The Consequences of Overworking Nurses Can Be Serious

Patients in Arizona hospitals may face danger from an unexpected source, a new study shows. According to researchers at the University of Pennsylvania School of Nursing's Center for Health Outcomes and Policy Research, nurse burnout results in higher infection rates among patients.

The study surveyed over 7,000 hospital nurses, finding that more than one-third experienced high burnout levels associated with their jobs. The nurses responded to questions that measured emotional exhaustion, determined whether they found a sense of accomplishment in their work and assessed depersonalization on the job.

When exhausted nurses had to care for too many patients, the infection rate rose at their hospitals. Each nurse surveyed was responsible for an average of 5.7 patients and when nursing workload increased by just one patient per nurse, infections acquired in the hospital went up at the rate of one infection for every 1,000 patients.

Looking at the data another way, when the percentage of nurses who reported a high burnout level in a hospital went up, infections also went up. A 10-percent increase in the proportion of nurses who were seriously burned out was associated with about two additional surgical-site infections for every 1,000 patients. Urinary infections caused by catheter use also increased by about one infection per 1,000 patients.

A researcher suggested that being overworked meant a nurse was less likely to follow rigorous protocols for infection control. Distracted by another patient needing help, a nurse might overlook a procedure when changing a surgical dressing, for example. A hurried nurse could fail to carry through with careful hand washing, a fundamental safeguard against infection.

Across the country and from hospital to hospital, nurse patient loads vary and no comprehensive system exists that keeps track of staffing nationwide. In some hospitals, a nurse in intensive care has two patients and in some, like those in this study, the average patient load is greater than five.

The cost of nurse burnout, measured by treatment costs for the added infections, is high. Treating a catheter-associated urinary infection costs an average of $749 to $832. For
surgical-site infections, the average cost can be $11,087 to $29,443. The researchers projected savings of $41 million a year if the hospitals in the study could cut the nurse burnout rate to 10 percent.

Whatever the cause, acquiring an infection in the hospital can be serious and expensive. Anyone who experiences a hospital-related infection in Arizona should pursue compensation and would benefit from a consultation with an experienced Arizona medical malpractice attorney. A lawyer can help patients recover not only medical expenses, but possibly also payment for lost wages, and pain and suffering.