

Literature Review

Student's Name

Institution of Learning



## Literature Review

**1. Koetting, M. (2010). Safety in numbers: nurse-to-patient ratios and the future of healthcare./ Hospital: Man, woman, birth, death, infinity, plus red tape, bad behavior, money, God, and diversity on steroids. *Journal of Health Politics, Policy & Law*, 35(1), 127-133. doi:10.1215/03616878-2009-043.**

This article compares two books that discuss the severity of high nurse-to-patient ratio and reflects its impact on the quality of patient care and its humanistic part. The article is qualitative and does not present data in a numerical form. However, it does provide information about inference and the current state of the national healthcare system. As a result, the readers may get a general idea of the ratios in California and Australia. The article supports my proposed solution because it presents two viewpoints that are driven by the importance of proper nurse-to-patient ratio. In particular, the author presents the case of Victoria's public hospitals where the ratio of one nurse for four patients was ensured by hiring more nurses.

**2. Duffin, C. (2012). Nurse-to-patient ratios must increase to improve safety. *Nursing Older People*, 24(4), 6-7.**

This article describes the dangers of improper staffing in nursing homes by managers and makes suggestions for proper nurse-to-patient ratio in nursing home facilities. The article uses quantitative data that measures quality markers within the elderly population, which show the ideal ratios for nursing homes. The article supports employment of a larger quantity of nurses and the need to identify the acuity of each type of unit and to adjust the nurse-to-patient ratio accordingly. In particular, the author of the article insists that the ratio should not exceed seven patients at a time in order to achieve good quality of care.



**3. Tourangeau, A. E., Thomson, H., Cummings, G., & Cranley, L. A. (2013). Generation-specific incentives and disincentives for nurses to remain employed in acute care hospitals. *Journal of Nursing Management*, 21(3), 473-482. doi:10.1111/j.1365-2834.2012.01424.x.**

This article reviews the incentives associated with working in hospitals as per generation of nurses. This is a cross-sectional study that reviews the opinions of nurses in various generation caps. According to the results of the study, nurses support hiring more nurses as their number has a direct impact on the healthcare delivery. The article supports the proposed solution, because it shows that most nurses, regardless of generation, find that staffing is directly related to retention within the acute care setting.

**4. Hinno, S., Partanen, P., & Vehviläinen-Julkunen, K. (2012). Nursing activities, nurse staffing and adverse patient outcomes as perceived by hospital nurses. *Journal of Clinical Nursing*, 21(11/12), 1584-1593. doi:10.1111/j.1365-2702.2011.03956.x.**

This article investigates the relationships between nursing activities, nurse-to-patient ratios and unfavorable patient outcomes in hospital settings as perceived by registered nurses. It uses cross-sectional data to describe the opinions of nurses in Finland. The study shows that lower nurse staffing leads to an increased number of patient falls. Thus, the article supports the proposed solution, because the data confirms the need to employ more nurses to avoid poor patient outcomes.

**5. Harding, T., & Wright, M. (2014). Unequal staffing: A snapshot of nurse staffing in critical care units in New South Wales, Australia. *Contemporary Nurse: A Journal for the Australian Nursing Profession*, 47(1/2), 7-15. doi:10.5172/conu.2014.47.1-2.7.**

This article also provides the readers with the evidence that unsatisfying nurse-to-patient ratio leads to negative consequences. For this reason, the authors of the study conducted a



research in critical care units in Northwest Australia. The study took the form of a cross-sectional survey using administrative data from the researched destination places. The article supports the proposed change, as it maintains the idea that improper staffing affects the quality of patient care in critical areas.

**6. You, L., Aiken, L. H., Sloane, D. M., Liu, K., He, G., Hu, Y., & Sermeus, W. (2013). Hospital nursing, care quality, and patient satisfaction: Cross-sectional surveys of nurses and patients in hospitals in China and Europe. *International Journal of Nursing Studies*, 50(2), 154-161. doi:10.1016/j.ijnurstu.2012.05.003.**

This article is a complete evaluation of inputs in Chinese nursing institutions that act as a liaison between these resources and patient-related consequences with a particular focus on the issues that impact patients. It uses incidence rates to describe patient consequences in the Chinese population and compares them to those in Europe. It supports the proposed change, as it states that higher patient-to-nurse ratio is associated with poor nurse outcomes, as each additional patient per nurse increases both burnout and dissatisfaction along with the higher likelihoods of nurses reporting poor quality.

