

[Why a Bill?](#)
[The Ratios](#)
[What Bill Does](#)
[Myths & Facts](#)
[Industry Version](#)
[Support](#)
[ROI](#)
[What You Can Do](#)
[Home](#) > [Why a Bill?](#)

## Why the Staffing Ratio Law is Needed

We have a disturbing crisis in Massachusetts—nurses are being forced to care for too many patients, and patients are suffering the consequences in the form of preventable errors, avoidable complications, increased lengths of stay and readmissions.

### The Law Will Protect Patients

Studies by the most respected scientific and medical researchers affirm the significance of safe minimum RN-to-patient ratios for patient safety.

- **More than 195,000 patients die needlessly every year in our hospitals from a series of complications directly related to poor nurse staffing**, according to a study released in May 2004. The authors attributed the majority of these deaths to "failure to rescue" (which refers to nurses' failure to promptly assess and treat conditions that develop in a hospital), bedsores, postoperative sepsis and post-operative pulmonary embolisms. (HealthGrades, 2004)
- A survey of patients found that nearly **half of recently hospitalized patients reported their care was compromised by inadequate RN-to-patient ratios**, and that the majority of those surveyed supported legislation to regulate ratios. (National Consumers League, 2004)
- The Institute of Medicine of the National Academies of Science reports that **"nurse staffing levels affect patient outcomes and safety."** Insufficient monitoring of patients, caused by poor working conditions and the assignment of too few RNs, increases the likelihood of patient deaths and injuries at a time when avoidable medical errors kill up to 98,000 people in U.S. hospitals every year. (IOM, November 4, 2003)
- **Inadequate staffing precipitated one-fourth of all sentinel events**—unexpected occurrences that led to patient deaths, injuries, or permanent loss of function—reported to JCAHO, the Joint Commission on Accreditation of Hospital Organizations, the past five years. (JCAHO, August 7, 2002)
- A New England Journal of Medicine study documented that **improved RN-to-patient ratios reduce rates of pneumonia, urinary infections, shock, cardiac arrest, gastrointestinal bleeding, and other adverse outcomes.** (NEJM, May 30, 2002)
- Research in the Journal of the American Medical Association found that up to 20,000 patient deaths each year can be linked to preventable patient deaths. **For each additional patient assigned to an RN, the likelihood of death within 30 days increased by 7 percent.** Four

### Latest Research

- **March 22, 2005**  
[Survey of the General Public](#)
- **March 30, 2005**  
[Survey of Past Patients](#)
- **April 26, 2005**  
[Survey of Physicians](#)

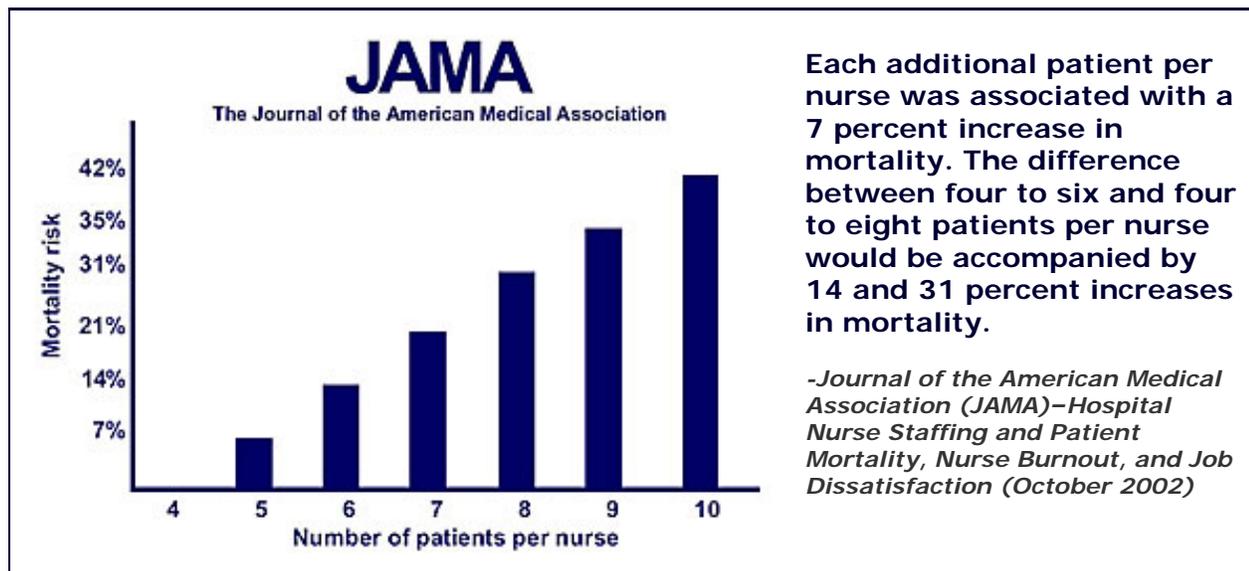
**"...hospital nurse staffing legislation represents a credible approach to reducing mortality and increasing nurse retention."**

