



W O R K F O R C E TRENDING NOW

From the office of William J. Grubbs, President & CEO of Cross Country Healthcare

April 3, 2015

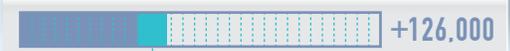
U.S. ECONOMY SHOWS MIXED RESULTS IN MARCH, ADDS 126,000 JOBS

According to the U.S. Bureau of Labor Statistics Employment Report, the U.S. economy added 126,000 jobs in March. This was well below economist projections of 243,000 new jobs, and the weakest growth since December 2013. While a cause for this lackluster growth is uncertain at this point, the slowdown could be weather related. The unemployment rate in March held steady at 5.5%. Unemployment for individuals with a Bachelor's Degree or higher dropped to 2.5%.

Healthcare contributed 22,000 new jobs, accounting for 17.5% of the total jobs created in March. Consistent with an increase in Americans being employed and insured, ambulatory and hospital job growth remains strong. Specifically, 19,000 jobs were added in ambulatory care settings with 8,000 respectively in hospitals. However, nursing and residential care jobs saw a decrease of 5,000.

MARCH JOBS ADDED BY SEGMENT

ALL U.S. JOBS



HEALTHCARE JOBS +22,000

AMBULATORY +19,000

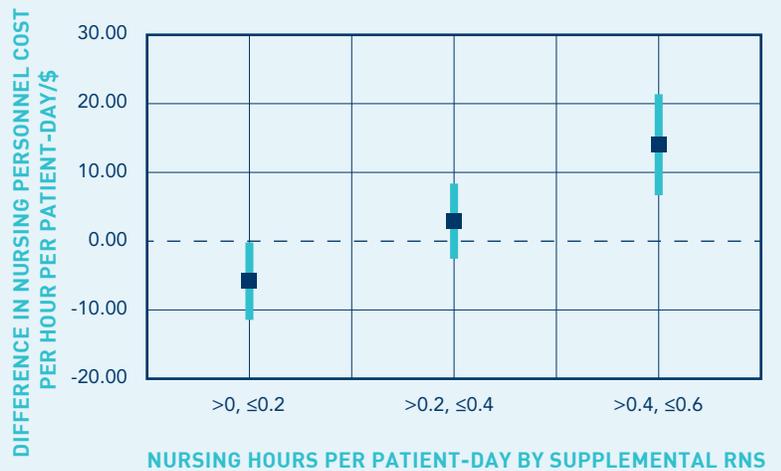
HOSPITAL +8,000

NURSING & RESIDENTIAL CARE -5,000

NEW STUDY: SUPPLEMENTAL NURSES ARE COST-EFFECTIVE STAFFING STRATEGY

Although supplemental nurses are commonly perceived as more costly to hospitals than their permanent counterparts, a recent study conducted by the University of Rochester School of Nursing indicates otherwise. According to the study, how supplemental nurses are used is a critical factor in cost savings. Looking at data from a large academic medical center, the researchers found that moderate use of supplemental nurses was cost-efficient for the facility, but cost-efficiency appeared to decrease as the reliance on supplemental nurses increased.

The findings reveal, as compared with using permanent RNs alone, when the use of supplemental nurses was 0.2 or less hours per patient-day, the average overall nursing personnel cost decreased by \$6.03. When the use of supplemental RNs was between 0.2 and 0.4 hours per patient day, the average nursing personal cost per patient-day was \$2.47 more, which was not significantly different from no use of supplemental RNs. At levels above 0.4 hours per patient-day, use of supplemental RNs was associated with significant increases in overall nursing personnel costs.



Cost of Supplemental Staff = Overtime Cost of Permanent Staff

Featured in the April/June 2015 edition of The Journal of Nursing Care Quality - the full report is [available here](#).