

The House Committee on Health offers the following substitute to HB 298:

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 the establishment of nurse staffing committees;
5 to provide for annual reports of staffing information to the Department of Community
6 Health; to provide for anonymous reports and investigations of unsafe staffing conditions;
7 to establish an advisory commission; to provide for related matters; to repeal conflicting
8 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) 'Hospital' means a hospital which is permitted to operate by the department pursuant
20 to Article 1 of this chapter, including a hospital maintained or operated by a hospital
21 authority; provided, however, that this shall not include a state owned or operated
22 hospital.

23 (2) 'Nurse services staffing plan' means the written staffing plan required to be
24 established by a hospital pursuant to Code Section 31-7-31.

25 (3) 'Nurse staffing committee' or 'committee' means the standing committee established
26 by a hospital pursuant to Code Section 31-7-32.

27 (4) 'Patient care unit' means a hospital's emergency department and any unit or
28 department of a hospital in which registered nurses provide direct patient care to
29 inpatients.

30 31-7-31.

31 (a) The governing body of a hospital shall adopt and implement a written nurse services
32 staffing plan to provide that an adequate number and skill mix of nurses are available to
33 meet the level of patient care needed for the hospital's patient care units. Such plan shall
34 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 a nurse services staffing plan that is based on an
39 assessment of the needs of each patient care unit and shift, including evidence relating
40 to patient care needs of each patient care unit at the hospital;

41 (3) Considering the 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 nurse services staffing plan adopted pursuant to subsection (a) of this Code section
49 shall:

50 (1) Consider the nurse staffing standards established by the Joint Commission or other
51 nationally recognized accreditation organizations, by the department, or by nationally
52 recognized hospital associations;

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

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 periodically adjusting the nurse services staffing plan for each
58 patient care unit to address significant changes in utilization or other circumstances that
59 impact nurse staffing and require staffing flexibility to meet patient needs; and

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

62 (c) A hospital shall:

63 (1) Consider the nurse services staffing plan:

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

65 (B) To guide the hospital in assigning nurses to patient care units; and
66 (2) Make readily available to nurses on each patient care unit at the beginning of each
67 shift the nurse services staffing plan levels and current staffing levels for that unit and
68 that shift.

69 31-7-32.

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

72 (b) The committee shall be composed of members who are representative of the types of
73 nursing services provided in the hospital's patient care units.

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

75 (d) At least 75 percent of the members of the committee shall be registered nurses who:

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

77 (2) Represent different patient care units provided by the hospital.

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 nurse services staffing plan for the patient care units;

85 (4) Evaluate, at least semiannually, the effectiveness of the nurse services staffing plan,
86 including the reasons for any significant variations between the plan and the actual
87 staffing; and

88 (5) Submit to the hospital's governing body, at least semiannually, a report on nurse
89 staffing and outcomes on the nurse-sensitive outcome measures reviewed by the
90 committee, including the committee's evaluation of the effectiveness of the nurse services

91 staffing plan and aggregate variations between the nurse services staffing plan and actual
92 staffing.

93 (g) In evaluating the effectiveness of the nurse services staffing plan, the committee shall
94 consider, but is not limited to considering, patient needs, workforce shortages and
95 availability, the nurse-sensitive outcome measures reviewed by the committee, any nurse
96 satisfaction measures collected by the hospital for the patient care units, and any nationally
97 recognized, written, evidence based nurse staffing benchmarks.

98 (h) All proceedings, records, and reports of the committee shall be deemed confidential
99 review organization records under Code Section 31-7-133 and shall not be subject to
100 Article 4 of Chapter 18 of Title 50. The nurse staffing plan adopted by a hospital shall not
101 be subject to discovery or introduction into evidence in any civil action; and no person who
102 was in attendance at a meeting of such committee shall be permitted or required to testify
103 in any such civil action as to any evidence or other matters produced or presented during
104 the proceedings or activities of the committee or as to the findings, recommendations,
105 evaluations, opinions, or other actions of such committee or any members thereof.

