

The House Committee on Health offers the following substitute to HB 745:

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:

## 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 a hospital  
23 authority; provided, however, that this shall not include a state-owned or operated  
24 hospital.25 (3) 'Nurse services staffing plan' means the staffing plan required to be established by a  
26 hospital pursuant to Code Section 31-7-31.27 (4) 'Nurse staffing committee' means the standing committee established by a hospital  
28 pursuant to Code Section 31-7-32.29 (5) 'Patient care unit' means a unit or area of a hospital in which registered nurses provide  
30 patient care.31 31-7-31.32 (a) The governing body of a hospital shall adopt and implement a written nurse services  
33 staffing plan to ensure that an adequate number and skill mix of nurses are available to  
34 meet the level of patient care needed. Such plan shall include a process for:35 (1) Requiring the hospital to give significant consideration to the nurse services staffing  
36 plan recommended by the hospital's nurse staffing committee and to that committee's  
37 evaluation of any existing plan;

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

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

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

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

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

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

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

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

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

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

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

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

61 (c) A hospital shall:

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

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

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

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

68 31-7-32.

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

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

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

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

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

76 (2) Represent different inpatient care units, such as, but not limited to, medical/surgical,  
77 intensive care, and cardiac.

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

79 (f) The committee shall:

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

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

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

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

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

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

95 31-7-33.

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

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

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

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

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

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

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

112 31-7-34.

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

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

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

124 31-7-35.

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

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

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

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

130 (C) A representative of a hospital;

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

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

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

134 (C) A representative of a hospital; and

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

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

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

138 (C) A representative of a hospital.

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

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

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

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

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

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

168

**SECTION 2.**

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