

RN Staffing Ratios

Ratios and Patient Safety



Studies by the nation's most respected scientific and medical researchers affirm the significance of California's RN-to-patient ratios for patient safety. As the Institute of Medicine's most recent study put it, research now documents "what physicians, patients, other healthcare providers and nurses themselves have long known: how well we are cared for by nurses affects our health, and sometimes can be a matter of life or death."

- 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 additional patients increased the risk of death by 31%. (*JAMA*, October 22, 2002)
- 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)
- Nurses intercept 86% of all medication errors made by physicians, pharmacists, and others prior to the provision of those medications to patients. (*JAMA*, 1995)
- Poorer hospital nurse staffing is associated with higher rates of urinary tract infections, post-operative 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)