

House Bill 745

By: Representatives Kelley of the 16th, Hatchett of the 155th, Pirkle of the 169th, and McCollum of the 30th

A BILL TO BE ENTITLED
AN ACT

1 To amend Chapter 7 of Title 31 of the Official Code of Georgia Annotated, relating to
2 regulation and construction of hospitals and other health care facilities, so as to provide
3 requirements for nurse staffing in hospitals; to provide for definitions; to require a written
4 nurse services staffing plan; to provide for an official nurse services staffing plan; to provide
5 for the establishment of nurse staffing committees; to provide for annual reporting of staffing
6 information to the Department of Community Health; to provide for anonymous reports and
7 investigations of unsafe staffing conditions; to establish an advisory commission; to provide
8 for related matters; to repeal conflicting laws; and for other purposes.

9 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

10 **SECTION 1.**

11 Chapter 7 of Title 31 of the Official Code of Georgia Annotated, relating to regulation and
12 construction of hospitals and other health care facilities, is amended by revising Article 2,
13 which is reserved, as follows:

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14 "ARTICLE 2

15 ~~31-7-24.~~16 ~~Reserved.~~17 31-7-30.18 As used in this article, the term:19 (1) 'Committee' means a nurse staffing committee established pursuant to Code Section
20 31-7-32.21 (2) 'Hospital' means a hospital which is permitted to operate by the department pursuant
22 to Article 1 of this chapter, including a hospital maintained or operated by this state or
23 a hospital authority.24 (3) 'Nurse services staffing plan' means the staffing plan required to be established by a
25 hospital pursuant to Code Section 31-7-31.26 (4) 'Nurse staffing committee' means the standing committee established by a hospital
27 pursuant to Code Section 31-7-32.28 (5) 'Patient care unit' means a unit or area of a hospital in which registered nurses provide
29 patient care.30 31-7-31.31 (a) The governing body of a hospital shall adopt and implement a written nurse services
32 staffing plan to ensure that an adequate number and skill mix of nurses are available to
33 meet the level of patient care needed. Such plan shall include a process for:34 (1) Requiring the hospital to give significant consideration to the nurse services staffing
35 plan recommended by the hospital's nurse staffing committee and to that committee's
36 evaluation of any existing plan;

37 (2) Adopting and implementing an official nurse services staffing plan that is based on
38 the needs of each patient care unit and shift and on evidence relating to patient care
39 needs;

40 (3) Using the official nurse services staffing plan as a component in setting the nurse
41 staffing budget;

42 (4) Encouraging nurses to provide input to the committee relating to nurse staffing
43 concerns;

44 (5) Protecting nurses who provide input to the committee from retaliation; and

45 (6) Monitoring compliance with any rules and regulations adopted by the department
46 relating to nurse staffing.

47 (b) The written nurse services staffing plan adopted pursuant to subsection (a) of this Code
48 section shall:

49 (1) Reflect current standards established by private accreditation organizations,
50 governmental entities, national nursing professional associations, or other healthcare
51 professional organizations;

52 (2) Set minimum staffing levels for patient care units that are:

53 (A) Based on multiple nurse and patient considerations; and

54 (B) Determined by the nursing assessment and in accordance with evidence based safe
55 nursing standards;

56 (3) Include a method for adjusting the nurse services staffing plan for each patient care
57 unit to provide staffing flexibility to meet patient needs; and

58 (4) Include a contingency plan when patient care needs unexpectedly exceed direct
59 patient care staff resources.

60 (c) A hospital shall:

61 (1) Use the official nurse services staffing plan:

62 (A) As a component in setting the nurse staffing budget; and

63 (B) To guide the hospital in assigning nurses hospital wide; and

64 (2) Make readily available to nurses on each patient care unit at the beginning of each
65 shift the official nurse services staffing plan levels and current staffing levels for that unit
66 and that shift.

67 31-7-32.

68 (a) A hospital shall establish a nurse staffing committee as a standing committee of the
69 hospital.

70 (b) The committee shall be composed of members who are representative of the types of
71 nursing services provided in the hospital.

72 (c) The chief nursing officer of the hospital shall be a voting member of the committee.

73 (d) At least 50 percent of the members of the committee shall be registered nurses who:

74 (1) Provide direct patient care during at least 50 percent of their work time; and

75 (2) Are selected by their peers who provide direct patient care during at least 50 percent
76 of their work time.

77 (e) The committee shall meet at least quarterly.

78 (f) The committee shall:

79 (1) Develop and recommend to the hospital's governing body a nurse services staffing
80 plan that meets the requirements of Code Section 31-7-31;

81 (2) Review, assess, and respond to staffing concerns expressed to the committee;

82 (3) Identify the nurse-sensitive outcome measures the committee will use to evaluate the
83 effectiveness of the official nurse services staffing plan;

84 (4) Evaluate, at least semiannually, the effectiveness of the official nurse services
85 staffing plan and variations between the plan and the actual staffing; and

86 (5) Submit to the hospital's governing body, at least semiannually, a report on nurse
87 staffing and patient care outcomes, including the committee's evaluation of the
88 effectiveness of the official nurse services staffing plan and aggregate variations between
89 the nurse services staffing plan and actual staffing.

