AN ACT

Amending the act of July 19, 1979 (P.L.130, No.48), entitled "An act relating to health care; prescribing the powers and duties of the Department of Health; establishing and providing the powers and duties of the State Health Coordinating Council, health systems agencies and Health Care Policy Board in the Department of Health, and State Health Facility Hearing Board in the Department of Justice; providing for certification of need of health care providers and prescribing penalties," providing for professional nurse staffing standards.

The General Assembly of the Commonwealth of Pennsylvania hereby enacts as follows:

Section 1. The act of July 19, 1979 (P.L.130, No.48), known as the Health Care Facilities Act, is amended by adding a chapter to read:

CHAPTER 8-A

PROFESSIONAL NURSE STAFFING STANDARDS

Section 801-A. Scope of chapter.
This chapter relates to professional nurse staffing standards in general or special hospitals that will address patient safety and the delivery of quality nursing care to patients.

Section 802-A. Definitions.

The following words and phrases when used in this chapter shall have the meanings given to them in this section unless the context clearly indicates otherwise:

"Direct patient care." Care provided by a staff member with direct responsibility to carry out medical regimens or nursing care for one or more patients.

"Hospital unit." An area in a hospital where direct patient care is provided.

"Magnet hospital." A hospital recognized by the American Nurses Credentialing Center as a magnet or pathway to excellence hospital.

"Professional nurse." An individual who holds a license to practice professional nursing under the act of May 22, 1951 (P.L.317, No.69), known as The Professional Nursing Law.

"Quality measures." Measures or indicators derived from various sources. The term includes, but is not limited to, claims and medical records that allow the organization to evaluate processes and outcomes of care and nursing-sensitive indicators endorsed by the National Quality Forum or that are part of the National Database for Nursing Quality Indicators.

"Staffing committee." The professional nurse staffing committee or committees established under section 804-A.

"Staffing plan." The professional nurse staffing plan established under section 803-A.

Section 803-A. Organizational development of professional nurse staffing plan.
A hospital shall develop, implement and monitor a professional nurse staffing plan for each hospital unit. The development of the plan shall occur internally by a professional nurse staffing committee or committees established under section 804-A.

Section 804-A. Staffing committees.

(a) Establishment.--A hospital shall establish at least one staffing committee within 120 days of the effective date of this section. The staffing committee shall meet at least two times each year.

(b) Membership.--The membership of the staffing committee shall be split evenly between professional nurses currently providing direct patient care in the hospital and administrative staff. The following shall apply:

(1) Professional nurses currently providing direct patient care in the hospital shall be selected by their peers on an anonymous basis to serve on the committee.

(2) Administrative staff may be appointed at the discretion of the board of directors or president of the hospital and shall include at least one individual with experience with the hospital's budget or financial condition.

(3) For a hospital recognized as a magnet hospital, the administrative staff shall include at least one individual with experience of the magnet recognition process.

(c) Oversight.--The chairperson of the staffing committee shall ensure that the staffing committee develops a staffing plan for each unit and that the plans are evaluated by the hospital at least twice annually.

(d) Vacancies.--If a vacancy occurs on the staffing committee, the vacant position shall be filled no later than 60
days after notice of the vacancy and shall follow the parameters for membership as provided for under subsection (b).

Section 805-A. Duties and responsibilities of hospital.

A hospital shall have the following duties and responsibilities:

(1) Establish the staffing committee required to develop the staffing plan prescribed in section 804-A within 120 days of the effective date of this section.

(2) Provide the education and parameters necessary for staff to create a staffing plan given the available resources of the hospital so that staff can responsibly develop the staffing plan within 180 days of the effective date of this section.

(3) Adopt the staffing plan in a timeline that is consistent with the hospital budgetary planning process.

(4) Make accessible to all nursing staff the final and approved staffing plan for the units in the hospital.

(5) Evaluate staffing plans and report to the staffing committee no less than twice annually, pertaining to implementation, barriers to implementation and other concerns relating to staffing plans.

(6) Develop and implement a plan of action with the assistance of professional nurses providing direct patient care and other appropriate staff, if there is evidence of noncompliance with the staffing plan and the noncompliance with the staffing plan negatively impacts patients and professional nurses.

