

ETHICAL AND LEGAL IMPLICATIONS OF HEALTHCARE WORKER SHORTAGES

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Abstract: *The chronic shortage of healthcare workers presents significant ethical and legal challenges, particularly regarding the quality of patient care and safety. This paper explores the implications of healthcare worker shortages, focusing on their impact on labor cost, compromised patient care, increased medical errors, and rising malpractice claims. Healthcare institutions face legal risks when they fail to meet mandated staffing ratios, which can result in penalties, fines, and lawsuits. Furthermore, overworked staff, often subject to extended hours and excessive workloads, raise concerns about labor law violations, including non-compliance with mandatory rest periods and fair overtime compensation. The increased reliance on contract workers to fill staffing gaps also introduces legal challenges related to contract disputes, working conditions, and patient safety. Addressing these shortages is critical to preventing further harm to patients and mitigating legal liabilities for healthcare systems. This paper proposes a set of solutions, including legal mandates for minimum staffing ratios in critical care areas and incentives for recruitment and retention in underserved regions. These measures aim to reduce turnover, protect patient safety, and minimize legal risks. A holistic approach to workforce planning and policy reform is necessary to sustain safe staffing levels and ensure ethical standards of care are maintained across the healthcare system. Ultimately, addressing healthcare worker shortages is both a legal requirement and an ethical imperative to safeguard the future of patient care and the well-being of healthcare professionals.*

Keywords: *Healthcare worker shortages, Ethical implications, Legal challenges, Patient safety, Medical errors, Malpractice claims, Labor cost, Staffing ratios, Staffing regulations, Contract workers, Overtime compensation, Labor law violations, Recruitment and retention, Critical care staffing, Workforce planning, Healthcare policy reform, Legal liabilities, Healthcare ethics, Fair compensation, Healthcare workforce sustainability, Patient care quality.*

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INTRODUCTION

The chronic shortage of healthcare workers has significant implications for patient care quality and the legal risks faced by healthcare organizations. Workforce shortages strain employees, compromise patient safety, and increase the likelihood of medical errors and regulatory non-compliance. Understaffed environments also heighten the risk of patient harm and expose institutions to ethical and legal challenges. This paper examines these implications and provides recommendations for mitigating associated risks.

Healthcare worker shortages have escalated in recent years due to factors such as aging populations, the COVID-19 pandemic, and healthcare worker burnout. The U.S. population is quickly aging, “by 2050, adults over the age of 65 will make up 20 percent of the U.S. population,”¹ adding strain to an already fragile system. The pandemic contributed to staffing burnout and shortages across the nation due to increased patient volumes, prolonged work hours, high stress levels, and the physical and emotional toll of treating critically ill patients under challenging conditions. These shortages have led to increased labor costs, as healthcare organizations rely more heavily on contract and temporary staff to meet patient demands. According to reports by Syntellis and the American Hospital Association, “Total Contract Labor Expense skyrocketed 257.9% from 2019 to 2022.”² This rise in labor costs places a considerable financial strain on healthcare facilities, especially those operating with limited margins. Additionally, the increased reliance on contract workers can affect continuity of care and may impact overall staff morale, as permanent staff face intensified workloads and responsibilities.

Compounding this issue, many staff nurses are leaving their permanent positions to become traveling nurses, lured by significantly higher pay for performing the same job. Traveling nurse positions often offer compensation that far exceeds what full-time staff nurses earn, even when accounting for benefits. This trend exacerbates staffing shortages in permanent roles and forces healthcare facilities to depend even more on costly contract labor. Moreover, the disparity in pay between traveling and staff nurses can further demoralize permanent staff, fostering resentment and contributing to a vicious cycle of turnover and financial strain on healthcare organizations.

Research demonstrates that sufficient nurse staffing is crucial for delivering high-quality care.³ These challenges impact patient care and can cause ethical and legal challenges for healthcare providers and organizations, affecting the standard of care, patient safety, and the legal responsibilities of healthcare institutions.

