

Note to readers: These tables provide a quick overview of the major finding of studies included in Lynn Unruh's literature review. Some findings may have been reported only for select subgroups. For more comprehensive information, readers should consult the studies.

Results: (–), statistically negative relationship between nurse staffing and the patient outcome (higher staffing is related to lower incidences or rates of that patient outcome); (+), statistically positive relationship between nurse staffing and the patient outcome (higher staffing is related to higher incidences or rates of that patient outcome); NS, results were not significant.

Notes: APD, adjusted patient-days; FTE, full-time employees; GI, gastrointestinal; HPPD, hours per patient-day; LN, licensed nurses; RPN, registered practical nurses (Canadian study); UTI, urinary tract infection.

* Acuity adjusted.

† Medical patients only.

‡ Surgical patients only.

§ Original staffing measure studied was the patient-to-nurse ratio. Measure has been inverted in this table for consistency of explanation of results.

|| Number of licensed nurse full-time employees (FTEs). Patient volume and acuity are controlled in the regression equation.

Table 1. Nurse Staffing and Patient Outcomes: Studies and Results, 2002–2006 (21 studies)

STUDY	STAFFING MEASURE	OUTCOME	
Blood Stream Infections			
Cho S, et al. <i>Nurs Res</i> 2003;52(2):71-9.	RN HPPD	NS	
	RN hrs	NS	
	All hrs	NS	
Whitman GR, et al. <i>J Nurs Adm</i> 2002;32(12):633-9.	RN HPPD	NS (central line infection)	
Cardiac Arrest or Shock			
Needleman J, et al. <i>New Engl J Med</i> 2002;346(22):1715-22.	RN hrs:inpatient-day*	NS†	NS‡
	RN hrs:all	(-)†	NS‡
Complications			
Dang D, et al. <i>Heart Lung</i> 2002;31(3):219-28.	RN:patient ratio in ICU	(-)	
Elting LS, et al. <i>Cancer</i> 2005;104(5):975-84.	RN:patient ratio	NS	
Newhouse RP, et al. <i>AORN J</i> 2005;81(3):508-28.	RN staffing	NS	
Falls			
Cho S, et al. <i>Nurs Res</i> 2003;52(2):71-9.	RN HPPD	NS	
	RN hrs	NS	
	All hrs	NS	
Dunton N, et al. <i>Nurs Outlook</i> 2004;52:53-9.	RN HPPD	(-)	
	RN hrs:all hrs	(-)	
	Contract nurse hrs	(+)	
Krauss MJ, et al. <i>J Gen Intern Med</i> 2005;20:116-22.	Nurse:patient ratio§	(-)	
McGillis Hall L, et al. <i>J Nurs Adm</i> 2004;34(1):41-5.	RNs:RPNs	NS	
Unruh L. <i>Med Care</i> 2003;41(1):142-52.	LN:FTEs	(-)	
	LN:all nurses	(+)	
Whitman GR, et al. <i>J Nurs Adm</i> 2002;32(12):633-9.	RN HPPD	(-)	
Failure to Rescue			
Aiken LH, et al. <i>JAMA</i> 2002; 288(16):1987-93.	RN:patient ratio§	(-)	
Aiken LH, et al. <i>JAMA</i> 2003;290(12):1617-23.	RN:patient ratio§	(-)	
	RN education level	(-)	
Halm M, et al. <i>Clin Nurs Spec</i> 2005;19(5):241-51.	RN:patient ratio	NS	
Needleman J, et al. <i>New Engl J Med</i> 2002;346(22):1715-22.	RN hrs:inpatient-day*	NS†	(-)‡
	RN hrs:all hrs	(-)†	NS‡
Seago JA, et al. <i>J Nurs Adm</i> 2006;36(1):13-21.	RN HPPD	NS	
	Non-RN HPPD	(+)	
	RN skill mix	NS	
	Total HPPD	(+)	

