



A Union of Professionals

Staffing Ratios – Fact Sheet

1) Safe staffing ratios improve the quality of patient care.

- Each additional patient (above four) that a nurse is required to care for is associated with a 7 percent increase in the likelihood of one of that hospital's surgical patients dying within 30 days of admission. (Aiken, Linda, et al. "Hospital Nurse Staffing and Patient Mortality, Nurse Burnout and Job Dissatisfaction." *Journal of the American Medical Association*. October 23/30, 2002.)
- Nurse staffing shortages are a factor in one out of every four unexpected hospital deaths or injuries caused by errors. (Joint Commission for the Accreditation of Healthcare Organizations. "Health Care at the Crossroads: Strategies for Addressing the Evolving Nursing Crisis." Chicago: JCAHO. August 2002.)
- A higher number of hours of care per day provided by registered nurses is associated with shorter lengths of stay, lower rates of urinary tract infections and upper gastrointestinal bleeding, pneumonia, shock or cardiac arrest as well as lower rates of "failure to rescue" patients. (Needleman, Jack, et al. "Nurse Staffing and Patient Outcomes in Hospitals." *Harvard School of Public Health*. February 2001.)
- Seventy percent of radiology techs, 79 percent of respiratory therapists and 71 percent of certified nurse assistants say that the quality of patient care is suffering because of increased workloads or poor staffing in their professions. (Peter D. Hart Research Associates. "The Staffing Crisis for Health Professionals: Perspectives from Radiology Technologists, Respiratory Therapists, and Certified Nursing Assistants." April 2002.)

2) Staffing ratios are necessary to address the shortage of nurses and other health professionals.

- In California, applications for nurse licenses increased by 60.4 percent in the three years since staffing ratio legislation passed. "The numbers swelled to 35,887 in the fiscal year ended June 2003, up from 22,372 in fiscal 1999." (Robertson, Kathy. "Agency bogs down as nurses rush to register." *Sacramento Business Journal*. January 19, 2004.)
- Hi-Desert Hospital in Joshua Tree, Calif., went from a 50 percent vacancy rate in its nursing staff to a one percent vacancy rate six months after establishing nurse-to-patient ratios of 1:4 on the day shift and 1:5 on evening shift. ("A Favorable RN-to-Patient Staffing Ratio is an Effective Recruitment Tool." *Patient Care Staffing Report*. October 2001.)
- Each additional patient per nurse (above four) is associated with a 23 percent increase in the odds of nurse burnout and a 15 percent increase in the likelihood of job dissatisfaction. (Aiken, Linda, et al. "Hospital Nurse Staffing and Patient Mortality, Nurse Burnout and Job Dissatisfaction." *Journal of the American Medical Association*. October 23/30, 2002.)
- In a national survey of nurses, 83 percent of respondents said that improving staffing ratios would be "very effective" in improving job satisfaction, and in recruiting and retaining quality nurses. (Peter D. Hart Research Associates. "The Nurse Shortage: Perspectives From Current Direct Care Nurses and Former Direct Care Nurses." April 2001.)

- Ninety-one percent of certified nurse assistants, 78 percent of respiratory therapists and 68 percent of radiology techs say that improving staffing ratios would help recruit and retain members of their profession. (Peter D. Hart Research Associates. "The Staffing Crisis for Health Professionals: Perspectives from Radiology Technologists, Respiratory Therapists, and Certified Nursing Assistants." April 2002.)

3) Turnover of hospital personnel is a major expense for hospitals. By helping to retain nurses, staffing ratios lower hospital costs.

- Healthcare industry turnover is reported to be 20.7 percent. A hospital with 600 employees and a turnover rate of 20 percent would spend \$5.52 million a year on turnover. Cutting the turnover rate to 15 percent would result in direct savings of \$1.38 million per year. (Voluntary Hospital Association. The Business Case for Work Force Stability. October 2002.)
- Hospitals with higher turnover rates have higher costs per discharge. Costs per adjusted discharge at hospitals with turnover rates above 21 percent run 36 percent higher than those at hospitals with turnover rates below 12 percent. (Voluntary Hospital Association. The Business Case for Work Force Stability. October 2002.)
- As staff turnover increases, profitability--as measured by return on assets and cash flow margin--decreases. Hospitals with turnover rates of less than 12 percent had nearly 25 percent higher average return on assets and cash flow margin than hospitals with turnover rates above 22 percent. (Voluntary Hospital Association. The Business Case for Work Force Stability. October 2002.)

"Nurses represent the single largest labor expense for hospitals. In an attempt to manage costs, many hospitals have, over the years, reduced nursing staff, which in some cases has compromised quality of care and patient safety. Nursing shortages have been shown to contribute to longer lengths of stay in the ICU and increased rates in urinary tract infections and other complications. According to VHA research, hospitals that improve employee satisfaction witness an average increase in revenue per employee... 'Poor service and loss of patients to other hospitals ultimately mean lost revenue for a hospital. Those facilities that find solutions will gain a competitive advantage in their market and achieve solid financial returns'."

-- Voluntary Hospital Association. "Press Release: What the Work Force Shortage Is Costing U.S. Hospitals." November 11, 2002