By Senator Braynon

36-00559-15 20151342

A bill to be entitled

An act relating to nurse staffing levels; creating s. 395.01922, F.S.; providing definitions; establishing a nurse staffing committee in each hospital; providing membership and duties; requiring the hospital to post and publicize the nurse staffing plan and schedule; providing an effective date.

WHEREAS, registered nurses play a critical role in patient safety and quality of care and the ever-worsening shortage of nurses available to provide care in acute care hospitals has necessitated multiple strategies to generate more nurses and improve the recruitment and retention of nurses in hospitals, and

WHEREAS, evidence-based nurse staffing can improve the quality of patient care and improve nurse satisfaction in the work environment, and hospital administrators and nursing organizations recognize a mutual interest in promoting initiatives that create a healthy environment for nurses and safe care for patients, and

WHEREAS, to protect patients, support greater retention of registered nurses, and promote evidence-based nurse staffing initiatives, the Legislature intends to establish a mechanism whereby direct patient care nurses and hospital management shall participate in a joint process regarding decisions about nurse staffing levels, NOW, THEREFORE,

Be It Enacted by the Legislature of the State of Florida:

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Section 1. Section 395.01922, Florida Statutes, is created to read:

395.01922 Nurse Staffing levels.-

- (1) DEFINITIONS.—As used in this section, the term:
- (a) "Acuity" means the level of patient need for nursing care, as determined by the nursing assessment.
- (b) "Employee injury or illness" means an unexpected physical or psychological injury or illness sustained by nursing staff in the performance of their nursing duties.
- (c) "Nursing personnel" means a registered nurse, a licensed practical nurse, a certified nursing assistant, or unlicensed assistive personnel who provide direct patient care.
- (d) "Patient care unit" means a unit or area of the hospital where patient care is provided by registered nurses.
- (e) "Sentinel event" means an unexpected patient death or injury as defined by the hospital.
- (f) "Skill mix" means the number and relative percentages of registered nurses, licensed practical nurses, certified nursing assistants, and unlicensed assistive personnel who provide direct patient care among the total number of nursing personnel.
 - (2) NURSE STAFFING COMMITTEE.—
- (a) By September 1, 2015, each hospital shall establish a nurse staffing committee, either by creating a new committee or assigning the functions of a nurse staffing committee to an existing committee. At least one-half of the members of the nurse staffing committee shall be registered nurses currently providing direct patient care and up to one-half of the members shall be determined by the hospital administration.

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- (b) The nurse staffing committee shall:
- 1. Develop and oversee an annual patient care unit and shift-based nurse staffing plan, based on the needs of patients, to be used as the primary component of the staffing budget.

 Factors to be considered in the development of the plan shall include, but are not limited to:
- <u>a. Census data, including total number of patients on the unit on each shift and activity such as patient discharges, admissions, and transfers.</u>
- <u>b. Level of acuity of each patient and nature of the care</u> to be delivered on each shift.
 - c. Skill mix.
- <u>d. Level of education, training, and experience of nursing</u> personnel providing care.
- e. The need for specialized or intensive equipment, including protective equipment.
- f. The architecture and geography of the patient care unit, including, but not limited to, placement of patient rooms, treatment areas, quarantine areas, nursing stations, medication preparation areas, and equipment, including protective equipment.
- g. Staffing guidelines adopted or published by national nursing professional associations, specialty nursing organizations, and other health professional organizations.
 - h. Hospital finances and resources.
- 2. Review and revise the nurse staffing plan semiannually, based on the needs of patients and evidence-based staffing information, including information relating to the quality of nursing care collected by the hospital.

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 $\underline{\mbox{3. Review, assess, and respond to staffing or other}}$ concerns.

- 4. Review data relating to sentinel events, employee injuries, and employee illnesses and evaluate whether the nurse staffing plan was a contributing factor. The committee shall revise the nurse staffing plan if staffing was a contributing factor to a sentinel event.
- (c) Each hospital shall post, in an employee area on each patient care unit, the nurse staffing plan and the nurse staffing schedule for the shift on that unit and the relevant clinical staffing for that shift.
- (d) Each hospital shall publish the nurse staffing plan on its website. Patients and visitors shall be provided with a print version of the nurse staffing plan upon request. The hospital shall provide the following information to patients and visitors:
- 1. Anticipated staffing mix for the requested unit, including the number of registered nurses, licensed practical nurses, nursing assistants, unlicensed personnel who provide direct patient care, and clerical support staff.
- 2. Anticipated number of registered nurses providing care in the requested unit for the requested period.
 - Section 2. This act shall take effect July 1, 2015.