Federal government research (HSR¹ & AHRQ²) concluded implementation of minimum RN to patient staffing ratios in California improved patient outcomes, increased nurse retention and increased quality while reducing patient length of stay without additional costs.

**NURSE RETENTION SAVES HOSPITALS ON RECRUITMENT & REPLACEMENT**

Hospitals can invest $80,000 to orientate a new RN. Nurse turnover rate is 16.5% and rising. Better staffing retains RNs; reducing hospital recruitment and replacement costs.

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PROPOSED STAFFING PATIENT TO REGISTERED NURSE (RN) RATIOS

- **One patient to one RN** in trauma emergency units;
- **One patient to one RN** in operating room units, provided that a minimum of 1 additional person serves as a scrub assistant;
- **Two patients to one RN** in critical care units, including neonatal intensive care units, emergency critical care and intensive care units, labor and delivery units, coronary care units, acute respiratory care units, post-anesthesia units & burn units;
- **Three patients to one RN** in emergency room units, pediatrics units, stepdown units, telemetry units, antepartum units, and combined labor, deliver, and postpartum units;
- **Four patients to one RN** in medical-surgical units, intermediate care nursery units, acute care psychiatric units, and other specialty care units;
- **Five patients to one RN** in rehabilitation units and skilled nursing units;
- **Six patients to one RN** in postpartum (3 couplets) units and well-baby nursery unit.

RESEARCH CONFIRMS: ADEQUATE RN STAFFING SAVES LIVES!

Lower levels of hospital nurse staffing are associated with more adverse outcomes. Patients have higher acuity, yet the skill levels of the nursing staff have declined. Higher acuity patients and added responsibilities increase nurse workload. Avoidable adverse outcomes (i.e. pneumonia) raises treatment costs by up to $28,000; Hiring more RNs does not decrease profits; Higher levels of nurse staffing could have positive impact on both quality of care and nurse satisfaction. (2004, AHRQ. Hospital nurse staffing and quality care)

Hospital nurse staffing ratios mandated in California are associated with lower mortality and nurse outcomes predictive of better nurse retention in California and in other states where they occur. (2010, HSR. Implications of the California Nurse Staffing Mandate for other states.)

OTHER COMPONENTS DEVELOPING CARE PLAN - S. 1063/HR 2392

- Specialized experience needed of the direct care RN on the unit;
- The number of patients on a unit assessed on a shift by shift basis;
- Acuity level and patient care plan assessed shift by shift;
- Anticipated patient admissions, discharges & transfers per shift;
- Appropriate licensed & assist staff needed to care for patients;
- Consideration of obstacles to deliver patient care efficiently in a unit’s layout.

Please vote “Yes” for S. 1063/HR 2392

Patient’s lives depend upon it!

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