**7. Nurses' views sought for law on minimum staffing ratios. (2014). *Nursing Standard*, 28(38), 12. doi:10.7748/ns.28.38.12.s14.**

This article describes the problems associated with poor nursing ratios and makes suggestions for improving ratios in certain units. It does not provide quantitative data limiting the research only to the descriptive information. While it supports the practice of proper nurse-to-patient ratio, it does not provide strong data to be used as reference for the proposed change.

**8. Tellez, M. (2012). Work satisfaction among California registered nurses: A longitudinal comparative analysis. *Nursing Economics*, 30(2), 73-81.**



This article evaluates the effect of the nurse-to-patient ratio law on the nursing job satisfaction in order to advance the debate over the merits of nurse staffing law. It uses a longitudinal design that evaluates the prevalence rates of registered nurses within the state of California. It supports the proposed change, as it compares Californian nurses who are satisfied with those who are not in order to facilitate development-targeted retention interventions based on empirical evidence that supports the ratio regulations.

**9. Klassen, R. (2010). Staffing ratios hinder patient care... “It's time to stop the regulation of hospital nurse staffing dead in its tracks,” from the March/April 2010 Nursing Economics issue. *Nursing Economics*, 28(3), 214.**

This article expresses the idea that mandated nursing ratio is a hindrance, and not a positive move. The piece supports this statement with several examples. This journal is only descriptive and used as the representation of unquantifiable opinions. It does not support the proposed change, but it is useful, as it helps address the opponents of the suggested plan.

**10. McKenna, E., Clement, K., Thompson, E., Haas, K., Weber, W., Wallace, M., & Roda, P. I. (2011). Management/Administration. Using a nursing productivity committee to achieve cost savings and improve staffing levels and staff satisfaction. *Critical Care Nurse*, 31(6), 55-65. doi:10.4037/ccn2011826.**

This article reviews the effectiveness of nursing productivity models and analyzes the way they help improve nursing in terms of satisfaction, morale, and staffing. It provides the analysis of the practices of different hospitals and committees. It supports the proposed change, as it provides a suggestion for addressing staffing in the form of nurse-driven productivity committees.



**11. Duffin, C. (2012). Major study confirms link between nurse staff levels and care quality. *Nursing Standard*, 26(30), 7.**

This article reveals the results of a study with a large sample size that demonstrates correlation between poor staffing and negative patient outcomes. In terms of statistics, it describes mortality rates, readmission rates, and increased numbers of infections in patients who had experienced improper staffing. It supports my proposed change as it supports the idea that poor staffing negatively affects patient outcomes.

**12. Kendall-Raynor, P. (2011). RCN's fight for safe staffing levels will go on despite setback in Lords. *Nursing Standard*, 26(14), 10.**

This article is related to the Royal College of Nursing (RCN), a nursing organization supported by the Queen of England in its struggles to fight for proper nurse-to-patient ratios. It is descriptive, but presents the prevalence and incidence rates related to patient outcomes as references to the issues related to improper staffing. It supports the proposed change, as the RCN is one of the world's leading nursing organizations that strive for nursing excellence and optimal patient care. The article expresses the need to address proper ratios in order to insure proper patient outcomes.

**13. Gillen, S. (2012). Most nurses are struggling with inadequate staffing, survey shows. *Nursing Standard*, 26(34), 9.**

This article reviews the results of the survey that has been carried out in the United Kingdom about improper nursing ratios and their impact on the patients. It uses incidence rates to project the opinions of the nurses surveyed in the U.K. As a result, it sheds light on how nurses perceive improper nurse-to-patient ratios and how they affect patients in a negative way. This piece also calls for government assistance in the form of ratio mandates.



**14. de Castro, A., Fujishiro, K., Rue, T., Tagalog, E., Samaco-Paquiz, L., & Gee, G. (2010). Associations between work schedule characteristics and occupational injury and illness.**

***International Nursing Review*, 57(2), 188-194. doi:10.1111/j.1466-7657.2009.00793.x.**

This study investigates how work characteristics are associated with nurses' work-related injuries and illnesses over long work hours. This research explicates the negative effects of improper nurse-to-patient ratios on nurses' health. It uses cross-sectional analysis to make inferences based on the on information gathered. The article has taken a close look on work-related injuries affecting nurses, but it has not focused on improper nurse-to-patient ratios.

**15. Working group set to establish appropriate staff numbers. (2011). *Nursing Standard*, 25(49), 11.**

This article reveals the current processes being carried out in Northern Ireland with respect to proper nurse-to-patient ratios. This article is mainly descriptive, as it provides generalized information about the need for proper staffing in Northern Irish healthcare population. It supports the proposed plan, as it reflects a global need for proper nurse-to-patient ratios that are the goal in other countries, and not just the United States.

