

WSNA/PEACEHEALTH

Washington State Nurses Association

LOCAL UNIT NEWSLETTER

February 2006

From the Desk of

By Connie Ramos, RN



SAFE STAFFING

After attending Legislation Day in Olympia on January 30, 2006, Connie serves as a grievance officer at Peace Health LCR in Longview, WA

Studies have shown that providing safe staffing reduces length of stay, (LOS), improves patient outcomes and increases nurse satisfaction which leads to increased patient satisfaction, while increasing staffing and RN skills. The costs to the hospital are minimal and at times actually brings in a profit due to a decreased LOS. This article will highlight the benefits of three studies directed at nursing ratio and staffing.

Blegan, 1998, showed that if the RN ratio of client care was less than 50%, there was an increase in medication errors and adverse effects. To have a ratio above 85%, leads to an increased number of medication errors. From this study, the recommended RN ratio should be no less than 50% of scheduled staff.

Lichtig, 1999, showed that the higher the percentage of RNs, the better the outcome and the lower the LOS for patients.

Aiken, 2002, shows that with each additional patient there is a 7% increase in deaths occurring in the 30 day period after hospitalization and also failure to rescue of

clients. By giving a nurse an extra patient, the risk for burnout increases by 23%, while job satisfaction decreases by 15%.

Needleman, 2002, states that with an increased RN staffing that adverse outcomes are decreased from 3-12% and that by increasing all staffing levels the adverse outcomes decrease from 2-25%. If RN hours on medical units are increased, there is a decrease in LOS, UTIs and GI Bleeds, while surgical patients benefit from a decrease in pneumonia, shock, failure to rescue and cardiac arrest.

By increasing overall hours, the aforementioned benefits are achieved while the net cost is as little as 1.5%, if skill mix was increased while maintaining the nurse staffing hours, a reduction of \$242 million were seen. (Needleman, 2006)

With all of these studies, the outcome is that by having a minimum of 50% RN hours on the floor with a maximum of 85%, everyone benefits, from a lower incidence of errors to decreased length of stay to a higher nurse retention and satisfaction rating. To do anything less than this leads to potential sentinel events, burnouts, and nursing shortage.

Reference: Cheryl Peterson, presentation at WSNA Nursing Legislation Day, 1/30/06, cheryl.peterson.org

Peacehealth

Local Unit News



WHAT DO NURSES REALLY DO?



Dear Nursing Colleagues: I want to encourage you to go to Medscape to read the latest article by Suzanne Gordon. **WHAT DO NURSES REALLY DO?** It reminds you of all that we actually do in our day to day work lives and how much we contribute to our patients and their recovery.

The site is:

http://www.medscape.com/viewpublication/527_index

You can register for Medscape at www.medscape.com (it's free)

Suzanne Gordon is the author of NURSING AGAINST THE ODDS.

Membership Reminder

It is the responsibility of each nurse to notify the Washington State Nurses Association of any change in work status which may include but are not limited to: **name, address, phone number, FTE increase or decrease, leave of absence, medical leave, maternity leave, leaving or joining a bargaining unit.** This change must be done in writing either by using a *Change of Information Card* or sending an email to wsna@wsna.org.

The Cabinet on Economic and General Welfare (E&GW) policy states, when a nurse is on an unpaid leave of absence, the dues are adjusted to the Reduced Membership Category during the unpaid Leave of Absence period. The accumulated dues payment is to begin within 90 day of return to work. The nurse will have up to twelve months to complete payment of these dues. *It is the responsibility of the nurse to notify WSNA of this change in work status.*



Mark Your Calendars Now!

March 23rd, we will be holding the first Local Unit Meeting of the Bargaining Unit for 2006. The meetings will be from 1:30 until 2:30 pm and then again from 4:00 until 5:00 pm. Barbara Frye will be here to teach a class on what is the purpose of an "ASSIGNMENT DESPITE OBJECTION FORM". **WHY** you fill them out. **WHO** do you give them to? **WHAT** kind of a response can you expect? Refreshments will be served. Please join us as there seems to be a little confusion as to the purpose of the form.

We will be looking for a few interested nurses to run for Local Unit Officers. Think about it. There is on the job training offered by WSNA. There is more training when you go to Lake Chelan for Leadership Training. Being a Local Unit Officer gives you insight into what goes on at the State and National Levels of WSNA and ANA; not to mention how we are aligned with the UAN. It is an exciting time to be a nurse because there are so many ways to be involved.

It is our intent to have every nursing unit represented by a Local Unit Representative. A Local Unit Representative is the eyes and ears of the Local Unit. The time commitment is about three hours a month. Think about representing your Unit.