BACKGROUND

Health systems face challenging times and compromised patient care due to staffing shortages. Shortages cause increased medical errors and the decline in the quality of care provided to patients. The NIH reports that “Medical errors have more recently been recognized as a serious public health problem, reported as the third leading cause of death in the US”.⁴ It is estimated that the annual health system cost of adverse events is ~\$20 billion.⁵ Medical errors and adverse events have been linked to staffing shortages. Research consistently shows that

¹ Addressing the health needs of an aging America, accessed October 25, 2024, <https://www.healthpolicyinstitute.pitt.edu/sites/default/files/SternCtrAddressingNeeds.pdf>.

² American Hospital Association, “AHA Quarterly Report Q2 February 2023,” Syntellis Performance Solutions, March 2023, https://www.syntellis.com/sites/default/files/2023-03/AHA%20Q2_Feb%202023.pdf.

³ Centers for Disease Control and Prevention, “Vital Signs: Health Worker Mental Health,” last reviewed May 25, 2023, <https://www.cdc.gov/vitalsigns/health-worker-mentalhealth/index.html#:~:text=Burnout%3A%20In%202022%2C%2046%25,similar%20in%20the%20two%20years.>

⁴ L.H. Aiken et al., “Nurse Staffing and Education and Hospital Mortality in Nine European Countries: A Retrospective Observational Study,” *Lancet* 383, no. 9931 (May 24, 2014): 1824-30, [https://doi.org/10.1016/S0140-6736\(13\)62631-8](https://doi.org/10.1016/S0140-6736(13)62631-8).

⁵ T.L. Rodziewicz, B. Houseman, S. Vaqar, et al., “Medical Error Reduction and Prevention,” in *StatPearls* [Internet] (Treasure Island, FL: StatPearls Publishing, 2024), <https://www.ncbi.nlm.nih.gov/books/NBK499956/>.

inadequate nurse staffing levels and insufficient resources are significant contributors to medical errors and patient safety incidents. When staffing is insufficient, nurses face increased workloads, fatigue, and stress, reducing their ability to provide optimal care and increasing the likelihood of errors. A 2022 study highlights a correlation between higher nurse-to-patient ratios and increased hospital mortality rates, underscoring the critical role of adequate staffing in preventing adverse outcomes (Aiken, Clarke, Sloane, Sochalski, & Silber, 2002).⁶ Similarly, the StatPearls report emphasizes the importance of sufficient staffing in reducing the prevalence of medical errors, which contribute significantly to healthcare costs and patient harm.⁷ This evidence supports the idea that addressing staffing shortages is essential for improving patient safety and reducing the overall burden of medical errors on the healthcare system. When healthcare facilities are understaffed, healthcare workers are often required to manage larger caseloads and work longer hours, resulting in fatigue and burnout.

Healthcare providers have a legal and ethical obligation to deliver safe, competent care. Inadequate staffing, however, undermines the ability to meet these obligations, potentially resulting in legal actions for negligence, failure to meet the standard of care, or violation of patient rights. In addition, the reputational damage stemming from malpractice claims can have long-lasting effects on healthcare organizations.

DISCUSSION / ANALYSIS

The chronic shortage of healthcare workers raises numerous ethical issues that impact both patient care and the well-being of healthcare providers. These ethical challenges are rooted in fundamental principles such as beneficence, nonmaleficence, justice, and autonomy. When staffing shortages compromise the standard of care and jeopardize patient safety, healthcare organizations face significant moral dilemmas. Providers have a moral obligation to deliver safe, effective care; however, inadequate staffing levels can lead to delays, medical errors, and adverse outcomes. The principle of beneficence, which calls for acting in the best interests of patients, is often undermined as overstretched staff may struggle to provide necessary attention and care. At the same time, staff shortages place undue stress on healthcare workers, leading to burnout, fatigue, and emotional distress. This violates the principle of nonmaleficence, which emphasizes avoiding harm, as both the mental and physical health of employees are at risk. Furthermore, staffing shortages disproportionately affect underserved or rural areas, where resources are already limited, exacerbating inequities in healthcare delivery. The ethical principle of justice mandates equitable access to care for all patients, but these shortages deepen existing health disparities. Additionally, the growing reliance on temporary and contract workers raises ethical concerns about fairness and equity, as these workers often receive significantly higher pay than full-time staff for performing similar roles. This disparity challenges the ethical principle of justice, highlighting the need for more equitable compensation practices.

