

The Commonwealth of Massachusetts

PRESENTED BY:

Daniel J. Ryan

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act relative to workforce development and patient safety.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
Daniel J. Ryan	2nd Suffolk	1/13/2021
James M. Murphy	4th Norfolk	2/24/2021
Michael D. Brady	Second Plymouth and Bristol	2/17/2021
Thomas M. Stanley	9th Middlesex	2/24/2021
Patricia A. Duffy	5th Hampden	2/25/2021
Timothy R. Whelan	1st Barnstable	2/26/2021
Susan L. Moran	Plymouth and Barnstable	2/26/2021
Carol A. Doherty	3rd Bristol	2/26/2021
Lindsay N. Sabadosa	1st Hampshire	3/4/2021
Kelly W. Pease	4th Hampden	3/4/2021
Steven C. Owens	29th Middlesex	3/8/2021
Peter Capano	11th Essex	3/9/2021
Brian M. Ashe	2nd Hampden	3/9/2021
Walter F. Timilty	Norfolk, Bristol and Plymouth	3/9/2021
Michael P. Kushmerek	3rd Worcester	3/26/2021
David Biele	4th Suffolk	4/6/2021

By Mr. Ryan of Boston, a petition (accompanied by bill, House, No. 2398) of Daniel J. Ryan and others relative to workforce development and patient safety. Public Health.

[SIMILAR MATTER FILED IN PREVIOUS SESSION SEE HOUSE, NO. 2004 OF 2019-2020.]

The Commonwealth of Alassachusetts

In the One Hundred and Ninety-Second General Court (2021-2022)

An Act relative to workforce development and patient safety.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 SECTION 1 : To ensure a stable, diverse workforce of nurses for citizens of the 2 Commonwealth wherever they may be receiving health services, ensure safe patient care, and 3 avoid complications and preventable hospital readmissions, the department shall commission, in 4 consultation with the health policy commission, at least three independent studies designed to 5 determine: (1) the makeup of the current licensed nursing workforce, including, but not limited 6 to: its diversity, skill mix, specialization, classification, work hours, education and student debt 7 burden; (2) estimated licensed nurses required to meet the health care needs for the citizens of 8 the commonwealth from now through the year 2050, with attention to graduation rates, nurse 9 recruitment and retention, turnover, attrition by leaving the profession and attrition by retirement; 10 (3) workplace injuries and quality of work life; (4) data on the current direct care staffing plan 11 for all units for all shifts in each acute care hospital and the actual staffing of all units for all

12 shifts in each acute care hospital; (5) best practice for maximum nurse-to-patient limits for direct 13 care licensed nurses in acute care hospitals for each type of unit, taking into account the ability to 14 adjust such limits based on the acuity of the patients cared for, and excluding the limits 15 established under section 231 of chapter 111 of the General Laws; and (6) the cost and timing to 16 establish maximum limits, including implementation costs, cost savings associated with such 17 limits and the impact on patient outcomes. The studies' design and implementation shall include 18 a review of current best available research, data on current hospital practices including staffing 19 plans for each unit and be done in consultation with core stakeholders, including, but not limited 20 to, the Massachusetts Nurses Association (MNA), Massachusetts Health and Hospital 21 Association (MHA), and the respective professional associations of the various specialty areas of 22 nursing for each unit, excluding the limits established under section 231 of chapter 111 of the 23 General Laws, to develop research specific to Massachusetts. Such research studies shall 24 include longitudinal design analysis over a minimum of ten years to determine patterns among 25 nurse-sensitive outcomes, reviewing not less than 5 of the nurse sensitive outcomes that are the 26 most empirically associated with nurse staffing by specialty in all Massachusetts acute care 27 hospitals.

The studies shall be completed no later than January 1, 2024 and released to the public no later than 12 months from the commencement of each study. The department shall subsequently develop a plan and timeframe to implement the best practice limits as well as other recommendations established in the study including patient and public awareness and enforcement mechanisms, including, but not limited to, the ability to assess fines for noncompliance.