

Charlotte A. Carter-Yamauchi  
Director

Shawn K. Nakama  
First Assistant

Research 808-587-0666  
Revisor 808-587-0670  
Fax 808-587-0681



LEGISLATIVE REFERENCE BUREAU  
State of Hawaii  
State Capitol, Room 446  
415 S. Beretania Street  
Honolulu, Hawaii 96813

## Written Comments

### HCR187, HD1

# REQUESTING THE LEGISLATIVE REFERENCE BUREAU TO CONDUCT A STUDY ON BEST PRACTICES FOR NURSE STAFFING IN HEALTHCARE FACILITIES

Charlotte A. Carter-Yamauchi, Director  
Legislative Reference Bureau

Presented to the Senate Committee on Health and Human Services

Friday, April 12, 2024, 1:00 p.m.  
Conference Room 225 & Via Videoconference

Chair San Buenaventura and Members of the Committee:

Good afternoon Chair San Buenaventura and members of the Committee. My name is Charlotte Carter-Yamauchi, and I am the Director of the Legislative Reference Bureau (Bureau). Thank you for providing the opportunity to provide **written comments** expressing our **strong concerns** on H.C.R. No. 187, H.D. 1, Requesting the Legislative Reference Bureau to conduct a study on best practices for nurse staffing in healthcare facilities.

The purpose of this measure is to request that the Bureau conduct a study on best practices for nurse staffing in healthcare facilities, which assesses and discusses:

- (1) Best practices, as set forth by entities such as The Joint Commission, on staffing for hospitals and other settings of care;
- (2) The effectiveness of different types of staffing standards in ensuring patient and worker safety, and quality of care;
- (3) Existing staffing standards and regulations in other states;

- (4) Alternative approaches to staffing standards, such as acuity-based staffing models or nurse-driven staffing decisions;
- (5) The experiences and perspectives of healthcare professionals, including nurses, administrators, and other stakeholders, regarding staffing standards;
- (6) The potential benefits and challenges associated with implementing staffing standards in Hawaii; and
- (7) The costs of implementing various staffing standards, including nurse-to-patient ratios.

The measure requests that the Bureau submit a report of its findings and recommendations to the Legislature no later than twenty days prior to the convening of the Regular Session of 2025.

The Bureau takes no position on this measure, but we have very serious concerns about our ability to conduct this study and submit the following comments for your consideration.

As a general matter, the Bureau notes that it lacks specific subject matter expertise necessary to conduct the requested study. We do not presently have any staff with specific expertise in or particular knowledge of or experience in matters relating to health care, health care staffing, patient safety and best practices, or occupational safety. Accordingly, while the Bureau may be able to identify any existing statutes relating to nursing staffing in other states, we would not be able to comment on "the effectiveness of different types of staffing standards in ensuring patient and worker safety." Similarly, the Bureau would not be able to assess the effectiveness of standards recommended by The Joint Commission or other entities, nor would we be able to definitively comment on the benefits, challenges, and costs of implementing staffing standards in Hawaii.

The Bureau is also concerned that it is not well suited to gather "experiences and perspectives of healthcare professionals, including nurses, administrators, and other stakeholders, regarding staffing standards," as requested by this resolution. The Bureau is not intimately familiar with the local healthcare landscape and would not be able to readily identify the pertinent issues or the relevant stakeholder groups to gather the "experiences and perspectives of" these stakeholder groups, as requested by this resolution. Bureau staff would have to review the scope of the healthcare field, identify the relevant stakeholders, and engage those stakeholders to gather the feedback desired by this measure. This task of surveying stakeholders would best be performed by each of the relevant stakeholders. Moreover, given the other items requested by this resolution, it is highly improbable that the Bureau would be able to complete these tasks in the timeframe proposed by this measure.

