
THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 2244 Session of
2015

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ROZZI AND VEREB, JULY 7, 2016

REFERRED TO COMMITTEE ON HEALTH, JULY 7, 2016

AN ACT

1 Providing for the compilation of daily nursing staff reports by
2 hospitals, for public posting of reports and for reporting to
3 the Department of Health; and imposing duties on the
4 Department of Health.

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

7 CHAPTER 1

8 GENERAL PROVISIONS

9 Section 101. Short title.

10 This act shall be known and may be cited as the Hospital
11 Nursing Staff Report Card Act.

12 Section 102. Purpose.

13 The General Assembly finds and declares as follows:

14 (1) The purpose of this act is to provide the public
15 information about nurse staffing practices in hospitals in
16 this Commonwealth so that patients can make informed
17 decisions about their choices of health care providers.

18 (2) Information on nurse staffing levels, such as the

1 nurse staffing plan, including the number of registered
2 nurses, licensed practical nurses, certified nursing
3 assistants and unlicensed assistive personnel on duty, should
4 be made available to the public in recognition of the fact
5 that hospital caregivers contribute to improved patient
6 safety and health care outcomes.

7 Section 103. Definitions.

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

11 "Actual hours worked." The actual hours worked by a nurse
12 providing direct patient care during any portion of the nurse's
13 shift. The term includes a nurse's fifteen-minute breaks. The
14 term does not include meal breaks, benefit time, vacation,
15 medical leave, orientation, education or committee time.

16 "Department." The Department of Health of the Commonwealth.

17 "Direct care nurse" and "direct care nursing staff." A unit-
18 based registered nurse, licensed practical nurse or certified
19 nursing assistant with direct responsibility to oversee or carry
20 out medical regiments or nursing care for one or more patients.
21 The term does not include caseworkers, educators or nurse
22 specialists, such as a stoma nurse specialist, cardiac
23 rehabilitation nurse or wound care nurse, who concentrates on
24 only one facet of a patient's care and who interacts with
25 multiple patients in various hospital units.

26 "Hospital." A health care facility licensed under the act of
27 July 19, 1979 (P.L.130, No.48), known as the Health Care
28 Facilities Act. The term includes critical access and long-term
29 acute care hospitals in both the private and public sector.

30 "Long-term acute care hospital." A hospital or health care

1 facility that specializes in providing acute care to medically
2 complex patients with an anticipated length of stay of more than
3 25 days. The term includes a free-standing and a hospital-
4 within-hospital model long-term acute care facility.

5 "Nursing care." A care service that falls within the scope
6 of practice set forth in the act of May 22, 1951 (P.L.317,
7 No.69), known as The Professional Nursing Law, or is otherwise
8 encompassed within recognized professional standards of nursing
9 practice, including assessment, nursing diagnosis, planning,
10 intervention, evaluation, patient teaching, discharge planning
11 and patient advocacy.

12 "Overflow." When the volume of patients outnumbers the beds
13 of a licensed unit and the beds in another licensed unit are
14 used for those patients.

15 "Patient care unit." A unit within a hospital that:

16 (1) is a specific geographical or physical location
17 within the hospital;

18 (2) is designated a specific cost center; or

19 (3) provides clinical services by a generic class of
20 levels of support functions, equipment, care or treatment
21 provided to inpatients.

22 "Shift." A standardized reporting period based upon the
23 actual standard of scheduling shifts common to the hospital to
24 be reported as either three eight-hour periods, consisting of
25 morning, evening and night periods, or two twelve-hour periods,
26 consisting of day and night. The emergency room and the post-
27 anesthesia care unit, in those hospitals where the post-
28 anesthesia care unit is open twenty-four hours daily, shall
29 report a twenty-four hour shift.

30 "Sitters." Companions to patients at high risk of falls,

1 suicide or other conditions.

2 "Turnover rate." The percentage of direct care nursing staff
3 that leaves a unit, either voluntarily or involuntarily.

4 "Unlicensed assistive personnel." An unlicensed individual
5 who is trained to function in an assistive role to the licensed
6 nurse in the provision of patient/client activities as delegated
7 by the nurse.

8 CHAPTER 2

9 NURSING STAFF REPORTING

10 Section 201. Nursing staff report.

11 (a) General rule.--A hospital shall compile a daily report
12 on each patient care unit and shift containing the following
13 information:

14 (1) The number of each of the following types of staff
15 per four-hour time period providing direct patient care:

- 16 (i) Registered nurses.
- 17 (ii) Licensed practical nurses.
- 18 (iii) Certified nursing assistants.
- 19 (iv) Unlicensed personnel.