90 (g) In evaluating the effectiveness of the official nurse services staffing plan, the
91 committee shall consider patient needs, workforce shortages and availability,
92 nurse-sensitive outcome measures, nurse satisfaction measures collected by the hospital,
93 and evidence based nurse staffing standards.

94 31-7-33.

95 (a) A hospital shall annually report to the department, and the department shall include as
96 a confidential addendum to the annual hospital questionnaire, the following information:

97 (1) Whether the hospital's governing body has adopted a nurse services staffing plan as
98 required by Code Section 31-7-31;

99 (2) Whether the hospital has established a nurse staffing committee as required by Code
100 Section 31-7-32 that meets the membership requirements of such Code section;

101 (3) Whether the nurse staffing committee has evaluated the hospital's official nurse
102 services staffing plan as required by Code Section 31-7-32 and has reported the results
103 of the evaluation to the hospital's governing body as provided by such Code section; and

104 (4) The nurse-sensitive outcome measures the committee adopted for use in evaluating
105 the hospital's official nurse services staffing plan and an evaluation of the effectiveness
106 of such measures.

107 (b) To the extent possible, the department shall collect the data required pursuant to
108 subsection (a) of this Code section in conjunction with surveys or other data required to be
109 submitted to the department under other laws or regulations.

110 (c) Such information shall not be subject to Article 4 of Chapter 18 of Title 50.

111 31-7-34.

112 (a) The department shall maintain a secure online portal for the submission by hospital
113 staff members of anonymous reports of unsafe staffing conditions in any hospital.

114 (b) Upon receipt of a report of unsafe staffing conditions, the department shall forward the
115 report to its Division of Healthcare Facility Regulation for investigation, to the nurse
116 staffing committee of the hospital that is the subject of the report.

117 (c) The Division of Healthcare Facility Regulation shall investigate all reports of unsafe
118 staffing conditions pursuant to Code Section 31-2-8. If the division determines that a
119 patient care unit identified in a complaint did not deliver nursing services in accordance
120 with patients' needs and generally accepted standards of practice on the date identified in
121 the complaint or during an on-site investigation, the division shall take appropriate actions
122 as authorized in Code Section 31-2-8.

123 31-7-35.

124 (a) There is hereby established an advisory commission, composed of nine members as
125 follows:

126 (1) The following members appointed by the Governor:

127 (A) An expert in nursing practice, quality of nursing care, or patient care standards;

128 (B) A representative of associations representing nurses; and

129 (C) A representative of a hospital;

130 (2) The following members appointed by the President of the Senate:

131 (A) An expert in nursing practice, quality of nursing care, or patient care standards;

132 (B) A representative of associations representing nurses; and

133 (C) A representative of a hospital; and

134 (3) The following members appointed by the Speaker of the House of Representatives:

135 (A) An expert in nursing practice, quality of nursing care, or patient care standards;

136 (B) A representative of associations representing nurses; and

137 (C) A representative of a hospital.

138 The members of the advisory commission shall serve at the pleasure of the appointing
139 official. Members of the advisory commission shall keep confidential any information

140 received in the course of their duties and shall only use such information in the course of
141 carrying out their duties on the advisory commission, except those reports required to be
142 issued by the commission under this Code section, which shall only include de-identified
143 information.

144 (b) The advisory commission shall convene annually in order to evaluate the effectiveness
145 of the nurse staffing committees established pursuant to Code Section 31-7-32. Such
146 review shall evaluate quantitative and qualitative data, including, but not limited to,
147 whether staffing levels were improved and maintained, patient satisfaction, employee
148 satisfaction, patient quality of care metrics, workplace safety, and any other metrics the
149 advisory commission deems relevant.

150 (c) The advisory commission may collect and shall be provided all relevant information
151 necessary to carry out its functions from the department and other appropriate state
152 agencies. The commission may also invite testimony by experts in the field and from the
153 public. In making its recommendations pursuant to subsection (d) of this Code section, the
154 advisory commission shall analyze relevant data, including data and factors contained in
155 subsection (a) of Code Section 31-7-31 related to nurse services staffing plans. The
156 advisory commission may also make recommendations for additional or enhanced
157 enforcement mechanisms or powers to address hospital failure to comply with this article
158 and recommend the appropriation of funding for the department to enforce this article or
159 to assist hospitals in hiring additional staff to comply with this article.

160 (d) The advisory commission shall submit to the Speaker of the House of Representatives,
161 the President of the Senate, and the chairpersons of the House Committee on Health and
162 Senate Health and Human Services Committee, and make available to the public, a report
163 that includes recommendations for further legislative action, if any, in order to improve
164 working conditions and quality of care in hospitals pursuant to the intent of this article.

165 (e) Any information collected pursuant to Code Section 31-7-33 and provided to the
166 advisory commission shall not be subject to Article 4 of Chapter 18 of Title 50."

167

SECTION 2.

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