The Bureau is also seriously concerned about being thrust into an ongoing labor dispute. We understand that the impetus behind this measure is a dispute between healthcare providers

and labor groups. The measure covers many matters that are the subject of collective bargaining for the Hawaii Health Systems Corporation's public employees. The requirement to collectively bargain on terms related to wages, hours, and working conditions is well established under Hawaii law. Specifically, Hawaii Revised Statutes Chapter 89 and volumes of labor law jurisprudence issued by Hawaii courts and the Hawaii Labor Relations Board make it clear that public employers and unions must negotiate regarding terms and conditions of employment. The Bureau notes concerns raised in testimony from prior hearings on this measure that certain proposed provisions contained in the measure could possibly improperly influence and negatively impact the collective bargaining rights of public employers and our unionized workforce. Another testifier questioned the appropriateness of public resources being used to facilitate negotiations for labor contracts for private health systems. The Bureau agrees with these concerns. Further, because the Bureau lacks specific subject matter expertise, we do not believe we are the agency best suited to authoritatively or definitively assess the issues raised by this resolution in a manner that would satisfactorily address the concerns of the parties involved in this dispute.

Because the Bureau does not have the subject matter expertise to conduct the study requested by this measure, we would need to contract the services of experts to meet this measure's objectives. However, the Bureau's budget does not contain the necessary funds to contract such services, and funding cannot be added to this measure. Accordingly, we would require additional funding sufficient to cover the contracted study services to be provided to us through some other means. Further, as we are required to adhere to the State Procurement Code in contracting these services unless specifically exempted, the present timeframe proposed in the measure is woefully insufficient. Accordingly, even if sufficient funding is provided, it is highly improbable that the Bureau will be able to scope such an undertaking, craft a Request for Proposals, select a contractor, receive and approve the contractor's work product, and deliver it to the Legislature all within the 2025 timeframe presently provided in this measure.

Rather than having the Bureau conduct the study through the contracting of services of subject matter experts, the Bureau respectfully suggests that this measure be reverted back to the establishment of a working group. HCR 187, as introduced, would have tasked the Department of Health with convening a healthcare facilities labor standards working group to research, assess, and make recommendations on the best practices in labor standards that can be implemented at hospitals, care homes, and dialysis facilities in the State. The working group would have included members from across the industry, including representatives from the Department of Health, Department of Labor and Industrial Relations, and representatives from both healthcare facilities and nurses. The Bureau believes that those parties, unlike the Bureau, possess the relevant subject matter expertise in healthcare, labor issues, and patient welfare required to authoritatively evaluate the issues presented by this measure. The Bureau also notes that the governmental entities involved, unlike the Bureau, possess the statutory authority and budgetary resources to contract for any services that may be needed.

However, if the Committee still believes the Bureau's participation in this matter is necessary, the Bureau respectfully requests that the measure be amended to limit the scope of the study by the Bureau to a discussion of:

- (1) Existing nursing staffing standards and regulations in other states; and
- (2) A literature review of best practices for staffing and workforce development, along with successful efforts in other states to address the nursing workforce shortage.

If the scope of the study is narrowed in the manner described above, then the Bureau believes that the services requested under the measure would be manageable, provided that the Bureau's interim workload is not adversely impacted by too many other studies or additional responsibilities, such as conducting studies, writing or finalizing other reports, drafting legislation, or any combination of these for the Legislature or for other state agencies, task forces, or working groups that may be requested or required under other legislative measures.

Thank you again for your consideration.



Randy Perreira  
President

# HAWAII STATE AFL-CIO

888 Mililani Street, Suite 501 • Honolulu, Hawaii 96813

Telephone: (808) 597-1441  
Fax: (808) 593-2149

The Thirty-Second Legislature  
The Senate  
Committee on Health and Human Services

Testimony by  
Hawaii State AFL-CIO

April 12, 2024

TESTIMONY ON HCR187 HD1 - REQUESTING THE LEGISLATIVE REFERENCE BUREAU TO CONDUCT A  
STUDY ON BEST PRACTICES FOR NURSE STAFFING IN HEALTHCARE FACILITIES

Chair San Buenaventura, Vice Chair Aquino, and members of the committee:

The Hawaii State AFL-CIO is a federation of 74 affiliate labor organizations representing over 68,000 union members in the State of Hawaii. The AFL-CIO serves its affiliates by advocating for workers and their families before the state legislature and other state and county government branches.

