HOUSE No. 1995

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:	DATE ADDED:
Kay Khan	11th Middlesex	1/15/2015
Jason M. Lewis	Fifth Middlesex	10/10/2019
Marcos A. Devers	16th Essex	2/3/2015
Michael O. Moore	Second Worcester	1/23/2015
Denise Provost	27th Middlesex	1/29/2015

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 Alassachusetts

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 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
- state-owned and state-operated general acute care hospital, or an acute care unit within a state-
- 11 operated facility.

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

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

- a) consideration and inclusion of patient care professionals who have productive hours with direct patient care responsibilities greater than 50% of their shift who are counted in the staffing matrix and replaced if they call in sick; provided however that such staffing plan shall exclude monitor technicians, students, and sitters/patient observers;
- b) the inclusion of additional different care team members who are available resources to the unit on a given shift (Day, Evening, Night) who support the direct caregivers in providing care to patients and families on the unit; and
- c) in a general narrative form appended to the report, discussion of: the complexity of clinical judgment needed to design and implement a patient's nursing care plan; the varying acuity of patients; the need for specialized equipment and technology; the skill mix of other patient care team members providing or supporting direct patient care; patient care team member experience, preparation and involvement in quality improvement activities professional preparation and experience; and the patient centered nursing activities carried out by unit-based staff in the presence of the patient (e.g., medication administration, nursing treatments, nursing rounds, admission/transfer/discharge, patient teaching, patient communication) and nursing

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

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

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

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

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