20 (2) The relative number of patients to each of the
21 following types of staff:

- 22 (i) Registered nurses.
- 23 (ii) Licensed practical nurses.
- 24 (iii) Certified nursing assistants.
- 25 (iv) Unlicensed personnel.

26 (3) The current direct care nurse staffing schedule and
27 assignment roster.

28 (4) The availability, by number of hours on the shift,
29 that a unit clerk or unit secretary is available exclusively
30 for the specified patient care unit.

1 (5) Whether patients requiring scheduled or emergency
2 respiratory treatments have had treatments that were
3 administered by a respiratory therapist or the direct care
4 nursing staff of the unit.

5 (6) Percentage of temporary or agency nurses included in
6 the shift staff.

7 (7) The methods used by the hospital for determining and
8 adjusting staffing levels.

9 (8) The registered nurse, licensed practical nurse and
10 certified nursing assistant turnover rate for the previous
11 month.

12 (9) The number and types of complaints under the act of
13 June 10, 2009 (P.L.1, No.1), known as the Preventable Serious
14 Adverse Events Act, filed with the hospital concerning
15 patient care for the previous month.

16 (b) Reporting method.--The report required under subsection
17 (a) shall be compiled as follows:

18 (1) For each inpatient unit, a hospital shall count the
19 number of patients and direct care nursing staff based on
20 hours worked for each category of direct care nursing staff,
21 excluding other licensed health care professionals, one hour
22 before the end of each shift.

23 (2) For each emergency department, a hospital shall
24 count the number of patients registered during the four-hour
25 shift and the number of direct care nursing staff based on
26 hours worked for each category of direct care nursing staff,
27 excluding other licensed health care professionals, one hour
28 before the end of each shift.

29 (3) For each post-anesthesia care unit, a hospital shall
30 count the number of patients that were in the post-anesthesia

1 care unit during the shift and the number of direct care
2 nursing staff, based on hours worked for each category of
3 direct care nursing staff, excluding other licensed health
4 care professionals, one hour before the end of each shift.

5 (4) For each mother and baby unit, hospitals shall
6 report direct care nursing staff hours under the obstetrics
7 unit, not the newborn nursery. A mother and baby should each
8 be reported as a separate patient.

9 (5) For each psychiatric and behavioral unit, licensed
10 mental health counselors, activity therapists and
11 recreational therapists providing direct patient care shall
12 be considered as licensed practical nurses. Staffing hours
13 for unlicensed mental health technicians or other unlicensed
14 personnel will be included as unlicensed personnel hours.

15 (6) Graduate nurses who participate in an internship
16 program shall not be included in determining the relative
17 number of patients to direct care nursing staff, except
18 orientee or graduate nurse hours shall be included when the
19 graduate nurse has completed the designated time-defined
20 orientation and reaches the point where the graduate nurse is
21 considered part of the staff matrix, the graduate nurse's
22 work hours are charged to the unit and the graduate nurse is
23 replaced if the nurse calls in sick.

24 (7) When a direct care nurse works beyond the nurse's
25 shift into the next shift, the actual hours should be
26 included in the daily posting forms for all shifts that the
27 nurse worked.

28 (8) Hospital management and support staff who do not
29 provide direct patient care may not be included in the daily
30 reporting forms.

1 (9) Sitters, including registered nurses acting as
2 sitters, will be considered unlicensed assistive personnel
3 only if they provide other direct patient care in addition to
4 observation. Sitters providing only companion service may not
5 be included in the actual hours worked for unlicensed
6 assistive personnel.

7 (10) When overflow beds are used for patients, the
8 patients shall be included in the daily report of the patient
9 care unit where the patient is receiving care.

10 (11) The staff relative number reporting shall be to one
11 decimal point. If a hospital patient care unit does not have
12 any direct care nursing staff for a particular category, a
13 zero should be entered on the report for that staff category.

14 Section 202. Posting.

15 A hospital shall post the report required under section 201
16 as follows:

17 (1) The report shall be posted no later than one hour
18 after the beginning of a shift with respect to each shift.

19 (2) The report shall be prominently displayed in a
20 location visible to the public on the patient unit.