The Hawaii State AFL-CIO **supports** HCR187 HD1. However, we also urge this committee to revert to the original version of the bill, which requests the Department of Health to convene a healthcare facilities labor standards working group to research, assess, and make recommendations on the best practices in labor standards that can be implemented at hospitals, care homes, and dialysis facilities in the state.

The current healthcare staffing shortage, exacerbated by the ongoing challenges posed by COVID-19, demands urgent action. Our healthcare professionals are stretched thin, facing unpredictable working conditions and increasing rates of burnout. Improved labor standards are essential for the well-being of our healthcare workers and the quality of care provided to our community.

Convening this working group presents an opportunity to address these pressing issues head-on. Through comprehensive research and collaboration, we can identify effective solutions to enhance working conditions, ensure adequate staffing levels, and improve patient safety and outcomes. Investing in our healthcare workforce is vital for the long-term health of our state's healthcare system.

Respectfully submitted,

Randy Perreira  
President



Friday, April 12, 2024 at 1:00 pm  
Conference Room 225

**Senate Committee on Health and Human Services**

To: Chair Joy A. San Buenaventura  
Vice Chair Henry J.C. Aquino

From: Paige Heckathorn Choy  
AVP, Government Affairs  
Healthcare Association of Hawaii

Re: **Submitting comments**  
**HCR 187 HD 1, Requesting the Legislative Reference Bureau to conduct a study on best practices for nurse staffing in healthcare facilities**

The Healthcare Association of Hawaii (HAH), established in 1939, serves as the leading voice of healthcare on behalf of 170 member organizations who represent almost every aspect of the health care continuum in Hawaii. Members include acute care hospitals, skilled nursing facilities, home health agencies, hospices, assisted living facilities and durable medical equipment suppliers. In addition to providing access to appropriate, affordable, high-quality care to all of Hawaii's residents, our members contribute significantly to Hawaii's economy by employing over 30,000 people statewide.

We are writing to provide **comments** on HCR 187 HD 1, which requests the Legislative Reference Bureau (LRB) study best practices for staffing in healthcare facilities. This study should rely on evidence-based best practices that are developed by national experts, and should consider the abilities different types of facilities to implement any types of staffing standards. Further, the study would require that costs be considered and quantified, which is of critical importance when considering staffing standards for organizations that are publicly funded, including through the Medicaid program.

Our members continue to invest heavily in workforce and quality programs, to ensure that we are growing our own local talent and ensuring that patients can continue to expect high-quality care. This study can help to inform future efforts to ensure a healthy workforce and can be an important element of future discussions amongst policy-makers.

Thank you for the opportunity to provide comments on this measure.

**Written Testimony Presented Before the  
Senate Committee on Health and Human Services  
April 12, 2024 at 1:00 P.M.**

**Conference Room 225 and via Videoconference**

**by**

**Laura Reichhardt, APRN, AGPCNP-BC, FAAN  
Director, Hawai'i State Center for Nursing  
University of Hawai'i at Mānoa**

**Comments on HCR 187, HD1 / HR 167, HD1**

Chair San Buenaventura, Vice Chair Aquino, and members of the Committee, thank you for the opportunity to testify on HCR 187, HD1 and HR 167, HD1. The Hawai'i State Center for Nursing provides comments.

This measure aims to convene a working group to research, assess, and make recommendations on (1) the potential benefits and impacts associated with the implementation and enforcement of labor standards at hospitals, care homes, and dialysis facilities in the State, including but not limited to the establishment and enforcement of minimum staffing standards, hospital staffing committees, and mandatory meal breaks, rest breaks, and overtime standards; (2) Best practices in labor standards that can be implemented at hospitals, care homes, and dialysis facilities in the State; and (3) Any other issues that may arise, pursuant to the direction of the working group.

The Hawai'i State Center for Nursing (HSCN) recognizes the importance of safe staffing standards. Further, in order to best determine the potential benefits and impacts of such approaches described in this resolution, the HSCN recommends a study is conducted before convening a working group to assess findings and make recommendations to the Legislature. Therefore, HSCN agrees with the approach proposed by the Hawai'i Board of Nursing.

