

Talking Points Nurse Staffing Economics
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- ✚ Every 10-point increase in the percentage of professional nurses among all nursing personnel diminishes the odds of patients giving their hospital a low rating by a factor of 0.90 (Aiken et al., 2017).
- ✚ Every 10-point increase in the percentage of professional nurses decreases the likelihood that patients will report a poor patient safety culture and increases the likelihood that patients will recommend the hospital (Aiken et al., 2017).
- ✚ Hospitals with lower nurse staffing had a significantly higher excess 30-day readmission rate for heart failure patients (Guiliano et al., 2016).
- ✚ A higher patient-to-nurse ratio was associated with job dissatisfaction, burnout, and intent to leave, regardless of average wage (McHugh & Ma, 2014).
- ✚ A higher patient-to-nurse ratio was associated with more care left undone and an 18% increase in unplanned readmission for older Black patients after acute MI (Brooks-Carthon et al., 2016).
- ✚ For each additional patient per nurse, Medicare patients had a 8% higher odds of unplanned 30-day readmission and 12% higher odds of unplanned 10-day readmission following elective joint replacement (Lasater & McHugh, 2016a).
- ✚ Each additional patient per nurse was associated with 8% greater odds of unplanned readmission for older White patients and 15% greater odds for older Black patients following elective joint replacement (Lasater & McHugh, 2016b).
- ✚ Each additional patient per nurse increased the odds of unplanned 30-day readmission by 3% for post-operative Medicare patients (ma, McHugh, & Aiken, 2015).
- ✚ Each additional patient per nurse increased the odds of unplanned 30-day readmission for Medicare patients by 7% for heart failure, 6% for pneumonia, and 9% for acute MI (McHugh & Ma, 2013).
- ✚ Hospitals with higher nurse staffing had 25% lower odds of having to pay readmission penalties (McHugh, Berez, & Small, 2013).