A year or so ago, managers were worried about recruiting nurses and replacing veteran staff. Suddenly, with the economic downturn, it’s a different story. Nurses are asking for more hours. They are willing to work overtime and even take call. Some are postponing retirement. What effect will the recession have on the future of the nursing workforce?

A large nursing shortage is predicted starting around 2015 because of 2 clashing trends—an aging RN workforce moving toward retirement just as an older population of Americans needs more health care.

Will the recession affect those predictions? Historically, during recessions, nurses seek more work as their families face an uncertain economy. Peter Buerhaus, RN, PhD, FAAN, a leading expert on the nursing workforce, is watching the trends closely. He’ll offer an update at a general session at the Managing Today’s OR Suite Conference Oct 7 to 9 in Las Vegas.

Buerhaus is the Valere Potter Professor of Nursing and Director of the Center for Interdisciplinary Health Workforce Studies at Vanderbilt University Medical Center in Nashville, Tennessee.

Buerhaus talked about the latest developments in an interview with OR Manager in February.

What have you observed so far about the effect on nursing of the economic downturn?

Buerhaus: In 2007, we saw a rather significant increase in nurse employment, roughly 85,000, which is a large number. Of course, we immediately suspected this reflected RNs sensing the potential of a recession with an increase in national unemployment. Because 7 in 10 RNs are married, a recession means that for many households, the RN may be the primary breadwinner. Undoubtedly, RNs were also aware that housing prices were declining in 2007. For most, the house is their largest economic asset. This reinforced the effect of rising unemployment and compelled many RNs back into the workforce.

The preliminary data we have seen for 2008 suggests RN employment increased again well above 2007 levels. We are submitting a manuscript on the new data to the journal Health Affairs and expect it to be published this spring.

If we are seeing more RNs in the workforce, will this throw a wrench in plans to address the long-term shortage?

Buerhaus: That is a great worry. I envision that some policy makers and/or employers will misinterpret the reasons for increases in RN employ-
ment. They might say, “No more worries about the nursing workforce. Let’s move on to other matters.”

That is short-term thinking. Clear messages need to be reinforced to policy makers and employers that the increase in employment is a short-term trend driven by the sudden severe contraction in our economy.

Now, we know the increased employment will have some influence on long-term forecasts and will probably improve them. But it won’t eliminate the future projected large shortage of nurses. That is what hospitals must keep their eyes on. In fact, I would urge that this is the time to redouble efforts to address problems facing the nursing workforce.

Q What should hospitals be focusing on?

Buerhaus: With many relieved of shortages for the time being, hospitals have a chance to focus on a couple of things. First, they can take a look at their workforce—it’s older. What does that mean? You have to invest in an ergonomic environment and improve it. Second, we need to build up the physical strength of these older RNs.

If we can do that, we may ensure fewer injuries while nurses are working and less cost for workers’ compensation. And it may prevent some older RNs from leaving the workforce once the economy strengthens.

The good news is that many hospitals are moving forward with investments in ergonomic environments. Many firms have caught on and are developing innovative technology aimed at making nursing work easier.

Q There has been concern that working conditions in hospitals drive nurses away. Is that improving?

Buerhaus: Our data from national surveys on RNs in 2002, 2004, 2006, and 2008 reveal a pattern that many areas have shown improvement, or at least aren’t getting worse. That is unlike previous decades when studies showed the work environment was mostly deteriorating.

There have been improvements in job satisfaction, satisfaction with career decisions, time spent with patients—probably 10 indicators that suggest the nursing shortage is having far less impact on the quality of care, the ability of nurses to practice, nurse ratings of the quality of nursing care, and so forth. The willingness of nurses to recommend the nursing profession has shot up dramatically.

The best thing to do to deal with the shortage is to take advantage of the recession’s increasing RN employment and avoid the temptation to think, “No more shortage.” Instead, the focus should be on improving the work environment, particularly ergonomics.

Q What is happening with the capacity problems in nursing education, such as the shortage of faculty, that is keeping new nurses from getting into the pipeline?

Buerhaus: I don’t think that’s being addressed as forcefully as it should have been, and we are likely to pay a dear price for that. Because we haven’t dealt with the capacity problem, 2 things have resulted. During the past 3 or 4 years when Congress has gone on a heyday of spending, not a penny has
gone into addressing this issue. I’m an economist, and I prefer markets to work and leave the government out of it. Markets are more innovative, faster, and usually more efficient and thus less costly. However, in the nursing education market, I don’t think the private sector is going to mobilize enough resources to get the job done. We need a national overall policy. That would have to come from Congress or the federal government, neither of which has done much more than talk about the issue.

Now with the economy tanking, we know a number of people will think about nursing. When they hear that unemployment is increasing, they hear 2 sectors continue to add jobs—health care and teaching.

So expect that many more people are going to want to become nurses and seek to enroll in nursing education programs. In fact, a national survey we conducted in 2007 found 1 in 4 Americans at one point in his or her life has thought about becoming a nurse.

Given the economic incentives to go into nursing, I expect schools are going to see an increase in applications—only to have to turn many of them away—the very people we will need to replace our aging and soon-to-be retiring baby boomer generation of RNs.

Buerhaus is author of many peer-reviewed articles on nursing workforce issues. He is author with Douglas O. Staiger and David I. Auerbach of the book, *The Future of the Nursing Workforce: Data, Trends, and Implications* (Jones & Bartlett, 2008).

The conference brochure was included in the April issue. You can download the brochure and register online at www.ormanager.com