(7) Establish a process by which immediate concerns about nurse staffing can be reported and addressed within nursing and inform the professional nurse staff of the
(8) Develop mechanisms by which nursing staff can raise concerns and make recommendations about the staffing plans either through the existing staffing committee or nursing administration, or both.

(9) Ensure that the chief nursing officer receives periodic reports from the staffing committee in a format developed by the hospital to ensure that consistent information is captured.

(10) Receive reports from other hospital committees, including, but not limited to, the patient safety committee and quality committee, that may be related to nurse staffing.

(11) Provide an annual report, for internal purposes, to the chief executive officer, the staffing committee and the governing board relating to nurse staffing, including, but not limited to, compliance with the approved nurse staffing plans and any actions taken to address nurse staffing issues.

(12) Make available to all patients information on how to make a request for the staffing plan, including the appropriate person, office or department that may be contacted to review or obtain a copy of the plan.

(13) Comply with act of December 12, 1986 (P.L.1559, No.169), known as the Whistleblower Law, and section 307(b)(4) of the act of March 20, 2002 (P.L.154, No.13), known as the Medical Care Availability and Reduction of Error (Mcare) Act.

Section 806-A. Duties and responsibilities of staffing committees.

The staffing committee shall have the following duties and responsibilities:
(1) Develop a staffing plan, in a timeline that is consistent with the hospital budgetary planning process, for each hospital unit as prescribed in section 803-A within 180 days following the effective date of this section.

(2) Elect a chairperson from within the staffing committee who is a professional nurse that provides direct patient care.

(3) Develop a staffing plan that takes into consideration variables that can influence the staffing plan for that hospital unit. The variables include, but are not limited to, the following:

(i) The special skills and competencies required by the nursing staff in that hospital unit to provide care to the hospital unit's patient population to ensure the delivery of quality care and quality outcomes.

(ii) Staffing standards recommended by nationally recognized professional nursing organizations, particularly those that address professional standards of care for the selected patient population.

(iii) Staff skill mix, specialty certification and years of experience.

(iv) The numbers and types of other professional, paraprofessional or support staff that professional nurses must collaborate with or supervise to ensure the delivery of quality care and quality outcomes.

(v) Patient volume, patient acuity, nursing care intensity and patient turnover issues that can affect the numbers and types of staff required for the patient population in a hospital unit.

(vi) The time needed to complete various key nursing
tasks, including, but not limited to, surveillance, patient assessment, patient education and discharge planning.

(vii) The physical environment in which care is provided, including, but not limited to, the physical architecture of each hospital unit, patient location and available technology of the health care facility.

(4) Approve the plan with a vote in favor of the plan of at least 66% of the staff committee.

(5) Ensure that the plan contains information informing professional nurses how to report concerns about noncompliance with the staffing plan to a person designated by the staffing committee.

(6) Review the plan at least twice annually and adjust the plan as determined by the staffing committee in accordance with the provisions of this section and review information received from the hospital under section 805-A.

Section 807-A. Duties and responsibilities of department.

(a) Form.--The department shall develop a form to be completed by an individual designated by the department to inspect a hospital under section 806.4.

(b) Penalty.--The department may impose an administrative penalty of $1,000 per day upon any hospital not in compliance with this chapter.

(c) Regulations.--The department shall promulgate regulations necessary to implement the provisions of this chapter.

Section 808-A. Safe Staffing Penalty Account.

(a) Establishment.--The Safe Staffing Penalty Account is established as a restricted account in the General Fund.
(b) Deposit.--The department shall deposit money collected from the penalty imposed under section 807-A(b) into the account.

(c) Use.--Money in the account is appropriated on a continuing basis to the department for use in the performance of its duties.

Section 809-A. Confidentiality.

The following shall apply:

(1) The department shall ensure confidentiality of any reports made under this chapter in accordance with the act of June 10, 2009 (P.L.1, No.1), known as the Preventable Serious Adverse Events Act.

(2) The department shall ensure the confidentiality of the annual report required by section 805-A(11). The annual report shall not be included in the discovery process of any subsequent lawsuits filed against a hospital.

Section 2. This act shall take effect in 180 days.