

Fact Sheet

November 2012

Important Facts about Mandatory Staffing Ratios at UMass Memorial Medical Center

UMass Memorial recognizes and values the contribution our nurses play in providing the quality of care that UMass Memorial is recognized for both locally and nationally. We are committed to maintaining appropriate staffing levels at the Medical Center to provide the high level of care our patients expect and deserve. We disagree with the MNA's mandatory staffing ratio proposal because studies have shown that mandated ratios do not improve the quality of care. This is why hospitals across the country have consistently rejected efforts to put mandatory staffing ratios into collective bargaining agreements.

FACT:
We are proud of the quality of care that our nurses provide and have provided to our patients. UMass Memorial continues to be recognized locally and nationally for the high quality of care we provide. A summary of our recognition for quality care can be found on our website: www.umassmemorialchange.org.

FACT:
Mandatory staffing ratios do not improve the quality of care. In 2004, California enacted mandatory staffing ratios. Numerous studies have been conducted to determine whether the quality of care in California hospitals improved as a result of the mandated ratios. The studies found:

- no significant differences in fall rates, pressure ulcer prevalence or restraint use
- no causal tie between increased staffing and decreased patient mortality
- no change in patient length of stay or adverse patient safety events
- no causal connection between staffing levels and patient outcomes

FACT:
Staffing is complex and numbers don't tell the whole story. Mandated ratios ignore many factors that impact the appropriate level of staffing, including:

- individual patient acuity and overall acuity on unit
- individual patient and family needs and overall needs on unit
- nurses' education, skill level and experience
- variability in ancillary staff support and skill levels
- variability of needs throughout a 24-hour period

FACT:
The studies all recognize that staffing is dynamic and that the ideal staffing level can vary from shift-to-shift, hour-to-hour and even minute-to-minute. UMass Memorial Medical Center nurse managers constantly evaluate all of the factors impacting staffing needs and use their best professional judgment to make proper staffing adjustments. Mandated ratios would deprive our nurse managers of the flexibility necessary to make the best staffing decisions.

FACT:
The MNA's mandatory staffing ratio proposal would cost UMass Memorial \$50 million and would eliminate flexibility at a time when health care organizations need to be as flexible as possible to compete in this new health care environment. Mandatory staffing ratios are not in the best interests of our patients, nurses or organization. We are, however, committed to a responsible and effective staffing plan that ensures we have the right nurses, in the right place, at the right time.