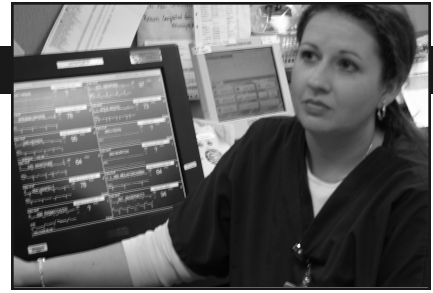


RN-to-Patient Ratios A Cost Effective Solution for Hospitals



RN-to-patient ratios have been demonstrated to produce significant long term savings for hospitals by reducing patient care costs. By improving staffing conditions, ratios also help hospitals cut RN turnover and reliance on nurse registries. Data also shows that most hospitals can afford to employ sufficient numbers of RNs to provide safe ratios.

- **Adding 133,000 RNs to the acute-care hospital workforce across the U.S. would produce medical savings estimated at \$6.1 billion in reduced patient care costs, not including the value of increased productivity when nurses help patients recover more quickly, an estimated additional \$231 million per year. Combining medical savings with increased productivity, the partial estimates of economic value averages \$57,700 for each of the additional 133,000 RNs — *Medical Care, January 2009.***
- **Preventing medical errors reduces loss of life and could reduce healthcare costs by as much as 30 percent.** Insurers paid an additional \$28,218 (52 percent more) and an additional \$19,480 (48 percent more) for surgery patients who experienced acute respiratory failure or post-operative infections, compared with patients who did not experience either error. The post-discharge costs savings achieved by reducing adverse events might just be enough for the hospital to break-even on the investment in nursing — *Health Services Research, July 2008.*
- **RN understaffing in hospital intensive care units increases the risk of pneumonia and other preventable infections that can add thousands of dollars to the cost of care of hospital patients — *Critical Care, July 19, 2007.***
- **Raising the proportion of RNs by increasing RN staffing to match the top 25% best staffed hospitals would produce net short term cost savings of \$242 million — *Health Affairs, January/February 2006.***
- **Improving RN-to-patient ratios from 1:8 to 1:4 would produce significant cost saving and is less costly than many other basic safety interventions common in hospitals, including clot-busting medications for heart attacks and PAP tests for cervical cancer — *Medical Care, Journal of the American Public Health Association, August 2005.***
- **Travel nurses typically cost hospitals at least 20% more than a nurse employee even when benefits are factored in, says Carol Bradley, chief nursing officer for California for Tenet Health System — *USA Today, June 9, 2005.***
- **Hospitals spend about \$42,000 to replace each general medical/surgical unit RN, and \$64,000 to replace each specialty RN — *Journal of the American Medical Association, October 23/30, 2002.***