriously ill, and four nurses to care for them. That means a barely manageable and potentially risky patient-nurse ratio of seven to one, with one nurse taking eight patients. Unfortunately, this dismal scenario is played out again and again in hospitals across the country. This in-depth, behind-the-scenes account of a healthcare system under stress and the declining quality of medical treatment in America should serve as a wakeup call to the public. Faye Satterly, a Registered Nurse with over two decades of experience, spells out the alarming statistics: The average nurse today is forty-five years old and anticipating retirement. Only 12 percent of nurses are under age thirty. At the same time, nursing schools report decreasing enrollments and fewer graduates. The result is that the nurses who are on the front lines of healthcare are feeling overwhelmed and leaving the field for less stressful opportunities outside hospital settings. Compounding the looming crisis is the fact that just as nurses are becoming

scarce, the need for them is becoming ever greater. Over the next decade, aging baby boomers will swell the ranks of the over-fifty-five population, a group that experiences higher healthcare needs than those in their thirties and forties. There are answers, the author insists, but they will require an honest public debate about our choices and expectations. What are we willing to do and how much are we willing to pay for safe, effective delivery of healthcare? This fascinating and disturbing account by a veteran nurse with extensive experience is a compelling call for action to counter the nursing shortage and ensure that caring regains its premium status in healthcare. Faye Satterly, R.N. (Charlottesville, VA), is Cancer Services Director at Martha Jefferson Hospital. She has been a Registered Nurse for twenty years, and served as Cancer Services Director for twelve years.

Like the country at large, the Army has been challenged by a national imbalance between the supply of professional nurses and the demand for their services. This shortage, known as the nursing shortage, poses special problems for the Army Medical Department as it strives to maintain wartime readiness and provide comprehensive peacetime care to Department of Defense beneficiaries. History demonstrates that the present nursing shortage is different from past ones in that it has been caused by a host of emerging trends in health care and society at large. Unlike past shortages, experts believe there are no 'quick fixes' to the present, persistent shortages of nurses. Instead, it will require reforms that address a whole series of basic underlying problems. Still, classic studies have demonstrated attributes of magnet hospitals and characteristics of the nursing profession that provide clues to resolving, or at least ameliorating, the nursing shortage for the Army. This paper reviews the national nursing shortage and the history of shortages of nurses to meet Army needs. It examines strategies the Army Nurse Corps has used to correct imbalances in nurse compensation and improve its ability to successfully compete with the civilian labor market for nurses. It draws upon the classic studies and critiques the Army for failing to incorporate lessons learned in devising successful strategies for recruiting and retaining nurses. Finally, it introduces early findings of the Army Nurse Corps Proud to Care Survey and uses them to formulate the author's view of elements that should form the basis for a strategic restructuring of the role, function and organization of Army nursing.

In this analysis of the global workforce, the Joint Learning Initiative, a consortium of more than 100 health leaders, proposes that mobilization and strengthening of human resources for health, neglected yet critical, is central to combating health crises in some of the world's poorest countries and for building sustainable health systems everywhere. Worker shortage, skill mix imbalance, maldistribution, negative work environments, and weak knowledge bases challenge nearly all countries. Especially in the poorest countries, the workforce is under assault by a triple threat of HIV/AIDS, out-migration, and inadequate investment. Effective country strategies should be launched and backed by international reinforcement. These include urgently mobilizing one million more health workers for Africa, and focusing efforts on the unremunerated community-level health workers, the majority of whom are women.

Ultimately, the crisis in human resources is a shared problem requiring shared responsibility for cooperative action. Alliances for action are recommended to strengthen the performance of all actors while expanding space and energy for new ones.

South African nurses care for patients in London, hospitals recruit Filipino nurses to Los Angeles, and Chinese nurses practice their profession in Ireland. In every industrialized country of the world, patients today increasingly find that the nurses who care for them come from a vast array of countries. In the first book on international nurse migration, Mireille Kingma investigates one of today's most important health care trends. The personal stories of migrant nurses that fill this book contrast the nightmarish existences of some with the successes of others. Health systems in industrialized countries now depend on nurses from the developing world to address their nursing shortages. This situation raises a host of thorny questions. What



causes nurses to decide to migrate? Is this migration voluntary or in some way coerced? When developing countries are faced with nurse vacancy rates of more than 40 percent, is recruitment by industrialized countries fair play in a competitive market or a new form of colonialization? What happens to these workers—and the patients left behind—when they migrate? What safeguards will protect nurses and the patients they find in their new workplaces? Highlighting the complexity of the international rules and regulations now being constructed to facilitate the lucrative trade in human services, Kingma presents a new way to think about the migration of skilled health-sector labor as well as the strategies needed to make migration work for individuals, patients, and the health systems on which they depend.

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