

# Nursing shortage: healthcare losing heart and hand essay

[Business](#), [Accounting](#)



Nursing Shortage: Healthcare Losing Heart and Hand Nurses do more than taking care of the sick because at present nurses do health teaching and positions in education, administration, research, and publication in many settings where healthcare is needed. This is the reason why nurses are dubbed as “ the hearts and hands of health care” (Friedman, 1991) and they continue to be the largest group of health care professionals. Nursing is unique because it encompasses health care professionals that are predominantly female. While the majority of nurses still work in hospitals, nursing practice is shifting to a focus on disease prevention and modification of lifestyles. This is why we can see nurses working in community clinics, doctors’ offices, long-term care facilities, schools, and patients’ homes. There is also a need for experienced nurses in insurance companies, peer review organizations, managed care organizations, and pharmaceutical companies. However, there is a threat that looms the nursing profession. According to the U.

S. Department of Health and Human Services (USDHHS, 2002), there is a projected shortage of nurses in the United States ballooning to 800, 000 by the year 2020. is thus cause for concern among other countries also experiencing nurse shortages.

Worse, the current nursing shortage is mainly centered in large urban hospitals that provide high-tech care to sicker patients, thus the shortage is really of highly skilled nurses. A recent study by Aiken (June 2007) pointed out one problem that may be vital in contributing to the existing shortage of nurses in the United States. She identified that the “ production capacity of

nursing schools is lagging current and estimated future needs, suggesting a worsening shortage and creating a demand for foreign-educated nurses". Citing that 8 percent of U. S. registered nurses (RNs), numbering around 219, 000, are estimated to be foreign educated, while eighty percent are from lower-income countries. In fact, the Philippines is the major source country, accounting for more than 30 percent of U. S.

foreign-educated nurses. Because of the extreme need for skilled nurses, Aiken (June 2007) revealed that nurse immigration to the United States has tripled since 1994, to close to 15, 000 entrants annually. Foreign-educated nurses are located primarily in urban areas, most likely to be employed by hospitals, and somewhat more likely to have a baccalaureate degree than native-born nurses. However, the supply of RNs in the United States can be even more lowered because of the severe restrictions on nurse immigration. Also, American nursing schools are turning away large numbers of native applicants because of capacity limitations. According to Institute for the Future (2003), multiple factors also account for the shortage of RNs and most significantly among nurses choosing to work in hospital settings. The major impact has fallen on hospitals - on the acute care nursing units in the emergency department and in the operating room. As hospitals' reimbursements, revenues, and margins have been squeezed by private and government payers, patient-to-nurse ratios have increased, nursing salaries have fallen behind other sectors, overtime (in many cases " mandatory") has increased, and job satisfaction has gone downhill.

Stress, irregular working hours, declining working conditions, low morale, and frustration at providing suboptimal care collectively have amplified the shortage as disaffected nurses leave their jobs, some to work in other health care settings and some to work for vendors, insurers, and managed care organizations. Fact is that high school graduates, particularly females, no longer view nursing as an attractive career when compared to other opportunities within health care or in other service industries. The young adult public is aware of the “downsides” of the nursing profession, and therefore chooses other careers with better pay and more satisfying work. Thus, to ease nurse shortages, nurse associations have sought various types of legislation to increase the roles, responsibilities, and incomes of nurses. These legislative remedies have included federal subsidies to nursing schools, comparable worth for setting nurse wages, minimum nurse staffing ratios in hospitals and other care settings, as well as efforts to prevent the merger and closure of hospitals. Since there is also nurses coming from foreign countries, legislation should also be made to ease the entry of qualified nurse applicants in the United States. However, nurse aspirations of greater responsibilities and independence, along with higher incomes, brought through by government regulation can be complemented by making the healthcare industry more competitive. In their search for lower costs and increased quality in a competitive environment, managed care organizations and group practices should be less bound by traditional dividing lines between nurses and physicians.

In this regard, by aiming for higher incomes for nurses and support by legislative actions to increase the supply of nurses, the nursing shortage can be alleviated and this can prevent the healthcare industry from losing its heart and hand. References Aiken, L. H. (2007, June). U. S. Nurse Labor Market Dynamics are Key to Global Nurse Sufficiency, *Health Services Research* 42(3): 1299-1321.

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