

Low nurse and support staffing tied to higher inpatient mortality

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(HealthDay)—Low levels of nurse and nursing support staffing are

associated with increased inpatient mortality, according to a study published online Aug. 7 in *BMJ Quality & Safety*.

Jack Needleman, Ph.D., from the Fielding School of Public Health at the University of California in Los Angeles, and colleagues examined the association of inpatient [mortality](#) with patients' cumulative exposure to shifts with low registered nurse (RN) staffing, low nursing support staffing, and high patient turnover. The analysis included data from a three-campus U.S. academic medical center (2007 to 2012). Low staffing was defined as staffing below 75 percent of annual median unit staffing for each staff category and shift type, while high patient turnover per day was defined as admissions, discharges, and transfers one [standard deviation](#) above unit annual daily averages.

The researchers found that the hazard ratio (HR) of inpatient mortality was 1.027 (95 percent confidence interval [CI], 1.002 to 1.053; P = 0.035) for exposure to shifts with low RN staffing only, 1.030 (95 percent CI, 1.017 to 1.042; P

"The results should encourage hospital leadership to assure both adequate RN and nursing support staffing," the authors write.

More information: [Abstract/Full Text \(subscription or payment may be required\)](#)

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