The Impact of the National Nursing Shortage on Quality Nephrology Nursing Care

The American Nephrology Nurses' Association (ANNA) recognizes that adequate nurse staffing is critical to the delivery of quality patient care. In testimony before the Senate Committee on Governmental Affairs in June 2003, Dr. Dennis O'Leary, then President of the Joint Commission on Accreditation of Healthcare Organizations (JCAHO), addressed issues in patient safety and what is needed to create a true culture of safety in our health care institutions. One of the strategies Dr. O'Leary addressed was entitled “Improving and Investing in Professional Education,” in which he indicated that data demonstrate that inadequate numbers of nurses lead to medical errors and diminish overall quality of care (O'Leary, 2003).

The Health Resources and Services Administration (HRSA) has published a document reviewing the projected supply, demand, and shortage of Registered Nurses (RNs) comparing the baseline supply and demand projections. HRSA suggests that by 2020 the national demand is projected to increase to more than 2.8 million full-time employed RNs and, if current trends continue, HRSA suggests that only 64% of the projected demand will be met (HRSA, 2004). ANNA believes that nurses specializing in nephrology are critical to the delivery of quality care for patients with acute kidney failure, chronic kidney disease, and transplantation.

It is the position of ANNA that:

- All individuals have a right to competent nursing care of the highest quality. The nursing shortage has the potential to adversely affect patient outcomes and quality of care in all areas of nursing.
- ANNA will actively partner with nursing and other organizations to develop programs to address the nursing shortage.
- ANNA will work to attract nurses to the field of nephrology by: (1) providing opportunities for nurses and nursing students to learn more about nephrology nursing, kidney disease management, and nursing care of the chronically ill; (2) examining the nephrology nursing workforce and the nature of nephrology practice settings; and (3) providing mentoring opportunities.
- ANNA will actively encourage nursing research that seeks to examine: (1) specific characteristics of nephrology work environments that attract and retain nurses as well as those factors that contribute to attrition; (2) how technology can be used to redesign nephrology workplace environments to meet the needs of patients and the nurses providing their care; and (3) the impact of professional nursing care on patient outcomes.
- ANNA supports the employment of immigrant nurses who meet U.S. standards as a measure to deal with the nursing shortage, providing that the U.S. simultaneously takes the steps necessary to increase the supply of nurses needed to meet the demand. ANNA’s intent is not to disadvantage their countries of origin, but to support the right of immigrant nurses to seek a better life and a job with decent pay and benefits.
- ANNA supports public policies that: (1) establish or expand loan repayment programs and tax incentives that encourage individuals to enter the nursing profession or to advance their nursing education; (2) encourage nurses to practice in geographically underserved areas; (3) fund nursing schools to recruit and retain adequate faculty to prepare the needed number of nurses; and (4) attract young people and minorities to the nursing profession.
Background and Rationale

According to projections released in February 2004 from the Bureau of Labor Statistics, RNs top the list of the 10 occupations with the largest projected job growth in the years 2002-2012 (American Nurses Association, 2006). The American Nurses Association (ANA), in addressing the condition of the nation’s workforce, wrote that with the rapidly growing complexity of the health care system, the current balance of educationally-prepared RNs must be reversed (ANA, 2005). However, a National League of Nursing (NLN) study in 2005 confirmed that an estimated 147,000 nursing school applicants were turned away from nursing programs due to a critical shortage of nursing school faculty.

With a singular focus on the nursing shortage, the JCAHO published a white paper entitled “Health Care at the Crossroads: Strategies for Addressing the Evolving Nursing Crisis” (JCAHO, 2002, 2005), indicating that by 2010 it is projected that the average age of the working RN will be 50 and that average age is increasing at a rate more than twice that of all other workforces in the country. A study by Peter Buerhaus of Vanderbilt University on aging nurses published in the November 17, 2004, issue of Health Affairs predicts that over the next two decades a further aging of the RN workforce will occur, with more than 40% of the RN workforce expected to be older than 50 years (Buerhaus, Staiger, & Auerbach, 2004).

The chronic kidney disease patient population continues to grow, in part because improvements in the quality of care delivered to those with heart disease and diabetes mellitus are allowing patients to live longer. As our population ages, increasing numbers of Americans will require nephrology-related services. Nephrology nurses are critical to the delivery of high quality care to individuals suffering from kidney impairment. As the need for kidney-related services and care increases, so will the demands for nursing professionals to provide care. Without nurses who have expertise in nephrology, quality outcomes for patients with kidney disease cannot and will not be achieved. Because this nursing shortage will tax all nurses, ANNA remains committed to working with other nursing organizations to develop policy proposals designed to attract new students to the nursing profession.

References


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**ANNA Position Statements are reviewed and reaffirmed biennially.**