STUDY	STAFFING MEASURE	OUTCOME	
Medication errors			
McGillis Hall L, et al. <i>J Nurs Adm</i> 2004;34(1):41-5.	RNs:RPNs	(-)	
Whitman GR, et al. <i>J Nurs Adm</i> 2002;32(12):633-9.	RN HPPD	(-)	
Mortality			
Aiken LH, et al. <i>JAMA</i> 2002;288(16):1987-93.	RN:patient ratio§	(-)	
Aiken LH, et al. <i>JAMA</i> 2002;290(12):1617-23.	RN:patient ratio§	(-)	
	RN education level	(-)	
Elting LS, et al. <i>Cancer</i> 2005;104(5):975-84.	RN:patient ratio	(-)	
Estabrooks CA, et al. <i>Nurs Research</i> 2005;54(2):74-84.	RNs:all nurses	(-)	
	RN education level	(-)	
	Perceptions of RN adequacy	NS	
	Temporary nursing staff	(+)	
Halm M, et al. <i>Clin Nurs Spec</i> 2005;19(5):241-51.	RN:patient ratio	NS	
Mark BA, et al. <i>Health Serv Res</i> 2004;39(2):279-99.	RN:inpatient day	(-)	
Morales U, et al. <i>Crit Care Med</i> 2003;31(3):858-63.	≥ 3 admissions per shift	NS	
Needleman J, et al. <i>New Engl J Med</i> 2002;346(22):1715-22.	RN hrs:inpatient-day*	NS†	NS‡
	RN hrs:all hrs	NS†	NS‡
Newhouse RP, et al. <i>AORN J</i> 2005;81(3):508-28.	RN staffing	NS	
	Agency RN use	(-)	
Person SD, et al. <i>Med Care</i> 2004;42(1):4-12.	RN:average daily census	(-)	
Rothberg MB, et al. <i>Med Care</i> 2005;43(8):785-91.	Nurse:patient ratio	(-)	
Tourangeau AE, et al. <i>Nurs Research</i> 2002;55(4):71-88.	RN hrs:all hrs	(-)	
	RN HPPD	NS	
Pneumonia			
Cho S, et al. <i>Nurs Res</i> 2003;52(2):71-9.	RN HPPD	(-)	
	RN hrs	(-)	
	All hrs	NS	
Kovner C, et al. <i>Health Serv Res</i> 2002;37(3):611-29.	RN:APD	(-)	
Mark BA, et al. <i>Health Serv Res</i> 2004;39(2):279-99.	RN:inpatient day	NS	
Needleman J, et al. <i>New Engl J Med</i> 2002;346(22):1715-22.	RN hrs:inpatient-day*	NS†	NS‡
	RN hrs:all hrs	(-)†	NS‡
Unruh L. <i>Med Care</i> 2003;41(1):142-52.	LN:FTEs	(+)	
	LN:all nurses	(-)	
Postoperative infections			
Cho S, et al. <i>Nurs Res</i> 2003;52(2):71-9.	RN HPPD	NS	
	RN hrs	NS	
	All hrs	NS	
McGillis Hall L, et al. <i>J Nurs Adm</i> 2004;34(1):41-5.	RNs:RPNs	(-)	
	Years of nursing experience	(-)	
Needleman J, et al. <i>New Engl J Med</i> 2002;346(22):1715-22.	RN hrs:inpatient-day*	NS†	NS‡
	RN hrs:all hrs	NS†	NS‡
Unruh L. <i>Med Care</i> 2003;41(1):142-52.	LN:FTEs	NS	
	LN:all nurses	NS	
Patient Satisfaction			
Seago JA, et al. <i>J Nurs Adm</i> 2006;36(1):13-21.	RN HPPD	NS	
	Non-RN HPPD	NS	
	RN skill mix	(+)	
	Total HPPD	(+)	

