



The Safe Staffing for Quality Care Act calls on hospitals to maintain a responsible ratio of nurses to patients – ensuring better care and saving lives.

## Myth

- 1 There is no direct link between safe staffing standards and improved patient outcomes.
- 2 Safe staffing standards could force hospitals to close or cut services, which could compromise access to care.

## Fact

The number of patients assigned to a nurse has a direct impact on the ability to appropriately assess, monitor, care for, and safely discharge patients.

Hospitals that routinely staff with a 1:8 nurse-to-patient ratio experience five additional deaths per 1,000 patients than those staffing with a 1:4 nurse-to-patient ratio (Journal of the American Medical Association, 2002).

California lawmakers passed safe staffing legislation and guess what: not one California hospital closed because of it. In fact, hospital income in California rose dramatically from \$12.5 billion from 1994 to 2003, to more than \$20.6 billion from 2004 to 2010 after safe standards were implemented.

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Safe staffing ratios would be a financial burden to New York’s hospitals and nursing homes.

When compared to healthcare facilities that meet safe staffing levels, unsafe staffing hurts the bottom line by:

- increasing rates of costly hospital-acquired infections
- increasing patient falls
- increasing 30-day readmissions
- increasing medical malpractice lawsuits
- increasing nurse burnout
- increasing staff turnover

Evidence and experience demonstrate that safe staffing is a cost-effective way to improve patient care and lead to savings for our hospitals, nursing homes and our healthcare system.

4

Hospitals need flexibility in staffing – fixed ratios won’t meet the needs of patients.

Standards set a minimum standard based on research evidence, best practices and the lessons learned in California.

Ratios will provide a safe minimum level of staffing. Hospitals and nursing homes will still have flexibility in staffing – but they cannot go below the levels that the research demonstrates are safe.

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Hospitals will have to lay off other caregivers if safe staffing standards are implemented.

Non-nurse staffing levels at hospitals increased after safe staffing standards were implemented in California.

After standards were implemented in California in 2005, the number of total nursing assistive personnel increased by 64%. That is a rate 59% higher than the rate of increase of hospital nursing assistive personnel nationally (Institute for Health & Socio-Economic Policy).

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