



## Protect Patient Safety & Access

### Background

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Washington State is not immune to the nationwide nursing workforce crisis. Contrary to union claims, nurses are not waiting in the wings for any single piece of legislation to pass before flocking to work in hospitals. According to the Washington Center for Nursing, only 1.1% of licensed RNs in Washington are unemployed and seeking employment as a nurse and only 2.3% have jobs outside nursing. There are not enough licensed nurses in Washington to fill the thousands of RN vacancies in Washington hospitals.

Nursing unions support legislation that would dictate nurse-to-patient ratios based on a California law passed in 1999 that has failed to alleviate a nursing workforce shortage in that state. California currently leads the nation in nursing shortages. Ratios in California have not resulted in more nurses at the patient bedside.

Staffing hospitals for the best patient care is a complex process that changes on a shift-by-shift basis and requires close coordination between management and staff based on a variety of factors. These teams need the flexibility to quickly adjust for patient acuity, nurse expertise and experience level, sick or family leave for employees and daily patient census changes.

There is no single, simple solution to solve the hospital nursing workforce shortage. WSHA supports a comprehensive legislative package to retain the current nursing workforce, attract more already-trained nurses to Washington hospitals, educate new nurses, and disseminate innovative hospital staffing and patient care models that balance the growing needs of patients with the reality of the nursing shortages.

### WSHA Position

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WSHA opposes rigid nurse ratios. Instead, WSHA supports the following legislative policy and budget solutions to address the nursing workforce shortage:

#### Retain Nurses working in Washington hospitals

- **Hospital Patient Care Unit Staffing Innovation Collaborative.** Establish an independently staffed statewide collaborative of nursing and hospital experts to explore and share modern innovations in hospital staffing. Require the collaborative to report to the Legislature on its findings around hospital staffing and care delivery model innovations. Widespread adoption of modern hospital staffing models will ease the administrative burden on hospital-based nurses.
- **Reinforce Washington's model nurse staffing committee law.** Strengthens enforcement, increases CEO accountability for staffing plan changes, requires committees to file charters with DOH and use a uniform format for staffing plans, and creates a statewide technical assistance team to support nurse staffing committees.

## Attract already-trained nurses to work in Washington hospitals

- Make Washington a destination state for already-trained nurses through **hospital-based nurse student loan repayment assistance**. This would be funded in partnership with hospitals.
- Join the **Nurse Licensure Compact** to ease moving to Washington. As a member of the Compact, trained nurses would be more likely to choose Washington as their home if they are from one of the 37 states and two jurisdictions already in the Compact.
- Require **traveler agency transparency** and promote direct hiring of nurses.

## Add new nurses through workforce development

- Continue and expand the **Washington State Nursing Preceptorship Incentive Program (WSNPG)** to fund nurse preceptor grants.
- Develop a **clinical placement communication platform** for nursing schools and health care partners.
- **Standardize clinical placement hours** across educational institutions.

## Key Messages

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**Rigid hospital staffing mandates, regulatory fines, administrative burdens and increased legal jeopardy do not create more qualified hospital staff. When hospitals are unable to meet the ratios, they will be forced to reduce services and more delays to care will occur. Only significant investment in care delivery innovations, attracting already-trained nurses to Washington hospital employment, health care workforce education and strengthening Washington’s model nurse staffing committee laws will ease workforce shortages.**

- There is no question we are facing an unprecedented, nationwide health care workforce shortage. Washington’s hospitals, long-term care facilities and other providers are no exception. An October 2021 WSHA survey showed hospitals alone need to hire an additional 6,100 nurses to meet current staffing needs. Nursing shortages are also being experienced in other care settings.
- Hospitals are doing all they can to fill vacancies and improve working conditions. They are offering sign-on bonuses, shift bonuses, and retention bonuses; increasing base pay; hiring additional recruiters; and even scheduling managers to work on the floor. According to a recent WSHA financial survey, hospitals increased pay to staff by 9% in the last year. Many hospitals and health systems also recently completed labor contracts that offer significant pay increase. Mandatory nurse-to-patient ratios will do nothing to increase the number of nurses and hospitals will be forced to reduce services if they cannot meet the ratios.
- In recent times, there have been several days when airlines canceled thousands of flights due to staffing shortages. Unlike airlines, hospitals can’t close their ERs, ICUs, critical care units or operating rooms when they are short staffed. Hospitals have canceled and postponed necessary but non-urgent hospital care throughout the pandemic and have had to continue post pandemic due to staff shortages. Ratios will only cause hospitals to reduce more services.
- California has the only comprehensive mandatory nurse-to-patient staffing ratio law in the country and pays the highest average annual wage to RNs. Despite this, California still faces major nursing workforce shortages. California’s ratio mandate — in place since 2004 — has not increased recruitment or retention for nurses working in hospitals and has not markedly improved patient quality of care. It should not be the solution adopted in Washington State.

## Contact Information

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