Assessing potential relationship between Medical/Surgical nurse’s certification rate to patient outcome in a newly designated Magnet hospital

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**Citation**

Mitra, Eva; Butao, Rosalina; and Lamoureux, Julie, "Assessing potential relationship between Medical/Surgical nurse's certification rate to patient outcome in a newly designated Magnet hospital" (2016). *All Publications*. 937.  
https://scholarlycommons.baptisthealth.net/se-all-publications/937

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Hospitalized adults experience safety-related complications like falls, pressure ulcers and other adverse outcomes which are dominantly under the control of nursing practice and thus regarded as nursing sensitive quality indicators. Bolts M (2013) study, was to examine the relationship between nurse certification by unit level and nursing sensitive indicators, findings yielded a significant relationship between certification in any specialty and unit level falls.

**Purpose**

The purpose of the study is to explore the relationship between Medical/Surgical nurses certification to nursing sensitive quality indicators.

**Method**

This is a descriptive co relational study using retrospective data of nurse’s certifications and nursing sensitive indicators using the National Database of Nursing Quality Indicators (NDNQI).

**Result**

Data analysis demonstrated no significant correlation between the rates of unit acquired pressure ulcer to the percentage of certified nurses ($r=0.13$, $p=0.532$). The association between fall rates to the percentage of nurses with certification, however, was negative and significant ($r=-0.54$, $p=0.007$).

**Discussion**

A hospital with higher numbers of certified nurses have a positive influence on patient outcomes like decrease in Fall rates and unit acquired pressure ulcer. It promotes patient safety and provides the best quality of care. The study warrants a prospective study to investigate the relationship between nurse’s certification and nursing sensitive among other hospitals.

**Implication to Practice**

The study yielded a link between nurse’s certification and Nursing sensitive outcomes. A significant association of nurses certification and decrease in falls rate was established. Although, no significant relationship found between the percentage of nurses certified and unit acquired pressure ulcer. This is possibly because of lower risks of pressure ulcers in our patient population.

**References**


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