HOUSE DOCKET, NO. 929 FILED ON: 1/17/2017

HOUSE . . . . . No. 1186

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*	*1/17/2017*
Chris Walsh	*6th Middlesex*	*2/2/2017*

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HOUSE . . . . . No. 1186

By Ms. Khan of Newton, a petition (accompanied by bill, House, No. 1186) of Kay Khan and Chris Walsh for legislation to require hospitals to report staffing plans to the Department of Public Health . Public Health.

The Commonwealth of Massachusetts

In the One Hundred and Ninetieth General Court
(2017-2018)

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:

SECTION 1: Chapter 111 of the General Laws is hereby amended by inserting the following new section 232:-

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

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

b) "Staffing data", the unit level budgeted staffing data for the upcoming fiscal year as well as the unit level actual staffing data for the preceding fiscal year 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, rehabilitation, behavioral health, skilled nursing care, step down or intermediate care, emergency departments, and such other units as determined by the Department.

A hospital shall submit the staffing data for its fiscal year to the Department on an annual basis. The staffing data 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 to collect standardized nursing-sensitive quality measures that are evidence-based, nationally-accepted patient safety quality indicators that shall be consistent with those established pursuant to section 231. Reporting shall be done in the same manner as 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 66% of licensed registered nurses in the Commonwealth have obtained a minimum of a bachelor's degree or higher in nursing by the year 2020; 85% of licensed registered nurses have obtained a minimum of a bachelor's degree or higher in nursing by 2025; and, 95% of licensed registered nurses have obtained a minimum of a bachelor's degree or higher in nursing by 2030. The Commission shall issue its recommendations no later than January 1, 2018.

In addition to the commissioner of public health and the commissioner of higher education, the commission shall include 15 members: the executive director of the Massachusetts Board of Registration in Nursing or designee; a representative of the Organization of Nurse Leaders of Massachusetts, Rhode island, New Hampshire, and Connecticut; a representative of the Massachusetts Health and 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 Massachusetts Action Coalition included in the Robert Wood Johnson Foundation's Academic Progression in Nursing initiative; a representative of the American Nurses Association Massachusetts; a representative of the Massachusetts Nurses Association; a representative of the Massachusetts Community Colleges Executive Office; 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 Council of Presidents of the Massachusetts State University System; a representative of the Massachusetts Senior Care Association, and a representative of the Home Care Alliance of Massachusetts.