
A BILL FOR AN ACT

RELATING TO REGISTERED NURSES.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. The legislature finds that research evidence
2 demonstrates that registered nurses play a critical role in
3 patient safety and quality of care. The shortage of nurses
4 available to provide care in acute care hospitals has
5 necessitated multiple strategies to generate more nurses and
6 improve the recruitment and retention of nurses in hospitals.

7 Evidence-based nurse staffing that can help ensure quality
8 and safe patient care while increasing nurse satisfaction in the
9 work environment is essential to solving an urgent public health
10 issue in Hawaii. Hospitals and nursing organizations recognize
11 a mutual interest in patient safety initiatives that create a
12 healthy environment for nurses and safe care for patients.

13 In order to protect patients and to support greater
14 retention of registered nurses, and to promote evidence-based
15 nurse staffing, the legislature intends to establish a mechanism
16 whereby direct care nurses and hospital management shall
17 participate in a joint process regarding decisions about nurse
18 staffing.



1 SECTION 2. The Hawaii Revised Statutes is amended by
2 adding a new chapter to be appropriately designated and to read
3 as follows:

4 "CHAPTER

5 REGISTERED NURSE STAFFING LEVELS

6 § -1 **Definitions.** As used in this chapter unless the
7 context clearly requires otherwise, the following terms shall
8 have the meanings ascribed to them:

9 "Acute care hospital" means a short-term hospital that has
10 facilities, medical staff and other personnel to provide
11 diagnosis, care and treatment of a wide range of acute
12 conditions, including disease, trauma or recovery from surgery.
13 Acute care is usually given in a hospital by specialized
14 personnel using complex and sophisticated technical equipment
15 and materials, and it may involve intensive or emergency care.

16 "Critical access hospital" means a rural limited service
17 hospital that has been converted to a special designation as a
18 critical access hospital under the medicare rural hospital
19 flexibility grant program. A critical access hospital consists
20 of no more than fifteen acute beds and ten swing beds, if
21 desired. The total compliment of acute care beds and swing beds
22 shall not exceed twenty-five.



1 "Hospital" includes acute care hospitals, state hospitals,
2 critical access hospitals, and psychiatric hospitals.

3 "Intensity" means the level of patient need for nursing
4 care.

5 "Nurse":

6 (1) Means a person licensed under chapter 457 to practice
7 nursing;

8 (2) Does not include licensed practical nurses or
9 certified nursing assistants.

10 "Nurse staffing committee" means a committee established by
11 a hospital under this chapter.

12 "Patient care unit" means any unit or area of the hospital
13 that provides patient care by registered nurses.

14 "Skill mix" means the number and relative percentages of
15 registered nurses, licensed practical nurses, and unlicensed
16 assistive personnel among the total number of nursing personnel.

17 § -2 **Nurse staffing committee.** (a) By September 1,
18 2011, each acute care hospital and all critical access hospitals
19 shall establish a nurse staffing committee either by creating a
20 new committee or assigning the functions of a nurse staffing
21 committee to an existing committee to develop a documented
22 staffing plan as required pursuant to this chapter.



1 At least sixty per cent of the nurse staffing committee
2 shall be registered nurses currently providing direct patient
3 care and forty per cent of the members shall be determined by
4 the hospital administration. The selection of the registered
5 nurses providing direct patient care on the staffing committee
6 shall be according to the collective bargaining agreement, if
7 applicable, or through selection by their peers.

8 Participation in the nurse staffing committee by a
9 registered nurse shall be on scheduled work time and compensated
10 at the appropriate rate of pay. Nurse staffing committee
11 members shall be relieved of all other work duties during
12 meetings of the committee.