21 (3) The report shall be easily readable in its posted
22 form.

23 Section 203. Submission of report to department.

24 A hospital shall submit the daily reports for the previous
25 month to the department no later than the 15th day of each
26 month.

27 Section 204. Retention of records.

28 All daily reports and records required to compile the report
29 under section 201 shall be retained by the hospital for a period
30 of five years and be posted on the hospital's publicly

1 accessible Internet website.

2 Section 205. Exclusions.

3 The following apply:

4 (1) Outpatient units are excluded from reporting
5 requirements under this act.

6 (2) Patients under observation status are excluded from
7 reporting requirements under this act.

8 Section 206. Divisions and subsidiaries.

9 If a hospital is a division or subsidiary of another entity
10 that owns or operates another hospital or related organizations,
11 the report under section 201 shall be for the specific division
12 or subsidiary and not for any other entity.

13 Section 207. Whistleblower protection.

14 (a) General rule.--A hospital shall not discriminate,
15 retaliate in any manner, intimidate, threaten or punish an
16 employee with respect to compensation or the terms, conditions
17 or privileges of employment when the employee in good faith,
18 individually or in conjunction with another person, does any of
19 the following:

20 (1) Discloses to a nursing staff supervisor or manager,
21 a private accreditation organization, a nurse's collective
22 bargaining agent or a regulatory agency, any activity, policy
23 or practice of a hospital that violates this act or other law
24 or rule or that the employee believes poses a risk to the
25 health, safety or welfare of a patient or the public.

26 (2) Initiates, cooperates or otherwise participates in
27 an investigation or proceeding brought by a regulatory agency
28 or private accreditation body concerning matters covered by
29 this act or any law or rule that the employee reasonably
30 believes poses a risk to the health, safety or welfare of a

1 patient or the public.

2 (3) Objects or refuses to participate in any activity,
3 policy or practice of a hospital that violates this act or
4 any law or rule the department or a reasonable person would
5 believe poses a risk to the health, safety and welfare of a
6 patient or the public.

7 (4) Participates in a committee or peer review process
8 or files a report of complaint that discusses allegations of
9 unsafe, dangerous or potentially dangerous care within a
10 hospital.

11 (b) Employee good faith.--An employee is presumed to act in
12 good faith if the employee reasonably believes the following:

13 (i) The information reported or disclosed is true.

14 (ii) A staffing violation has occurred or may occur.

15 (c) Notice to hospital.--

16 (1) The protection under subsection (a) shall not apply
17 to an employee unless the employee gives written notice to a
18 direct nursing supervisor or direct nursing manager of the
19 activity, policy, practice or violation that the employee
20 believes poses a risk to the health of a patient or the
21 public and provides the manager a reasonable opportunity to
22 correct the problem.

23 (2) The direct nursing supervisor or direct nursing
24 manager shall respond in writing to the employee within seven
25 days to acknowledge that the notice was received. The direct
26 nursing supervisor or direct nursing manager shall provide
27 written notice of any action taken within a reasonable time
28 of receiving the employee's notice.

29 Section 208. Forms.

30 The department shall develop standardized reporting forms to

1 be used in all hospitals for reporting under this act.

2 Section 209. Quarterly Reports.--

3 (a) General rule.--The department shall produce a quarterly
4 report for each hospital that shows the average direct care
5 nurse staffing levels for each unit for a three-month period as
6 follows:

7 (1) Relative number of patients to staff for each type
8 of patient care unit.

9 (2) Turnover rate for direct care nursing staff.

10 (3) Percentage of contractual direct care nursing staff
11 utilized.

12 (4) Daily numbers of direct care nursing staff and
13 patients in the emergency department.

14 (5) Daily number of nonregistered nurse health care
15 practitioners.

16 (b) Posting.--The quarterly reports produced by the
17 department shall be made available to the public on the same
18 Internet website as the quality control measures reporting for
19 health care facilities. The department shall post quarterly
20 reports January 31, April 30, July 31 and October 31 of each
21 year. The data in the quarterly reports must cover a period
22 ending not earlier than one month prior to submission of the
23 report.

24 Section 210. Monitoring.

25 The department shall be responsible for monitoring the
26 reports from all hospitals in this Commonwealth for variances
27 between periods and to compare the reports to the reported
28 quality control measures to determine if there are correlations
29 or deficiencies in the quality measures.

30 Section 211. Compliance by hospitals.