STUDY	STAFFING MEASURE	OUTCOME	
Pulmonary Compromise			
Kovner C, et al. <i>Health Serv Res</i> 2002;37(3):611-29.	RN:APD	NS	
Unruh L. <i>Med Care</i> 2003;41(1):142-52.	LN:s:FTEs	(-)	
	LN:s:all nurses	NS	
Restraint Use			
Whitman GR, et al. <i>J Nurs Adm</i> 2002;32(12):633-9.	RN HPPD	(-)	
Skin Breakdown			
Cho S, et al. <i>Nurs Res</i> 2003;52(2):71-9.	RN HPPD	NS	
	RN hrs	NS	
	All hrs	(+)†	
Mark BA, et al. <i>Health Serv Res</i> 2004;39(2):279-99.	RN:inpatient day	NS	
Needleman J, et al. <i>New Engl J Med</i> 2002;346(22):1715-22.	RN hrs:inpatient-day*	NS†	NS‡
	RN hrs:all hrs	NS†	NS‡
Unruh L. <i>Med Care</i> 2003;41(1):142-52.	LN:s:FTEs	(-)	
	LN:s:all nurses	(-)	
Whitman GR, et al. <i>J Nurs Adm</i> 2002;32(12):633-9.	RN HPPD	NS	
Thrombosis			
Kovner C, et al. <i>Health Serv Res</i> 2002;37(3):611-29.	RN:APD	NS	
Needleman J, et al. <i>New Engl J Med</i> 2002;346(22):1715-22.	RN hrs:inpatient-day*	NS†	NS‡
	RN hrs:all hrs	NS†	NS‡
UTIs			
Cho S, et al. <i>Nurs Res</i> 2003;52(2):71-9.	RN HPPD	NS	
	RN hrs	NS	
	All hrs	NS	
Kovner C, et al. <i>Health Serv Res</i> 2002;37(3):611-29.	RN:APD	NS	
Mark BA, et al. <i>Health Serv Res</i> 2004;39(2):279-99.	RN:inpatient day	NS	
McGillis Hall L, et al. <i>J Nurs Adm</i> 2004;34(1):41-5.	RNs:RPNs	NS	
Needleman J, et al. <i>New Engl J Med</i> 2002;346(22):1715-22.	RN hrs:inpatient-day*	(-)†	NS‡
	RN hrs:all hrs	(-)†	(-)‡
Unruh L. <i>Med Care</i> 2003;41(1):142-52.	LN:s:FTEs	(-)	
	LN:s:all nurses	NS	
Upper GI Bleeding			
Needleman J, et al. <i>New Engl J Med</i> 2002;346(22):1715-22.	RN hrs:inpatient-day*	(-)†	NS‡
	RN hrs:all hrs	(-)†	NS‡

Results: For quantitative study results: (–), statistically negative relationship between nurse staffing or workload and the nursing outcome; (+), statistically positive relationship between nurse staffing or workload and the nursing outcome; NS, results were not significant. For qualitative or descriptive study results: (↑) positive relationship between nurse staffing or workload and the nursing outcome; (↓), negative relationship between nurse staffing or workload and the nursing outcome; blank cell, the specific outcome was not studied. The indicated staffing or workload measure may have been one of many factors influencing the given nurse outcome.

Notes: * This is an actual patient-to-nurse ratio, obtained from administrative data and linked to nurse survey data.

Table 2. Nurse Staffing and Nurse Outcomes: Studies and Results, 1994–2006 (23 studies)