Thank you for the opportunity to testify on this resolution. Your advocacy on behalf of nurses' wellbeing and patient outcomes is greatly appreciated.



**Rosalee Agas -Yuu, RN**  
President  
1600 Ala Moana Blvd Suite 100  
Honolulu, HI 96815  
Tel: (808) 531-1628  
Fax: (808) 524-2760

The Thirty-Third Legislature, State of Hawai'i  
Hawai'i State Senate  
Committee on Health & Human Services

Testimony by  
Hawaii Nurses Association

April 12, 2024

HCR 187-HD1 – REQUESTING THE LEGISLATIVE REFERENCE BUREAU TO CONDUCT  
A STUDY ON BEST PRACTICES FOR NURSE STAFFING IN HEALTHCARE FACILITIES.

DATE: Wednesday, April 12, 2024

TIME: 1:00 PM

PLACE: Senate Conference Room 225

Chair San Buenaventura and Committee Members;

The Hawaii Nurses Association - OPEIU Local 50, affiliated with the AFL-CIO founded in 1917, represents 4,000 nurses, respiratory therapists, and other healthcare workers across the State of Hawai'i. We are grateful for this opportunity to express our **SUPPORT of HCR 187-HD1**

In Hawaii, healthcare professionals, notably nurses, are grappling with an alarming shortage, largely fueled by chronic overwork and inadequate labor standards. This pressing issue of **long hours, understaffing, and heavy workloads** leads to burnout, jeopardizing both the well-being of healthcare workers and the quality of patient care. HCR 187-HD1 requests that the Legislative Reference Bureau to conduct a study on best practices for nurse staffing in health care facilities.

On behalf of the 4,000 nurses and respiratory therapists whom HNA represents, I urge the esteemed members of this committee to **vote in favor of HCR 187-HD1**, recognizing its pivotal role in promoting the well-being of healthcare workers and ensuring excellence in healthcare delivery throughout Hawaii.

We appreciate the opportunity to present our testimony in support of HCR 187-HD1.

Respectfully,

Rosalee Agas-Yuu  
President



**LATE**

**HCR-187-HD-1**

Submitted on: 4/12/2024 6:39:06 AM

Testimony for HHS on 4/12/2024 1:00:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Ellen Awai	Individual	Support	Written Testimony Only

Comments:

Please support HCR187 HD1. Why do we have a shortage of registered nurses? I've tried to apply for positions in the medical field and in many cases for clerical, you need to have an RN degree! This is really not necessary if they need to do more clerical or communication work. RNs can be consulted but not need to have these degrees just cause they work in a hospital or other medical facility. These RNs apparently have no clue, the process of getting approvals from insurances, which is another deadend for most people, unable to get approval for vital services such as surgery etc. The medical system created this shortage of workforce themselves, but it's not just this industry, it's all positions because they run all of society. Foreigners are brought in to work because they took a medical degree which is not sufficient in the islands, who refuse to use English as their main language, are unable to write emails/letters or communicate effectively, thus we have an issue created by the colonization of our islands. Then they don't want to return home where their money is worth 50x more and they could live like royalty, because the medical is not good. The medical is not good for the residents because it takes forever to find a good plan where just a few dominate and the same accounting system is used in the smaller insurances. I know because Ive had almost all insurances and now take Devoted the newest in our state, only 2 years here. I still have to wait for a Primary care doctor till June or July after getting in from January. With Kaiser, I had to wait till August last year! Then because HMSA never changed their subscriber number they automatically get charged by organizations like Queen's Hospitl although I explained to the virtual APRN of my new insurance, again a clerical issue! I'm been harrassed by Queens for \$292 since January because of a virtual visit only 15 minutes because I do not have an HMSA plan anymore. This causes anxiety and stress, why should I have to be the one to fix a system that is broken by monopolies and government that don't listen to the population! The local residents are unable to find jobs and must move elsewhere to live, it's all a cause and effect of our medical model. Yes, definitely, support this bill!