*Linda H. Aiken,  
 PhD, RN JAMA, 2002*

**"I'm tired of nurses who aren't at the bedside and yet who oppose...bans on mandatory overtime, minimum nurse— patient staffing ratios, or public disclosure of these ratios. If you're a staff nurse and oppose these things, you're probably working at a fine institution. But too many nurses aren't."**

*Diana J. Mason,  
 PhD, RN Editor-in-Chief, American Journal of Nursing*

- additional patients increased the risk of death by 31 percent. (JAMA, October 22, 2002)
- The Massachusetts Department of Public Health reports **medical errors and complaints at hospitals have increased by 76 percent in seven years**. (DPH Division of Health Care Quality, 2003)
- Poorer hospital nurse staffing is associated with higher rates of urinary tract infections, postoperative infections, pneumonia, pressure ulcers and increased lengths of stay**, while better nurse staffing is linked to improved patient outcomes, according to the Agency for Healthcare Research and Quality. (AHRQ report, 2001)
- Two-thirds of bedside nurses in Massachusetts report knowing of patients who suffered serious complications as a result of understaffing. (Opinion Dynamics Corp., 2003)



## The Law Will End the Nursing Exodus

To make matters worse, nurses, burned out with high patient loads, are leaving the bedside. While Massachusetts has the highest per capita population of nurses in the country, many staff nurses are no longer willing to work in situations where they are unable to provide proper care for their patients. The research is clear that the only way to protect patients and to retain skilled nurses in our hospitals is to establish safe staffing standards.

- A survey published in JAMA found that for every patient beyond four assigned to a nurse resulted in a 15 percent increase in job dissatisfaction and a 23 percent increase in burnout for nurses. (JAMA, 2003)
- Sixty-five percent of Massachusetts nurses surveyed agree with the statement that working conditions in hospitals are "brutal" for nurses; nearly half of Massachusetts' hospital nurses have considered leaving their jobs due to poor staffing. (Opinion Dynamics Corp., 2003)
- According to the Board of Registration in Nursing statistics, the population of registered nurses in Massachusetts increased by 10 percent between 1992 and 2002, while the number of hospital beds to be staffed by RNs decreased by 30 percent.
- While 83 percent of Massachusetts nurses are working, only 47 percent are working at the hospital bedside (below the national average) and only half of those are working full time. The two top reasons nurses are leaving bedside nursing: staffing and workload. (Colleagues in Caring, 2002)
- A survey of 42,000 Massachusetts nurses found that 42 percent of those nurses not working in hospitals would strongly consider returning to bedside care if safe staffing legislation were passed. (Opinion Dynamics Corp., 2003).
- A 2004 survey of nurses currently working part-time in hospitals found that 33 percent would increase their hours if the bill were to pass. (Opinion Dynamics Corp., 2003).

The time has come for Massachusetts to pass common sense legislation setting safe minimum registered nurse-to-patient ratios in hospitals. Safe ratios save lives...and they will end the nursing

shortage.