Addressing these ethical concerns requires a multifaceted approach that includes fair compensation practices, sustainable staffing policies, and a commitment to fostering equitable access to care. By prioritizing these principles, healthcare organizations can mitigate the ethical dilemmas posed by workforce shortages and ensure both patient and staff well-being.

Burnout has become a critical issue in healthcare, contributing to increased turnover, medical errors, and compromised patient care. According to the Centers for Disease Control, “in 2022, 46% of health workers reported feeling burned out often or very often, compared to 32% in 2018”.⁸ Staff shortages often result in healthcare workers being required to work overtime or take on excessive workloads, which exacerbates burnout and leads to high turnover rates. Additionally, these conditions can result in violations of labor laws, as healthcare workers are entitled to

⁶ Aiken, L. H., Clarke, S. P., Sloane, D. M., Sochalski, J., & Silber, J. H. (2002). Hospital nurse staffing and patient mortality, nurse burnout, and job dissatisfaction. *JAMA*, 288(16), 1987–1993. <https://doi.org/10.1001/jama.288.16.1987>

⁷ Rodziewicz, T. L., Houseman, B., & Vaqar, S. (2024). *Medical error reduction and prevention*. In StatPearls [Internet]. StatPearls Publishing. Retrieved from <https://www.ncbi.nlm.nih.gov/books/NBK499956/>

⁸ Centers for Disease Control and Prevention, “Health Workers Face a Mental Health Crisis,” Vital Signs, last modified October 24, 2023, <https://www.cdc.gov/vitalsigns/health-worker-mental-health/index.html>.

mandatory rest periods, overtime limits, and fair compensation for extended hours. When healthcare organizations fail to comply with labor protections, they expose themselves to legal liabilities, including lawsuits from employees or labor unions. Extended working hours and inadequate rest can diminish employee performance, increasing the likelihood of medical errors and patient harm. This legal pressure is compounded by the responsibility healthcare organizations must comply with federal and state staffing regulations, which often mandate minimum staffing ratios for certain types of care. For example, intensive care units (ICUs) and nursing homes may be subject to specific requirements to ensure that a minimum number of staff members are available to care for patients. Failure to meet these legal requirements can lead to fines, penalties, and other legal actions. In states with mandated nurse-to-patient ratios, non-compliance can expose healthcare facilities to government sanctions or even closure.⁹

Hospitals and healthcare organizations are legally responsible for ensuring that their staffing levels are sufficient to meet patient care needs. However, with chronic shortages, many institutions struggle to meet these requirements, leading to an increased risk of non-compliance. Legal accountability extends to senior management and administrators who are responsible for ensuring that staffing policies align with regulatory standards. The ethical implications of non-compliance also come into play, as failing to provide adequate staff jeopardizes patient safety and quality of care.

In response to staffing shortages, many healthcare organizations turn to contract workers, such as temporary nurses or locum tenens physicians, to fill gaps in care. While this can provide short-term relief, it also introduces legal challenges related to contract terms, working conditions, and employment rights. Disputes regarding pay rates, hours worked, and the quality of care provided by contract workers can result in contract breaches or litigation. Additionally, healthcare organizations may be held liable for the actions of contract workers if patient harm occurs under their care. This also raises ethical concerns about the consistency and quality of care delivered by temporary staff, who may not be as familiar with the healthcare facility's protocols and standards. As such, reliance on contract workers may not provide a sustainable solution to the larger problem of workforce shortages.

One of the most serious legal implications of healthcare worker shortages is the impact on patient safety. When there are not enough staff members to provide timely and adequate care, patients may experience delayed treatment, miscommunication, or even neglect. In situations where patient harm results from these delays or oversights, healthcare organizations are vulnerable to lawsuits for medical malpractice or negligence. Patients have the right to expect a certain standard of care, and healthcare organizations have a duty to provide that care. The *Journal of the American Medical Association (JAMA)* reports that there was a 7% increase in patient mortality for each additional patient assigned to a nurse.¹⁰ The result of this study emphasizes the importance in lower nurse-to-patient ratios to improve patient safety. Understaffed facilities are often unable to fulfill this obligation, resulting in potential legal action from patients or their families. Moreover, the reputational damage that follows such lawsuits can affect an organization's ability to attract and retain both patients and staff, further exacerbating the shortage.

