

# NURSES SAY YES ON 1 SAFE PATIENT LIMITS

## Hospital executives have grossly exaggerated the cost of Question 1, the Safe Patient Limit measure

A new independent study has found that hospital executives have grossly exaggerated the cost of Question 1 and that hospitals can easily afford to safely limit the number of patients assigned to each registered nurse, depending on how sick patients are. The study was conducted by Judith Shindul-Rothschild, PhD, RN, a nursing economist at Boston College and a leading researcher on nursing and patient care quality.

**Using hospital industry data, Shindul-Rothschild's study shows a total implementation cost of under \$47 million, which is a fraction of the \$1.3 billion claimed by the opponents of Question 1.**

### About the study

Shindul-Rothschild's study utilized data that the Massachusetts Health and Hospital Association (MHHA) reports of current nursing care levels in 67 acute care hospitals. The study then overlaid the proposed limits in Question 1. Once gaps by hospital and unit were identified, an average RN salary was assigned per full-time equivalent RN needed to meet the limit. The study also examined how California hospitals responded to that state's similar law, enacted in 2004. California hospitals increased the RN proportion of their staff, offsetting that increase in RNs with a decrease in administrative staff.

### Key Findings

- Total implementation cost of \$47 million
- Majority of Massachusetts' hospitals could easily meet the requirements of the law simply by shifting approximately 3% of their budgets from hospital executives, managers and administrators to direct patient care.
- 37 Massachusetts hospitals (5%) would have no increase in costs.
- After implementation hospitals would still retain a mean profit margin of \$15 million a year.

Massachusetts hospitals are a \$28 billion industry, having posted \$7.6 billion in profits over the last five years. Today nearly 20% of hospitals are owned by for-profit corporations, 15% are owned by Wall Street and virtually every hospital is part of a large corporate health care network. Recent state reports and news stories have documented significant profit margins and executive pay.

The study did not include the cost savings that would be realized by improved nursing care with safe limits under Question 1. Research shows better nursing care reduces costs. Nursing care is an intervention that prevents costly medical errors, preventable complications and unnecessary increased length of stay.

The full study can be seen at <http://www.safepatientlimits.org/news/cost-estimates-q1>.



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