



Advantages of a nursing shortage

● Accentuating the upside of scarcity.

SINCE THE DAY I BECAME A NURSE, it seems there's been a nursing shortage. No matter where you practice, everybody talks about it. Is it because we never seem to be able to fill all of our patient care, academic, teaching, or research needs? Perhaps. The reason may change over time, but I do know this: I'll never see the headline *We've Stopped Hiring! We Have Plenty of Nurses!* Of course not, it's an absurd idea, because patient care demands continue to increase, career opportunities for nurses continue to expand, and professional development pathways continue to grow.

The American Nurses Association's Nurses by the Numbers™ (www.nursingworld.org/ANA-NursesbytheNumbers) illustrates positive trends for the nursing profession but cites the U.S. Bureau of Labor Statistics projection that 1.13 million vacancies for RNs will emerge between 2012 and 2022. Addressing that gap is called, by some, healthcare's impending "gloom and doom" issue. I prefer to call it the silver lining in the storm clouds. Take a look at how the shortage has helped us in the past and is actually helping us now.

Increased professional recognition

Nurses' important role becomes more visible during times of scarcity. Appreciation grows as healthcare leaders reward the hard work of managers and front-line caregivers. In addition to salary increases, the past 30+ years have seen the creation of clinical ladders, shared governance structures, flexible staffing systems, and advanced practice roles. Professional recognition for individuals and entire teams has grown through the years, especially as the scientific evidence base demonstrates the link between care and outcomes. The consistent acknowledgement and continual celebration of high professional performance by leaders and peers has come a long way in actions, words, and deeds.

Marginal performers, bullies, and culture assassins

The past few years have seen more attention paid to dealing with staff who don't perform to expectations and standards of care. The characteristics of a healthy work environment and the consequences of bad behavior are well

documented. Poorly performing colleagues, sometimes called marginal performers, actually increase other team members' workload, causing resentment and turnover.

Tom Olivo, the CEO of Success Profiles and an accomplished athlete and respected measurement guru, identifies, measures, and compares the commonalities of highly successful people and organizations, emphasizing the importance of high performance standards consistent with best business practices, including human resource management. He uses the term "paid assassin" to describe employees who thwart operational achievement and still earn a paycheck.

A nursing shortage increases the spotlight on dysfunctional staff, and I see efforts to deal with them more earnestly. Investing in quality staff by divesting of poor role models supports quality care, retention, and morale.

Right person, right role

Organizations have struggled for years to adequately design and implement systems to ensure professional nurses aren't burdened with nonlicensed duties. Restructuring workflows, analyzing the work of different skill levels, and redesigning roles to ensure the right person is performing the right function is occurring at a heightened pace. Solving this problem eases the impact of shortages, increases productivity, and improves care.

Success will take a "village of solution architects"—nurses, engineers, and designers—who work together to eliminate the waste. If health care is the ultimate people business, then hiring the right people and putting them in the right roles is mission critical.

A question of control

Controlling the weather or stopping storm clouds from forming is out of my realm, but strengthening my profession is not. Will the next nursing shortage be a matter of perception or reality? Probably a little of both. Either way, I know whoever creates solutions will control the situation. Which side do you want to be on?

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