STUDY	PERCEIVED STAFFING OR WORKLOAD MEASURE	OUTCOME
Burnout		
Aiken LH, et al. <i>JAMA</i> 2002;288(16):1987-93.	High patient:nurse ratio*	(+)
Demerouti E, et al. <i>J Adv Nurs</i> 2000;32(2):454-64.	High job demands	(+)
Disengagement and intent to quit		
Demerouti E, et al. <i>J Adv Nurs</i> 2000;32(2):454-64.	High job demands	(+)
Gardulf A, et al. <i>J Nurs Manag</i> 2005;13(4):329-37.	Stressful work	(+)
	High work tempo	(+)
Geiger-Brown J, et al. <i>AAOHN J</i> 2004;52(1):16-22.	High work demands	(↑)
Hayhurst A, et al. <i>J Nurs Care Qual</i> 2005;20(3):283-8.	High work pressure	NS
Exhaustion		
Demerouti E, et al. <i>J Adv Nurs</i> 2000;32(2):454-64.	High job demands	(+)
Halm M, et al. <i>Clin Nurs Spec</i> 2005;19(5):241-51.	Clinical specialty	NS
Janssen PPM, et al. <i>J Adv Nurs</i> 1999;29(6):1360-9.	High workload	(+)
McNeese-Smith D. <i>J Adv Nurs</i> 1999;29(6):1332-41.	Work overload	(↑)
Sheward L, et al. <i>J Nurs Manag</i> 2005;13:51-60.	Low RN:patient ratio	(+)
Health Status		
Landeweerd J, Boumans N. <i>Journal of Occupational and Organizational Psychology</i> 1994;67(3):207-18.	Work pressure	(–)
Weyers S, et al. <i>Scand J Caring Sci</i> 2006;20:26-34.	Effort-reward imbalance	(–)
Job Dissatisfaction		
Aiken LH, et al. <i>JAMA</i> 2002;288(16):1987-93.	High patient:nurse ratio*	(+)
Dunn S, et al. <i>J Nurs Manag</i> 2005;13:22-31.	Inadequate staffing	(↑)
	Lack of time to do work	(↑)
Halm M, et al. <i>Clin Nurs Spec</i> 2005;19(5):241-51.	Clinical specialty	NS
Khowaja K, et al. <i>J Nurs Manag</i> 2005;13:32-9.	High workload	(↑)
McNeese-Smith D. <i>J Adv Nurs</i> 1999;29(6):1332-41.	Work overload	(↑)
Sheward L, et al. <i>J Nurs Manag</i> 2005;13:51-60.	Low RN:patient ratio	(+)
Job Satisfaction		
Davidson H, et al. <i>Med Care</i> 1997;35(6):634-45.	Work overload	(–)
Dunn S, et al. <i>J Nurs Manag</i> 2005;13:22-31.	Inadequate staffing	(↓)
	Lack of time to do work	(↓)
Gaertner S. <i>Human Resource Management Review</i> 1999;9(4):479-93.	High workload	(–)
Kovner C, et al. <i>J Nurs Scholarsh</i> 2006;38(1):71-9.	High workload	NS
Shaver KH, Lacey LM. <i>J Nurs Adm</i> 2003;33(3):166-72.	Understaffing	(–)

STUDY	PERCEIVED STAFFING OR WORKLOAD MEASURE	OUTCOME
Life Satisfaction and Quality		
Demerouti E, et al. <i>J Adv Nurs</i> 2000;32(2):454-64.	High job demands	(-)
Geiger-Brown J, et al. <i>AAOHN J</i> 2004;52(1):16-22.	High work demands	(↓)
Injury: Assault		
Lanza ML, et al. <i>Journal of the American Psychiatric Nurses Association</i> 1997;3(2):42-8.	Low number of RNs	NS
Injury: Musculoskeletal		
Bruce S, et al. <i>Can Nurse</i> 2002;98(9):12-7.	High workload	(+)
Trinkoff AM, et al. <i>Am J Prev Med</i> 2003;24(3):270-5.	Physical demands	(+)
Injury: Needlestick		
Clarke SP, et al. <i>Am J Public Health</i> 2002;92(7):1115-9.	High patient:nurse ratio	(+)
Clarke SP, et al. <i>Am J Infect Control</i> 2002;30(4):207-16.	High workload	(+)
Stress		
Bruce S, et al. <i>Can Nurse</i> 2002;98(9):12-7.	High workload	(+)
Turnover		
Strachota E, et al. <i>J Nurs Adm</i> 2003;33(2):111-7.	Poor staffing	(↑)
	Poor work environment	(↑)
	Work stress	(↑)

Results: (–), statistically negative relationship between nurse staffing and the financial outcome; (+), statistically positive relationship between nurse staffing and the financial outcome; NS, results were not significant.

