



BOOMERS FACE NURSING BUST

The United States may be in the midst of the most dramatic nursing shortage ever—and it's only getting worse. The government projects that 450,000 additional nurses will be needed by 2008 to accommodate elderly baby boomers. To many medical professionals, this number seems unrealistic. With an aging nursing workforce, fewer students entering the profession, and droves of current nurses changing careers, as well as low unemployment, hospital downsizing, and changes in patient treatment, many are asking, How can we handle future needs when we can't provide adequate care now?

In reaction to the growing crisis and with the support of the American Hospital Association, many hospitals have resorted to mandatory overtime. Rather than close nursing units, turn patients away, or hire more staff, they require registered nurses to work additional hours on top of their 10- to 12-hour shifts. And nurses have to comply. Unlike other professionals, such as airline crews, healthcare workers are exempt from overtime laws that protect employees from unreasonable occupational demands.

The Hazards of Mandatory Overtime

Some nurses admit to working up to 20-hour shifts. Many complain of physical stress and emotional exhaustion; they worry about making mistakes. Indeed, the American Nurses Association has called for research into the relationship between staffing levels and medical errors. Even hospital injury lawsuits are starting to target corporate-level staffing decisions rather than individual negligence.

In response to mandatory overtime, several groups of nurses have gone on strike, demanding more conscientious working conditions and equitable wages. (According to nurses,

Systems Thinking Workout is designed to help you flex your systems thinking muscles. In this column, we introduce scenarios that contain interesting systemic structures. We then encourage you to read the story; identify what you see as the most relevant structures and themes; capture them graphically in causal loop diagrams, behavior over time graphs, or stock and flow diagrams; and, if you choose, send the diagrams to us with comments about why the dynamics you identified are important and where

their average full-time salary of \$46,782 has not increased in line with the salaries of other medical professionals.) Many nurses, particularly experienced, middle-aged women, have left the profession. One recruiter concedes that their departure is understandable: There are easier ways to earn a living than standing on your feet for 8 to 12 hours a day doing challenging physical labor.

Calls for Change

Legislators in more than a dozen states have begun to take nurses' complaints seriously. They're trying to ban the practice of mandatory overtime and allocate money for improved salaries. But so far, most of these efforts have yet to address the more fundamental issue: There simply aren't enough nurses to take care of all the patients. Relatively little effort has been made to create policies that would lead to an increase in the number of nurses, nursing assistants, and LPNs; attract young people to the profession; or retain the more experienced nurses who have valuable skills and the ability to train new recruits.

Some communities have not waited for legislation to combat the staffing crisis. For instance, in Walnut Creek, CA, public and private organi-

zations have initiated the "Career Ladder," which pays workers at the city's Kaiser Hospitals to train to become nursing assistants. Unfortunately, most hospital administrators are not so far-sighted; they're still addressing shortages by offering sign-on bonuses, relocation coverage, or new premium packages, all of which redistribute, not increase, the supply of nurses.

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Meanwhile, nurses continue to experience burnout and discontentment at alarming rates. One doctor hopes that The Institute of Medicine's November 1999 report, which cited high incidence of hospital medical errors throughout the country, will raise the public's awareness not only of the need for improved patient safety but for dealing with the problem of nursing supply and demand. After all, the next life a nurse saves may be yours. ■

—Kali Saposnick

Sources: Sanjay Gupta, M.D., "U.S. Nursing Shortage 'Going into Crisis,'" CNN Medical News, May 7, 2001; Brenda Nevidjon, R.N., and Jeanette Ives Erickson, R.N., "The Nursing Shortage: Solutions for the Short and Long Term," Online Journal of Issues in Nursing, January 31, 2001.

YOUR THOUGHTS

Does a systemic analysis of these trends suggest alternative ways to address the nursing shortage? Let us know what you think!