



Support Allowing Local Hospitals and Nurses to Determine Their Own Staffing Needs for Their Patients and Communities

OPPOSE MANDATORY STAFFING RATIOS

HB 3338 (REP. THERESA MAH) WOULD UNDERMINE NURSES' ABILITY TO TREAT PATIENTS BASED ON THEIR UNIQUE NEEDS, IMPACTING PATIENT CARE AND ACCESS

IHA Position: Illinois hospitals are prioritizing and maintaining safe staffing levels despite challenges posed by the national shortage of nurses and other healthcare workers, and their ongoing financial recovery following the global pandemic. Mandated staffing ratios would undermine hospitals' ability to provide quality, accessible care, particularly in Illinois' most vulnerable communities. **The best way to advance quality care and patient safety is to allow decisions to be made at the local level by nurses and hospitals working together to establish an appropriate nurse staffing plan on that particular day, in that particular unit.**

Background: An Oct. 3 joint House Labor & Commerce Committee and House Health Care Licenses Committee, sought feedback on mandated healthcare staffing ratios in Illinois' hospitals. Two Safety Net Hospital CEOs joined a CNO panel to testify that hospitals are managing through the staffing shortage and keeping patient standards high by complying with current Illinois laws, the Nurse Staffing by Patient Acuity Act (2007) and the Nurse Staffing Improvement Act (2021). **Hospital leaders rely on flexibility to align and deploy their workforce in the most appropriate way to meet the unique, dynamic and very diverse needs of their specific patient population, using the clinical expertise of their nursing staff and the actual medical needs of their patients.**

Your Local Hospital and Their Nursing Staff Are Most Qualified to Make Staffing Decisions

- Nurse staffing ratios egregiously treat patients the same, nursing skills the same and hospitals the same.
- Hospitals and nurses must have flexibility to appropriately deploy their resources and workforce to meet the unique, dynamic and diverse needs of their patients and their local communities.

There Are Not Enough Nurses to Meet the Mandate

- Illinois is already in the midst of a nurse shortage—projected to be more than 14,400 nurses short by 2025—with 27% of the state's registered nurses planning to retire within the next five years.

Mandating Staffing Ratios Does Not Improve Outcomes

- Mandated nurse staffing ratios have NOT been shown to improve quality of care or patient outcomes.
- Staffing mandates imposed regardless of a hospital's size, location or patients' individual needs will result in longer wait times and reduced access to patient services for the most vulnerable patients.
- Patients' outcomes are improved when the physical, behavioral and emotional needs, and the acuity, are matched to the skill and expertise of the nurse and their multi-disciplinary team.

Staffing Mandates Unnecessarily Increase Healthcare Costs

- Mandating a ratio of nurses to patients in Illinois is estimated to cost over \$2 billion a year, driving up healthcare costs for patients and their families
- Ratios are an unfunded mandate that will lead to higher operating costs, resulting in service reduction and less access to care.
- Added costs threaten financially struggling hospitals, including Safety Net and Critical Access Hospitals.