Notes: HPPD, hours per patient-day; LOS, length of stay.

* Nonlinear relationship: although higher staffing levels were associated with higher costs, so were below-average staffing levels.

† Recommended nurse hrs:actual nurse hours.

‡ Nurse staffing is related to increased patient complications, which is related to increased lengths of stay.

Table 3. Nurse Staffing and Financial Outcomes: Studies and Results, 1983–2007 (18 studies)

STUDY	STAFFING OR WORKLOAD	OUTCOME
Costs: General		
Glandon G, et al. <i>Nurs Manag</i> 1989;20(5):30-3.	RN skill mix	(+)
Halloran EJ. <i>Nurs Manag</i> 1983;14(8):18-22.	RN skill mix	(–)
Jones CJ. <i>J Nurs Adm</i> 2005;35(1):41-49.	RN turnover	(+)
Shukla RK. <i>Inquiry</i> 1983;20:173-84.	RN skill mix	(+)
Strachota E, et al. <i>J Nurs Adm</i> 2003;33(2):111-7.	RN turnover	(+)
Titler M, et al. <i>Nurs Econ</i> 2005;23(6):290-306.	RN HPPD	(+,-)*
Titler M, et al. <i>Nurs Outlook</i> 2007;55(1):5-14.	RN HPPD	(–)
	RN HPPD below median	(+)
Costs: Patient Complications		
Cho S, et al. <i>Nurs Res</i> 2003;52(2):71-9.	RN hrs	(–)
	RN skill mix	(–)
Dimick JB, et al. <i>Am J Crit Care</i> 2001;10(6):376-82.	RN:patient ratio	(–)
Costs: Operating		
Bloom JR, et al. <i>Soc Sci Med</i> 1997;44(2):147-55.	RN skill mix	NS
	RN tenure > 5 yrs	(–)
	Part-time RN staff	(–)
	Temporary RNs	(+)
McCue M, et al. <i>Journal of Health Care Finance</i> 2003;29(4):54-76.	RN hrs	(+)
	RN skill mix	(+)
Costs: Personnel		
Bloom JR, et al. <i>Soc Sci Med</i> 1997;44(2):147-55.	RN skill mix	NS
	RN tenure > 5 yrs	(–)
	Part-time RN staff	(–)
	Temporary RNs	NS
Costs: Net		
Needleman J, et al. <i>Health Affairs</i> 2006;25(1):204-11.	RN HPPD	(+)
	RN skill mix without more hrs	(–)
Rothberg MB, et al. <i>Med Care</i> 2005;43(8):785-91.	Patient:nurse ratio	(–)
LOS		
Behner KG, et al. <i>Health Care Manage Rev</i> 1990;15(4):63-71.	Nurse workload†	(+) [‡]
Brown MP, et al. <i>Advances in Health Care Management</i> 2002;3:45-57.	RN hrs	(–)
Cho S, et al. <i>Nurs Res</i> 2003;52(2):71-9.	RN hrs	(–)
	RN skill mix	(–)
Morales U, et al. <i>Crit Care Med</i> 2003;31(3):858-63.	≥ 3 admissions per shift	NS
Needleman J, et al. <i>Health Affairs</i> 2006;25(1):204-11.	RN HPPD	(–)
Pronovost PJ, et al. <i>JAMA</i> 1999;281(14):1310-7.	RN:patient ratio	(–)
Shamian J, et al. <i>J Nurs Adm</i> 1994;24(7/8):52-7.	RN HPPD	(–)
Profits		
McCue M, et al. <i>Journal of Health Care Finance</i> 2003;29(4):54-76.	RN hrs	NS
	RN skill mix	(–)