

**HOUSE . . . . . No. 1995**

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**The Commonwealth of Massachusetts**

PRESENTED BY:

*Kay Khan*

*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 to promote patient care transparency and nurse advancement.

PETITION OF:

NAME:	DISTRICT/ADDRESS:
<i>Kay Khan</i>	<i>11th Middlesex</i>
<i>Jason M. Lewis</i>	<i>Fifth Middlesex</i>
<i>Marcos A. Devers</i>	<i>16th Essex</i>
<i>Michael O. Moore</i>	<i>Second Worcester</i>
<i>Denise Provost</i>	<i>27th Middlesex</i>

**HOUSE . . . . . No. 1995**

By Ms. Khan of Newton, a petition (accompanied by bill, House, No. 1995) of Kay Khan and others relative to patient safety quality indicators. Public Health.

**The Commonwealth of Massachusetts**

**In the One Hundred and Eighty-Ninth General Court  
(2015-2016)**

An Act to promote patient care transparency and nurse advancement.

*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: Chapter 111 of the General Laws is hereby amended by inserting the  
2 following new section 232:-

3 Section 232. For the purposes of this section, the the following words shall have the  
4 following meanings:

5 a) "Hospital", a hospital licensed under section 51 of chapter 111, the teaching  
6 hospital of the University of Massachusetts medical school, a private licensed hospital; provided,  
7 however, that "hospital" shall not include a hospital or unit classified as either an inpatient  
8 rehabilitation facility, an inpatient psychiatric facility, an inpatient substance abuse facility, or a  
9 long term care hospital by the federal Centers for Medicare and Medicaid Services, as well as a  
10 state-owned and state-operated general acute care hospital, or an acute care unit within a state-  
11 operated facility.

12           b)       “Staffing plan”, a written report that indicates the team of patient care  
13 professionals involved in the direct care of patients for the following units in each hospital:  
14 medical, surgical, intensive care units, skilled nursing care, step down or intermediate care,  
15 emergency departments, and such other units as determined by the Department.

16           A hospital shall report to the Department on an annual basis its staffing plan for the  
17 preceding year. The staffing plan shall include, but not be limited to, the following:

18           a)       consideration and inclusion of patient care professionals who have productive  
19 hours with direct patient care responsibilities greater than 50% of their shift who are counted in  
20 the staffing matrix and replaced if they call in sick; provided however that such staffing plan  
21 shall exclude monitor technicians, students, and sitters/patient observers;

22           b)       the inclusion of additional different care team members who are available  
23 resources to the unit on a given shift (Day, Evening, Night) who support the direct caregivers in  
24 providing care to patients and families on the unit; and

25           c)       in a general narrative form appended to the report, discussion of: the complexity  
26 of clinical judgment needed to design and implement a patient’s nursing care plan; the varying  
27 acuity of patients; the need for specialized equipment and technology; the skill mix of other  
28 patient care team members providing or supporting direct patient care; patient care team member  
29 experience, preparation and involvement in quality improvement activities professional  
30 preparation and experience; and the patient centered nursing activities carried out by unit-based  
31 staff in the presence of the patient (e.g., medication administration, nursing treatments, nursing  
32 rounds, admission/transfer/discharge, patient teaching, patient communication) and nursing

33 activities that occur away from the patient that are related (e.g., coordination of patient care,  
34 documentation, treatment planning).

35 The Department shall post the reports in an electronic format, published on the  
36 department website and available to the public.

37 The Department shall develop a process or use an existing statewide reporting system  
38 that is in place by the hospitals that collects, monitors and evaluates three to five related patient  
39 safety quality indicators from the nationally recognized measures endorsed by the National  
40 Quality Forum such as pressure ulcers, patient falls, and patient falls with injury, catheter  
41 associated urinary tract infection (CAUTI) and central line associated blood stream infection  
42 (CLABSI). The department shall require reporting of information based on existing state and  
43 federal data reporting requirements. The department shall annually issue to the general public  
44 hospital-specific data and aggregated industry trends developed from these reports.

45 SECTION 2: Notwithstanding any general or special law to the contrary, there shall be a  
46 Special Commission on Nursing Education and Experience, which shall be jointly chaired by the  
47 commissioner of the Department of Public Health or a designee and the commissioner of the  
48 Department of Higher Education or a designee. The commission shall make recommendations  
49 necessary to advance the practice of nursing through the design of academic pathways and  
50 supports needed to ensure that 65% of licensed registered nurses in the commonwealth have  
51 obtained a baccalaureate of science in nursing degree by the year 2020; 85% of licensed  
52 registered nurses have obtained a baccalaureate of science in nursing degree by 2025; and, 95%  
53 of licensed registered nurses have obtained a baccalaureate of science in nursing degree by 2030.  
54 The Commission shall issue its recommendations no later than January 1, 2016.

55           In addition to the commissioner of public health and the commissioner of higher  
56 education, the commission shall include 12 members: the executive director of the  
57 Massachusetts Board of Registration in Nursing; a representative of the Organization of Nurse  
58 Leaders of Massachusetts and Rhode Island; a representative of the Massachusetts Hospital  
59 Association; a representative of the Massachusetts Association of Colleges of Nursing; a  
60 representative of the Massachusetts/Rhode Island League for Nursing (MARILN); a  
61 representative of the American Nurses Association Massachusetts; a representative of the  
62 Massachusetts Nurses Association (MNA); a representative of the Massachusetts Community  
63 Colleges; a representative of the Association of Independent Colleges and Universities of  
64 Massachusetts; a representative of AARP Massachusetts; a representative of a veterans  
65 administration hospital; a representative of the Massachusetts State Universities; a representative  
66 of the Massachusetts Senior Care Association, and a representative of the Home Care Alliance of  
67 Massachusetts.