The ongoing strain caused by healthcare worker shortages leads to high turnover rates, as employees leave due to burnout, dissatisfaction, or better opportunities elsewhere. High turnover creates additional legal and financial challenges, as healthcare organizations must invest in recruitment, training, and retention strategies to fill vacant positions. Workplace safety concerns also arise when high turnover disrupts team cohesion and familiarity with protocols. Healthcare organizations are legally obligated to provide a safe working environment for their employees. When turnover compromises this safety, organizations may face legal consequences, including penalties for failing to maintain a safe workplace or violations of occupational health and safety regulations.

⁹ National Academies of Sciences, Engineering, and Medicine; Health and Medicine Division; Board on Health Care Services; Committee on the Quality of Care in Nursing Homes, *The National Imperative to Improve Nursing Home Quality: Honoring Our Commitment to Residents, Families, and Staff* (Washington, DC: National Academies Press, 2022), chap. 8, "Quality Assurance: Oversight and Regulation," <https://www.ncbi.nlm.nih.gov/books/NBK584643/>.

¹⁰ L.H. Aiken et al., "Nurse Staffing and Education and Hospital Mortality in Nine European Countries: A Retrospective Observational Study," *Lancet* 383, no. 9931 (May 24, 2014): 1824-30, [https://doi.org/10.1016/S0140-6736\(13\)62631-8](https://doi.org/10.1016/S0140-6736(13)62631-8).

PROPOSED SOLUTIONS

To address the chronic shortages of healthcare workers and their legal, ethical, and operational impacts on patient care, organizations must implement multifaceted solutions. Legislative measures should include providing tax incentives or subsidies to healthcare facilities that offer competitive pay and benefits to permanent staff, particularly in underserved areas. It is also critical to establish policies that ensure equitable compensation for both permanent and contract workers performing similar roles. Additionally, advocating for state and federal funding to expand nursing education programs and scholarships—especially in high-need areas like rural communities—will help develop a more sustainable workforce. This investment in education will encourage workforce development in underserved areas, ensuring more equitable care distribution.

Legislators should mandate the implementation of comprehensive mental health support programs for healthcare workers, including counseling, resilience training, support groups, and paid mental health days. Addressing burnout aligns with the ethical obligation of nonmaleficence, reducing harm to workers. Legislation that establishes minimum nurse-to-patient staffing ratios, particularly in high-risk areas like ICUs and emergency departments, will improve patient outcomes and reduce errors, thereby decreasing legal liabilities tied to negligence or malpractice. Safe staffing levels also uphold the ethical principles of beneficence and justice, ensuring that patients receive high-quality care.

In addition, enacting stricter labor laws and protections will ensure that healthcare workers are not overworked, that overtime laws are enforced, and that burnout is mitigated, improving retention. Legal protections are essential to ensure healthcare workers are treated fairly, and organizations are held accountable for maintaining a safe work environment. Furthermore, monitoring and reporting healthcare worker well-being, staffing levels, and regulatory compliance will provide valuable data for legislators and regulators. Transparency in these reports will help identify the scope of the problem and enable targeted interventions. Regular reporting can also encourage accountability among healthcare organizations, prompting them to address staffing issues proactively.

By taking decisive action on issues like unfair pay, worker burnout, and staffing levels, lawmakers can lower legal risks, improve patient care, and help build a more equitable and sustainable healthcare system. Proactive legislative changes will ease the strain on the healthcare system, ensuring that patients receive the safe, quality care they deserve. Healthcare organizations, in turn, must engage in thorough workforce planning, invest in training and education, and foster supportive work environments to promote employee retention. By addressing burnout, ensuring work-life balance, and providing fair compensation, policy changes will help create a sustainable workforce that can meet the demands of patient care, reduce medical errors, and protect healthcare organizations from legal liabilities.

CONCLUSION

Healthcare worker shortages pose serious threats to healthcare systems, encompassing ethical and legal challenges that demand thoughtful attention and action. These shortages can lead to compromised patient care and legal risks related to staffing regulations and labor law violations, with wide-ranging impacts. By enforcing legal requirements for minimum staffing levels, offering incentives for recruitment and retention, and engaging in thorough workforce planning, healthcare organizations can enhance patient safety, minimize legal risks, and uphold ethical care standards. Tackling these shortages is both a legal duty and an ethical necessity for the future of healthcare.

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