

Poll of registered nurses in Michigan shows

# Patient deaths on the rise due to health care understaffing

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A poll of working registered nurses (RNs) in Michigan shows that understaffing is the number one issue they face, making hospitals unsafe and leading to an increase in patient deaths.

The poll was conducted by Emma White Research, an Ann Arbor-based public policy research agency, and explored registered nurses' perceptions of their working conditions, the staffing shortage and the reasons nurses are leaving the profession. Several of the questions were the same as those asked in a similar poll in 2016. They show the changes in nurses' views over the past seven years.

Emma White Research conducted the poll from January 2 through January 8 by holding 400 interviews via live mobile and landline phone calls and text-to-web communications among registered nurses living or working in Michigan. The nurses were selected from a list of RNs provided by the Michigan Department of Licensing and Regulatory Affairs (LARA).

The poll was conducted on behalf of the Michigan Nurses Association (MNA), a union representing 13,000 nurses in Michigan. The MNA has been conducting a campaign for the passage of a "Safe Patient Care Act" by the Michigan legislature, that would set mandatory nurse-to-patient ratios.

The results of the poll, which were published on January 23, expose the dire conditions that nurses are working under across Michigan. The results are, in fact, a microcosm of the situation facing nurses throughout the US and around the globe.

The following is a summary of the key findings:

- More than seven in ten RNs say they are assigned an unsafe patient load in half or more of their shifts. Of the nurses polled, 71 percent said they agreed with the

statement, "Nurses are often assigned too many patients at once."

- More than nine in ten RNs say requiring nurses to care for too many patients at once is affecting the quality of patient care. Ninety-four percent of nurses responded that they strongly agree or somewhat agree with the statement, "Some people say that the quality of patient care in Michigan hospitals is suffering because hospitals are requiring registered nurses to care for too many patients at once."

- Nurses reported increases in awareness in every category of negative patient outcomes as compared to 2016. The eight negative outcomes listed range from nurses lacking time to properly comfort patients and families (92 percent) to medication errors such as wrong medication, wrong dosage or missed medication (75 percent) and longer hospital stays (64 percent). Most categories increased by 10 percentage points or more from the 2016 poll results.

- A dramatic measure of the deteriorating conditions in hospitals was the number of nurses who say they know of a patient death due to nurses being assigned too many patients. This category nearly doubled from 22 percent in 2016 to 42 percent this year.

- Of those who plan to leave nursing within the next two years, 75 percent said staffing and nurse-to-patient ratios are the biggest problem on their jobs, and 85 percent say that they are assigned too many patients at once. Significantly, of these nurses planning to leave their jobs in the next two years, 58 percent said they know of a patient who died due to insufficient staffing.

- The vast majority of RNs, 79 percent, blame working conditions for the staffing crisis, rather than a shortage of qualified nurses.

The results of the poll paint a devastating picture of conditions in hospitals and health care systems in the tenth most populous state in the US. Since 2016, the working conditions for nurses in Michigan have deteriorated significantly, especially during the three years of the coronavirus pandemic.

However, the staffing crisis in the health care industry preceded the pandemic and was markedly exacerbated by it. The disconnect between the needs of the public for increased health care services, the need of hospital employees for improved staffing resources, incomes and working conditions, and the drive by the health care industry for increasing profits and financial performance has been manifest for decades.

While the health care industry in Michigan received a collective \$3 billion in emergency government funding during the COVID-19 pandemic, it has shown no inclination to reverse the decline in the number of nurses working in direct care. According to records maintained by the Michigan Department of Licensing and Regulatory Affairs (LARA), there are 154,758 registered nurses with active licenses in Michigan, but the US Bureau of Labor Statistics shows just 102,480 are working as RNs in the state.

Any serious examination of the source of the staffing crisis points to the role of the for-profit health care industry, run by powerful capitalist and financial interests, that subordinate all aspects of patient care to the drive for profit.

The remaining segments of the poll were devoted to asking nurses if they support the “Safe Patient Care Act” which would “establish a limit on the number of patients a nurse is assigned at one time.” Nurses were also asked if the measure passes “do you think the quality of care for the patients you see will improve.”

The poll also asked about a law in Michigan that would “eliminate mandatory overtime for nurses.” On these questions, of course, the nurses polled were overwhelmingly in favor by a margin of 75 percent or more.

However, the campaign by the MNA for the passage of the “Safe Patient Care Act” seeks to conceal the root cause of the staffing crisis, and divert nurses away from a mass struggle against the corporate and political institutions responsible for the crisis.

As the MNA has shown repeatedly, such as when 6,000 nurses were blocked from taking strike action,

and their contract fight at Michigan Medicine was betrayed last spring and summer, the union has no intention of organizing any fight to mobilize the strength of nurses and other health care workers against the capitalist interests responsible for the understaffing crisis.

Nurses in Michigan, across the US and around the world have demonstrated again and again their willingness to mobilize their strength in a fight for adequate staffing, better working conditions, wages and benefits. However, as long as these struggles are dominated by the official labor organizations with their numerous ties to the big-business Democratic Party and corporate and financial interests, these rights cannot be secured.

What is required is the formation of rank-and-file committees made up of all layers of health care workers—doctors, nurses and staff, and facilities staff—to organize the struggle in the interests of the employees and not those of the corporate executives and managers, and their defenders in the union apparatus.



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