106 31-7-33.

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

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

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

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

116 (4) The nurse-sensitive outcome measures the committee adopted for use in evaluating
117 the hospital's nurse services staffing plan.

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

121 (c) The reports provided by the hospitals under subsection (a) of this Code section shall
122 not be subject to Article 4 of Chapter 18 of Title 50.

123 31-7-34.

124 (a) The department shall maintain a secure online portal for the submission by hospital
125 staff members of anonymous reports of unsafe staffing conditions in any hospital patient
126 care unit, provided that the forms for reporting shall require specificity, including the
127 patient care unit; the date, time, and description of the conditions deemed unsafe; and any
128 supporting information.

129 (b) Upon receipt of a report that complies with subsection (a) of this Code section, the
130 department shall forward the report to its Healthcare Facility Regulation Division for
131 possible investigation and to the nurse staffing committee of the hospital that is the subject
132 of the report.

133 (c) If the Healthcare Facility Regulation Division determines that a patient care unit
134 identified in a report made under subsection (a) of this Code section failed to comply with
135 nurse staffing requirements established by the department or violated any rule or regulation
136 relating to the licensing of hospitals on the date identified in the complaint or during an
137 on-site investigation, the Healthcare Facility Regulation Division is authorized to take
138 appropriate actions under the provisions of Code Section 31-2-8.

139 (d) The reports provided by hospital staff members under subsection (a) of this Code
140 section shall not be subject to Article 4 of Chapter 18 of Title 50.

141 31-7-35.

142 (a) There is hereby established an advisory commission, composed of 12 members as
143 follows:

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

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

146 (B) A representative of an association representing nurses; and

147 (C) Two representatives of an association representing hospitals;

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

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

150 (B) A registered nurse who provides direct patient care at a hospital at least 50 percent
151 of the work time; and

152 (C) Two representatives of a hospital in a rural county; and

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

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

155 (B) A representative of an association representing nurses; and

156 (C) Two representatives of a hospital.

157 (b) The members of the advisory commission shall serve at the pleasure of the appointing
158 official. Members of the advisory commission shall keep confidential any information
159 received in the course of their duties and shall only use such information in the course of
160 carrying out their duties on the advisory commission, except those reports required to be
161 issued by the commission under this Code section, which shall only include de-identified
162 information that cannot reasonably be used to identify any person, hospital, or other entity.

163 (c) The advisory commission shall convene annually in order to evaluate the effectiveness
164 of the nurse staffing committees established pursuant to Code Section 31-7-32. Such
165 review shall evaluate quantitative and qualitative data, including, but not limited to,
166 whether staffing levels were improved and maintained, patient satisfaction, employee

167 satisfaction, patient quality of care metrics, workplace safety, and any other metrics the
168 advisory commission deems relevant.

169 (d) The advisory commission may collect and shall be provided all relevant information
170 necessary to carry out its functions from the department and other appropriate state
171 agencies. The commission may also invite testimony by experts in the field and from the
172 public. In making its recommendations pursuant to subsection (e) of this Code section, the
173 advisory commission shall analyze relevant data provided by the department or other state
174 agencies, including data and factors contained in subsection (a) of Code Section 31-7-31
175 related to nurse services staffing plans. The advisory commission may also make
176 recommendations for additional or enhanced enforcement mechanisms or powers to
177 address hospital failure to comply with this article and recommend the appropriation of
178 funds for the department to enforce this article or to assist hospitals in recruiting or hiring
179 additional nursing staff.

180 (e) The advisory commission shall submit to the Speaker of the House of Representatives,
181 the President of the Senate, and the chairpersons of the House Committee on Health and
182 Senate Health and Human Services Committee, and make available to the public, a report
183 that may include recommendations for further legislative action, if any, in order to improve
184 nurse staffing in hospitals pursuant to the intent of this article.

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

187 **SECTION 2.**

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