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House Bill 643

By: Representative Mitchell of the 88th

## A BILL TO BE ENTITLED AN ACT

1 '	To amend	Chapter 7	of Title	21 o	f the	Official	Code	of	Georgia	Annotated,	relating	to
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- 2 regulation and construction of hospitals and other health care facilities, so as to require the
- 3 development of quality assurance standards for health care facilities; to provide a definition;
- 4 to provide for the requirement for a care delivery model based on patient needs for health
- 5 care facilities; to provide a duty to report quality of care and safety problems; to provide an
- 6 identification requirement for persons dealing with patients in health care facilities; to
- 7 provide for related matters; to repeal conflicting laws; and for other purposes.

## 8 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

9 **SECTION 1.** 

- 10 Chapter 7 of Title 31 of the Official Code of Georgia Annotated, relating to regulation and
- 11 construction of hospitals and other health care facilities, is amended by adding a new article
- 12 to read as follows:
- 13 "<u>ARTICLE 16</u>
- 14 <u>31-7-450.</u>
- 15 As used in this article, the term 'health care facilities' means hospitals; other special care
- 16 <u>units, including but not limited to podiatric facilities; skilled nursing facilities; intermediate</u>
- 17 <u>care facilities; assisted living communities; personal care homes; ambulatory surgical or</u>
- 18 <u>obstetrical facilities; health maintenance organizations; home health agencies; and</u>
- 19 <u>diagnostic</u>, treatment, or rehabilitation centers.
- 20 <u>31-7-451.</u>
- 21 All health care facilities shall develop comprehensive quality assurance or improvement
- 22 <u>standards adequate to identify, evaluate, and remedy problems related to the quality of such</u>

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23 <u>health care facilities</u>. Such standards shall be made available upon request to the public

- 24 <u>during regular business hours and shall include:</u>
- 25 (1) An ongoing written internal quality assurance or improvement program;
- 26 (2) Specific written guidelines for quality care studies and monitoring;
- 27 (3) Performance and clinical outcomes-based criteria;
- 28 (4) Procedures for remedial action to correct quality problems, including written
- 29 <u>procedures for taking appropriate corrective action;</u>
- 30 (5) A plan for data gathering and assessment;
- 31 (6) A peer review process; and
- 32 (7) A summary of process outcomes and follow-up actions related to the overall quality
- improvement program for the health care facility.
- 34 <u>31-7-452.</u>
- 35 All health care facilities shall include in their policies and procedures a care delivery model
- 36 based on patient needs which includes, but is not limited to:
- 37 (1) Defined roles and responsibilities of licensed and unlicensed health care personnel;
- 38 (2) A staffing plan that specifies staffing levels of licensed and unlicensed personnel
- 39 required to safely and consistently meet the performance and clinical outcomes-based
- 40 <u>standards as outlined in the facility's quality improvement plan;</u>
- 41 (3) A staffing model that is developed and implemented in an interdisciplinary and
- 42 <u>collaborative manner;</u>
- 43 (4) A policy and method that incorporates at least four components in an ongoing
- 44 <u>assessment of the severity of the patient's disease, patient condition, level of impairment</u>
- or disability, and the specific unit patient census to meet the needs of the individual
- 46 patient in a timely manner; and
- 47 (5) A staffing model that supports the delivery of patient care services with an
- 48 <u>appropriate mix of licensed health care personnel that will allow them to practice</u>
- 49 <u>according to their legal scope of practice and facility policies.</u>
- 50 <u>31-7-453.</u>
- 51 (a) Any agent or employee of a health care facility who knows or has reasonable cause to
- 52 <u>believe that the quality of care of a patient, patient safety, or the health care facility's safety</u>
- is in jeopardy shall make an oral or written report of the problem to the health care facility,
- and may make it to any appropriate private, public, state, or federal agency.
- 55 (b) Any individual in an administrative or supervisory capacity at the health care facility
- 56 who receives a report under subsection (a) of this Code section shall investigate the

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57 problem, take appropriate action, and provide a response to the individual reporting the

- 58 problem within seven business days.
- 59 (c) No health care facility shall by policy, contract, procedure, or other formal or informal
- 60 means subject to reprisal, or directly or indirectly use, or threaten to use, any authority or
- 61 <u>influence</u>, in any manner whatsoever, which tends to discourage, restrain, suppress,
- 62 <u>dissuade</u>, deter, prevent, interfere with, coerce, or discriminate against any agent or
- 63 employee who in good faith reports, discloses, divulges, or otherwise brings to the attention
- of the health care facility the circumstances or facts to form the basis of a report under
- 65 <u>subsection (a) or (b) of this Code section.</u> No health care facility shall require any agent
- or employee to give notice prior to making a report, disclosure, or divulgence under
- 67 <u>subsection (a) or (b) of this Code section.</u>
- 68 (d) All reports, investigations, and action taken subject to this article shall be conducted
- in a manner that protects and maintains the confidentiality of patients and personnel and
- 70 preserves the integrity of data, information, and medical records.
- 71 (e) All health care facilities shall, as a condition of licensure pursuant to this chapter, abide
- by the provisions of Code Section 31-7-451 and this Code section.
- 73 (f) No agent or employee of a health care facility shall file a report under subsection (a)
- or (b) of this Code section in bad faith and any such agent or employee shall have a
- 75 <u>reasonable basis for filing a report.</u>
- 76 <u>31-7-454.</u>
- 77 (a) All health care facilities shall require all persons, including students, who examine,
- observe, or treat a patient or resident of the health care facility to wear identification which
- 79 <u>readily identifies</u>, at a minimum, the person's first name, licensure credential, and position
- 80 <u>title or department.</u>
- 81 (b) The identification shall be of a size and type and appropriately displayed so that it may
- 82 <u>be easily detected and read."</u>
- 83 SECTION 2.

84 All laws and parts of laws in conflict with this Act are repealed.