



*Representing the advocacy interests  
of hospitals and health systems on Long Island and in the Hudson Valley*

# OPPOSITION

## MEMORANDUM

April 30, 2019

TO: Senate Majority Leader Andrea Stewart-Cousins  
Assembly Speaker Carl Heastie  
Senate Health Committee Chair Gustavo Rivera  
Assembly Health Committee Chair Richard Gottfried  
Members, Long Island Delegation of the New York State Legislature  
Members, Hudson Valley Delegation of the New York State Legislature

FROM: Kevin W. Dahill, President and CEO

RE: A.2954 (Gunther) – on 4/30 Assembly Health Committee Agenda  
S.1032 (Rivera) – in Senate Health Committee

**The Suburban Hospital Alliance of New York State, representing hospitals and health systems on Long Island and in the Hudson Valley, opposes A.2954/S.1032, legislation that would mandate statewide nurse-to-patient ratios in hospitals and nursing homes and set minimum staffing requirements for these facilities.**

This bill proposes a one-size-fits-all approach to the very dynamic and complex process of patient care staffing. Within a single hospital unit, both the number of patients and the acuity levels of those patients change repeatedly throughout the course of a day. Even an individual patient's needs may rise and fall within a day, as the nature of the care needed changes from shift to shift. The skill sets of individual nurses varies as well. No arbitrary staffing model could account for these fluctuations and still ensure the safest care; nursing leaders need to be able to respond in the best interests of their patients based on the current patient load.

Without question, effective staffing is critical to the provision of quality care, but there is no evidence to suggest that state-mandated ratios are the best way to achieve this goal. In California, the only state in the nation with mandated ratios, studies that focused on the impact of the required ratios found no direct correlation between the mandate and improved patient outcomes. Rather, factors such as the proportion of nurses educated at the baccalaureate level are more directly linked to increased quality of care.

Furthermore, hospitals in New York State already are held responsible for the quality of care they provide through a number of state and federal laws and accreditation requirements that govern the adequacy of staffing, staff education, patient outcomes, credentialing, processes of care and patient satisfaction. Hospitals also are accountable to the public through quality data reporting, and are required to provide staffing plans and their justification for staffing decisions to the public upon request.

Finally, we urge you to consider the dire fiscal implications of this bill, which likely would be the largest-ever unfunded healthcare mandate in New York State. In the face of compressed reimbursement rates and decreased spending on healthcare programs, hospitals simply could not afford to meet these requirements and maintain operations.

**For these reasons, the Suburban Hospital Alliance of New York State opposes this legislation and urges you to reject A.2954/S.1032.** To achieve our shared goal of providing the highest quality care, patients' unique needs and the skill set of each patient's direct care providers must be taken into account by clinical professionals with the judgment and experience to make staffing decisions.