



NR528 LEADING AND MANAGING EVIDENCE-BASED CHANGE IN NURSING

Module 4 Assessment: Searching and Selecting Evidence Literature Matrix Table

Full reference for article, including publication date	Population targeted and number of participants	Intervention of area of interest	Study method used by author/authors	Summary of the findings	Conclusions
Lasater KB, Aiken LH, Sloane D, French R, Martin B, Alexander M, McHugh MD. Patient outcomes and cost savings associated with hospital safe nurse staffing legislation: an observational study. <i>BMJ Open</i> . 2021 Dec 8;11(12):e052899. doi: 10.1136/bmjopen-2021-052899. PMID: 34880022; PMCID: PMC8655582.	210,493 Medicare patients, 65 years and older, who were hospitalized in a study hospital. 1,391 registered nurses employed in direct patient care on a medical-surgical unit in a study hospital.	Patient outcomes and cost savings associated with hospital safe nurse staffing legislation	Cross-sectional analysis of multiple data sources including a 2020 survey of nurses linked to patient outcomes data.	Primary outcomes were 30-day mortality and length of stay. Deaths avoided and cost savings to hospitals were predicted based on results from regression estimates if hospitals were to have staffed at a 4:1 ratio	Patient-to-nurse staffing ratios vary considerably across Illinois hospitals. If nurses in Illinois hospital medical-surgical units cared for no more than four patients each, thousands of deaths could be avoided, and patients would

NR528 Module 4 Assessment_04.12.2017(JC) *Table from Wakefield (2014, p. 56). Wakefield, A. (2014). Searching and research literature. *Nursing Standard*, 28(39), 49-57. doi:<http://dx.doi.org/10.7748/ns.28.39.49.e8867>



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				during the study period. Cost savings were computed from reductions in lengths of stay using cost-to-charge ratios.	experience shorter lengths of stay, resulting in cost-savings for hospitals.
Lasater KB, Aiken LH, Sloane DM, French R, Anusiewicz CV, Martin B, Reneau K, Alexander M, McHugh MD. Is hospital nurse staffing legislation in the public's interest? An observational study in New York State. Med Care. 2021 May 1;59(5):444-450. PMID: 33655903	A total of 417,861 Medicare medical and surgical patients.	To examine variation in patient-to-nurse staffing in NY hospitals and its association with adverse outcomes (ie, mortality and avoidable costs).	Cross-sectional data	This study demonstrated higher odds of in-hospital mortality and 30-day readmission, and longer lengths of stay for medical and surgical patients in hospitals where nurses care for more patients each. If NY	The majority of hospitals do not meet the minimum nurse staffing required by legislation currently under consideration in NY. We find associations between worse nurse staffing and poorer outcomes for NY patients, consistent

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				hospitals had staffed medical-surgical nurses at the 4:1 ratio as proposed in the current legislation, we project there would have been 4370 fewer in-hospital deaths in the 2-year period among Medicare patients.	with a large body of research which shows the clinical benefit to patients of being cared for by a nurse with fewer assigned patients
Li G, Wang W, Pu J, Xie Z, Xu Y, Shen T, Huang H. Relevant factors affecting nurse staffing: a qualitative study from the perspective of nursing managers. <i>Front Public Health</i> . 2024 Aug 14;12:1448871. doi: 10.3389/fpubh.2024.1448871. PMID:	14 Nursing Managers & HR Directors	Exploring the challenges faced within healthcare when nurse staffing shortages are at an all time high; the	A Qualitative Study	The results of this study indicate that nurse staffing is related to the imperfection of hospital policies and systems, the lack or	From the perspective of nursing managers, this study explores the related factors affecting the allocation of nurses through

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39220455; PMCID: PMC11363875.		pressures faced, patient suffering, and who suffers the most.		insufficiency of manpower reserves, and the control of nurse manpower costs.	descriptive qualitative research, explores the specific challenges, pressures and needs of nurses in their work, and reveals the deep causes of the shortage of nurses from multiple levels and directions, rather than just stay on the quantity and statistical data. From a nursing manager's perspective, the results of this qualitative study highlight the multifaceted
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