13 (b) Primary responsibilities of the nurse staffing
14 committee shall include the development and oversight of annual
15 patient care unit and shift-based nurse staffing plan, based on
16 the needs of patients, to be used as a primary component of the
17 staffing budget. Factors to be considered in the development of
18 the plan shall include:

- 19 (1) Census, including the total number of patients on the
20 unit on each shift and activity such as patient
21 discharges, admissions, and transfers;



- 1 (2) Level of intensity of all patients and nature of care
2 to be delivered on each shift;
- 3 (3) Skill mix and classification of registered nurses
4 required in each unit in the health care facility,
5 which shall take into account the level of experience
6 of the clinical and nonclinical support staff with
7 whom the nurses collaborate, supervise, or otherwise
8 delegate assignments;
- 9 (4) The need for specialized or intensive equipment or
10 technology;
- 11 (5) The size and geography of each unit, including
12 placement of patient rooms, treatment areas, nursing
13 stations, medication preparation rooms, and equipment;
- 14 (6) Staffing guidelines adopted or published by national
15 nursing professional associations, specialty nursing
16 organizations, and other health professional
17 organizations;
- 18 (7) Semi-annual review of the staffing plan against
19 patient need and known evidence-based staffing
20 information, including the nursing sensitive quality
21 indicators collected by the hospital;



1 (8) Review, assessment, and response to staffing concerns
2 presented to the committee; and

3 (9) Hospital finances and resources.

4 (c) The staffing plan shall not diminish other standards
5 contained in state or federal law or rules, or the terms of an
6 applicable collective bargaining agreement, if any, between the
7 hospital and the exclusive representative of the registered
8 nursing staff.

9 (d) The committee shall produce the hospital's annual
10 nurse staffing plan. If the staffing plan is not adopted by the
11 hospital, the hospital administration shall provide a written
12 explanation of the reasons for nonadoption to the committee.

13 (e) Each hospital shall post, in a public area on each
14 patient care unit, the nurse staffing plan and the nurse
15 staffing schedule for that shift on that unit, as well as the
16 relevant clinical staffing for that shift. The staffing plan
17 and current staffing levels shall also be made available to
18 patients and visitors upon request.

19 (f) A hospital shall not retaliate or engage in any form
20 of intimidation of:



1 (1) An employee for performing any duties or
2 responsibilities in connection with the nurse staffing
3 committee; or

4 (2) An employee, patient, or other individual who notifies
5 the nurse staffing committee or the hospital
6 administration of their concerns on nurse staffing.

7 (g) This section is not intended to create unreasonable
8 burdens on critical access hospitals under 42 U.S.C. section
9 1395. Critical access hospitals may develop flexible approaches
10 to accomplish the requirements of this section that may include
11 having nurse staffing committees work by telephone, video
12 conferencing, or electronic mail.

13 § -3 **Certificates of need.** As a condition of retaining
14 a certificate of need, an acute care or critical access hospital
15 shall make available to the department of health a documented
16 nurse staffing plan and a written certification that the
17 documented staffing plan is adequate to meet the needs of
18 patients in the hospital. The documented staffing plan shall
19 include, without limitation:

20 (1) A detailed written plan setting forth the number,
21 skill mix, and classification of registered nurses in
22 each hospital unit, which shall take into account the



- 1 experience of the clinical and nonclinical support
- 2 staff with whom the nurses supervise, collaborate, or
- 3 otherwise delegate assignments;
- 4 (2) A description of the types of patients who are treated
- 5 in each unit, including, without limitation,
- 6 discharges, transfers and admissions;
- 7 (3) A description of the size and geography of each unit;
- 8 (4) A description of any specialized equipment and
- 9 technology available for each unit; and
- 10 (5) Any foreseeable changes in the size or function of
- 11 each patient care unit."

12 SECTION 3. This Act shall take effect upon its approval.

13

INTRODUCED BY: Maif B. Lee
Deputy Governor
John M. Pappas
FR

JAN 25 2011

Report Title:

Registered Nurses; Hospitals

Description:

Requires acute care and critical access hospitals to provide DOH with a documented nurse staffing plan in order to retain their certificates of need and to establish internal nurse staffing committees.

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