Concerns about widespread nursing shortages, reports of falling quality of care, the shift of patients with cancer into mixed nursing units where they are treated together with nononcology patients, and the number of tasks delegated by RNs to non-RNs has increased compared to RNs who worked on dedicated oncology units. RNs who reported working on mixed patient units believed that their workplace environments were more positive. More oncology RNs in dedicated oncology units perceived their workplace environments more positively. Inpatient RNs were more likely to perceive a decrease in staffing levels of RNs were adequate.

In the second of this two-part series, data are reported that address additional questions about the oncology nursing workforce: (a) What are the perceived and actual levels of staffing, (b) what short-term responses are being used to cope with staffing shortfalls, and (c) how do oncology RNs and nurse executives perceive the impact of these shortfalls on the quality of patient care? In addition, the implications of the study’s results on the development of staffing standards will be discussed.

Because the data and methods used to administer the national survey were presented in detail in part one of the series and in Buerhaus, Donelan, DesRoches, Lamkin, and Mallory (2001), they will not be discussed here beyond noting that some of the information provided by inpatient nurse executives contained data that were well beyond the range of expected results. These outlying data points were probably the result of complex data that were well beyond the range of expected results. These outlying data points were probably the result of complex...